

**The experiences and perceptions of the
Designated Liaison Person for Child
Protection in Irish Primary Schools**

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Abstract

The experiences and perceptions of the Designated Liaison Person for Child Protection in Irish Primary Schools

Margaret Nohilly.

The aim of this research was to explore the 'lived experience' of Designated Liaison Person (DLP's) for Child Protection in Primary Schools in Ireland, and the purpose of the research was to use the learning from the investigation to ensure that vulnerable children will be protected more adequately.

Following a review of the literature on child protection and the role of teachers and schools in the area, a survey questionnaire was distributed to thirty two DLP's in primary schools. From the questionnaires returned, sixteen DLP's were selected for interview; eight from schools designated as disadvantaged, and eight from non DEIS schools. The decision to choose eight DLP's from DEIS schools was taken in order to embody the richness of the lived experiences of DLP's. The other DLP's were selected to represent a variety of size and type of school and overall the DLP's had varying years of experience in the role. While several qualitative approaches were considered for this study, Interpretative Phenomenological Analysis (IPA) was deemed the most appropriate for this investigation.

The qualitative analysis produced a master list of themes, and superordinate and subordinate themes emerged, referring to major and minor themes. The superordinate themes were: 'The DLP Role', 'Experience of Dealing with Outside Agencies in relation to Child Protection Issues', 'The School Story', 'Children Telling' and 'Guidelines and Training'.

This study highlighted the role of the DLP as multifaceted and complex and open to interpretation in various circumstances. The greatest challenge faced by DLP's in this research was knowing when they have enough evidence and information to report an incident to the HSE. The tension exists for schools between supporting parents and reporting parents. Many educational implication for child protection work have been highlighted through this study and ultimately this work has uncovered the role of schools in child protection work in Ireland, which has been relatively unexplored to date.

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List of Abbreviations

CAAB: Children's Acts Advisory Board

CAAP: Child Abuse Prevention Programme

CRC: Convention on the Rights of the Child

CYF: Child, Youth and Family

DES: Department of Education and Science, currently operating as Department of Education and Skills

DLP: Designated Liaison Person

FGC: Family Group Conference

HSCL: Home School Community Liaison Scheme

HSE: Health Service Executive

INTO: Irish National Teachers Organisation

ISS: Integrated Service System

NCCA: National Council for Curriculum and Assessment

NCTE: National Centre for Technology in Education

OCO: Ombudsman for Children

OECD: Organisation for Economic Cooperation and Development

OMCYA: Office of the Minister for Children and Youth Affairs

PDST: Professional Development Service for Teachers

SAVI: Sexual Abuse and Violence in Ireland Report

SPHE: Social Personal and Health Education

SSP: School Support Programme

SWIPS: Social Work in Primary Schools

UNICEF: United Nations Children's Fund

UK: United Kingdom

WHB: Western Health Board

WSE: Whole School Evaluation

Clarification on terminology employed throughout the thesis

Child Protection: The Health Services Executive define child protection issues as those where there is a risk involved for the child or the child is at risk of abuse (HSE, 2007)

Child Welfare: The Health Services Executive define child welfare issues as when a child's needs are not being made and need to be addressed (HSE 2007)

Family Support: A definition of family support is provided by the Department of Health and Children in its draft family support strategy 2006; 'intervention across a range of levels and needs with the aim of promoting and protecting the health, well being and rights of all children, young people and their families in their homes and communities, with particular attention to those who are vulnerable or at risk (HSE, 2007, P31)'. Family support services may be offered at three different levels. These are: services specifically directed at children, services to support the family and services to enhance the friendship and support networks of the child and his/her family (HSE, 2007).

Child: a person under the age of eighteen years, excluding a person who is or has been married (Department of Children and Youth Affairs, 2011)

Adequacy: The Child Care Act, 1991 establishes a requirement for the provision of services on the basis of '*adequacy*'. The determination, definition and measurement of adequacy' in regard to the welfare of children is not necessarily an objective exercise as it is influenced by a range of factors specific to the circumstances of individual cases as well as by social, ethical, and legal constructs which vary across place and time (Harvey, 2011)

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Summary of Thesis

Little research exists in this country on the role of teachers and schools in child protection work. This thesis explores the role of the key person in the primary school with responsibility for child protection, the Designated Liaison Person (DLP). A review of the literature in chapter one outlines the development of child protection work in Ireland. Developments in child protection in this country have not been without influence from other jurisdictions, most notably the United Kingdom (UK). A brief overview of the current child protection system in the UK is offered and the revised child welfare system in New Zealand; the Integrated Service System is outlined, which provides a conceptual plan to support professional reform. The United Nations Children's Fund (UNICEF) has developed a conceptual framework of the child protection system worthy of consideration. Although the Health Service Executive (HSE) have statutory responsibility for dealing with children in need of care and protection in this country, effective interagency communication and cooperation is regarded in the literature as fundamental to child protection work. The 'Literature Review of Interagency work with a particular focus on Children's Services' (December 2009) by the Children's Acts Advisory Board (CAAB) highlight that the underpinning's of interagency work remain weak and require considerable development in Ireland. This review discusses the categories of abuse and their long and short term effects. Finally, the review of literature considers the role of teachers and schools in child protection work. The chapter concludes with a statement of the intentions of the research, which is to uncover an understanding of the 'lived experience' of the role of the DLP incorporating factors in the school environment such as the role of school staff and the ability of children to be able to disclose abuse.

Chapter two provides a rationale for the research design and its subsequent implementation. The decisions which influenced the methodology choice are outlined. There were two phases of study in this research. Initially, a survey questionnaire was sent to thirty two DLP's in primary schools, sixteen DLP's working in schools designated as disadvantaged (DEIS) and sixteen DLP's working in non DEIS schools. The purpose of the survey questionnaire was to identify a range of participants for the interview with a variety of years of experience and also, as limited research has been carried out on this topic in Ireland, the researcher wanted to gain some insight into the most salient issues that would guide the schedule for the semi structured interviews. From the responses received, sixteen participants were chosen for interview, eight DLP's from DEIS schools and eight DLP's from non DEIS schools, working in a variety of size and category of school and with various experiences in the role. The decision to choose eight DLP's from schools designated as disadvantaged was taken in order to embody the richness of the lived experiences of DLP's. Interpretative Phenomenological Analysis (IPA) was chosen as the most appropriate approach for investigation of the qualitative phase of this study. IPA incorporates both inductive and iterative processes which takes account of the researcher offering an interpretative account of what it means for participants to have concerns in the particular context of the work. The researcher is cognisant of her own particular circumstances which have contributed significantly to her interest and experiences in the area of child protection. The researcher is a primary school teacher and has taught in a disadvantaged school in an urban area for all of her teaching career to date. For the last five years she has been on secondment to the Professional Development Service for Teachers (formerly the Primary Curriculum Support Programme and Primary Professional Development Service) working in the subject area of

Social Personal and Health Education (SPHE). This work has included the delivery of child protection seminars to DLP's and Deputy DLP's and also training to whole school staffs on child protection and formulating child protection policies and practices. Furthermore, in the last year, the researcher has undertaken work with the Child Abuse Prevention Programme (CAPP) in delivering training to school staff on the Stay Safe programme. Both the experience from the classroom and in particular the experiences over the last five years have contributed significantly to the researcher's interest in exploring the issue of child protection from the school's perspective.

Chapter three outlines the findings of the qualitative phase of the research. Following the five stage process of IPA, a master list of themes was produced and a list of superordinate and subordinate themes emerged, referring to the major and minor themes which were identified. The five superordinate themes incorporating subordinate themes outlined in chapter three are as follows: (1) The DLP Role, (2) Experience of dealing with outside agencies in relation to Child Protection, (3) The School Story, (4) Children Telling and (5) Guidelines and Training. These themes represent the researcher's interpretation of the DLP's accounts of what their role involves.

Chapter four provides an analysis of the five superordinate themes outlined in chapter three. The results highlight the role of the DLP as a multifaceted complex role, open to interpretation in various circumstances. The responsibility of isolated decision making is especially highlighted and the subordinate theme 'taking action' outlined the various routes schools explore before making a decision to make a referral to the HSE. The experience of dealing with the HSE in relation to child protection concerns highlight a range of responses from various participants, from positive to very negative. The realities of interagency

communication and cooperation between schools and the HSE are illustrated, particularly throughout the case conference process. This theme and the theme of the school story and children telling highlights the extremely valuable role that teachers and schools play in child protection work and the potential that exists for expanding this role. Training requirements for both DLP's and school staff are considered in the theme 'guidelines and training'.

The thesis concludes with a final chapter which provides a summary of the study findings by outlining the educational implications for child protection work. This chapter highlights the contribution this study has made regarding clarifications of what constitutes the DLP's role. The findings assert that the role is demanding and fraught with decisions that may have far reaching implications for the lives of children, which in reality are not as simple as outlined in the guidelines. This challenging role, which one person has to undertake has received little attention in the Irish literature. Additionally, this research has clarified systems that need to be developed and issues that need to be addressed to support DLP's in carrying out their duties. This study suggests that allocating a social worker to work with a school or groups of schools on child protection issues may facilitate interagency communication and cooperation but furthermore, may enable the HSE to hear the perspective of school personnel in relation to vulnerable children and extend the role of the school in establishing care practices for children. The varying levels of awareness of teachers and school staff in child protection was identified through this research and the urgent need for sufficient training highlighted. Some of the findings in this study could be developed in future research, particularly investigating the area of children disclosing abuse in the school environment and the perspective of the HSE of the school's role in child protection work to further illustrate

potential developments for DLP's and school staffs in this area. This study successfully demonstrated the usefulness of IPA in the field of education in uncovering the 'lived experience' that *DLP's* assign to their role.

1.1 Literature Review Overview

This chapter provides a review of the literature on child protection relevant to this study. The chapter begins by tracing the history of the origins of child protection practices in Ireland, up to and including the last two decades, where many developments have taken place in legislation and policy and many high profile reports have been published. In addition, a brief overview of the current child protection system in the United Kingdom (UK) will be outlined and the reforms which have taken place in the child protection system in New Zealand will be considered, a country with a similar population to Ireland. A summary of a systems approach to child protection initiated by the United Nations Children's Fund (UNICEF) will be given, which offers a conceptual framework of the child protection system.

The chapter will discuss the systems in operation in this country for dealing with children in need of care and protection. As effective interagency communication and cooperation is seen as essential in child protection work, this will be considered and a central component of the interagency process, the case conference will be reviewed. A theory of interagency work developed by the Children's Acts Advisory Board (CAAB) will be outlined.

This discussion will follow with a description of the different categories of child abuse and both the long and short term effects on children. Specially vulnerable children will also be taken into account.

The final section of the literature considers the role of schools and teachers in child protection work. The ethos of care which exists in schools will be investigated as will the role that the school plays in the community. The role of the Designated Liaison Person (DLP) will be outlined and the key role that teachers play in child protection will be considered. Personal safety education for children will be discussed and the argument for extending the teacher's role in child protection work will be debated. Outside of the family, children spend the majority of their time in school. No other professionals have the ongoing, daily contact with

children that teachers have, and therefore they offer a unique perspective on each child in their care, however their voice in the child protection debate remains largely unheard in Ireland. The cultural context of the school supports parents and families and thus creates a tension for school personnel between supporting parents and reporting parents, bearing in mind the 'superior' rights of the family in this country, enshrined by the constitution.

The chapter concludes with a description of the intention of the research, while providing a brief overview of how the aims will be achieved through a mainly qualitative approach.

Information for the literature review was derived from a comprehensive review of the literature using a systematic approach drawn from the following online databases; ERIC, Irish Journal of Family Law, SAGE, Irish Journal of applied Social Studies, Index of theses (Great Britain and Ireland) and Child Abuse and neglect. A wide range of sources were utilised including journal articles, books, theses, and inter-library loans and variations of the key words, 'child abuse', 'designated liaison person', 'schools and child protection' and 'children telling' were used to obtain the relevant sources. Further articles were also gained from the reference list contained in each relevant source, which were subsequently obtained and reviewed.

1.2 The Development of Child Protection Practices in Ireland

'Childhood confers a special status on children, including recognition of their vulnerability and need for protection (Wulczyn et al, 2010, p5)'.

The development of child protection in Ireland has not been untouched without influences from other jurisdictions, but has developed in its own unique way ultimately reflecting what Ferguson describes as 'the de-traditionalism and liberalisation of Irish society

(Ferguson & Kenny, 1995, p30)'. It is important to recognise the profound historical transformation that has occurred in reporting patterns in child abuse cases, particularly in the last thirty years. The origins and structure of child welfare services in Ireland revert back to the foundations of the state, and indeed prior to that when the primary mode of dealing with the welfare needs of children was the placing of these children in residential care. These residential sites for children who were orphaned, abandoned or rejected were seen as sites where these children could be trained to become useful members of society.

Concerns were raised for these children however, and the result was a flurry of legislative activity which formed the structure of a child welfare apparatus that proved resilient well into the next century. In the first instance, reformatory schools were established in Ireland under the Reformatory School (Ireland) Act, 1858. Secondly, much concern surrounded the sanitary and moral environment of children who were growing up in workhouses which were established under the Poor Relief (Ireland) Act 1838. In 1862, under section nine of the Poor Relief (Ireland) Act, a system was put in place of fostering, or boarding out, children in Ireland. This was followed, in 1868, in the establishment of services for children by the passing of the Industrial Schools Act (Buckley et al, 1997).

For much of the twentieth century, the primary legislation governing Irish child care services was the Children Act, 1908. This piece of legislation, enacted by the British state provided the legislative framework for childcare practice in this country for almost the entire twentieth century. Ultimately, the act consolidated the mass of legislation which had regulated the treatment and provision of services for children since the middle of the nineteenth century (ibid).

In addition to the 1908 act, the Irish Constitution provided the other main legal framework for childcare throughout most of the twentieth century. In the Constitution of 1937, the democratic rights are incorporated in a Constitution imbued with respect for

religion, which acknowledges God as the source of its authority. With regard to the family, catholic social principles derive mainly from papal encyclicals and from canon law which draw deeply on the teachings and philosophy of Saint Thomas Aquinas. The basic principles are echoed in the provisions of Articles 41 and 42. Parental rights are accorded a fundamental status in Article 42, being described as 'inalienable'. In article 41.1 the state recognises the family as 'the natural, primary and fundamental unit group of society (Government of Ireland, 1937, Article 41.1)'. Ultimately, the family are afforded protection and primacy in the Constitution; they remain the primary educator of the child. The role of the State is merely to support and facilitate parents in carrying out these functions (O Mahony, 2006). Glendenning further highlights that 'case law indicates that the rights referred to in this instance are the rights of the family as a unit recognised in marriage rather than the rights of the individual within that unit (Glendenning, 1999, p69)'.

Broad cultural and social changes began to sweep through Irish society in the 1960's. In addition to this, three key reports published in the second half of the decade critiqued the role of institutional child care provisions. These reports were the Tuairim report 'Some of our Children' in 1960, the publication of 'Investment in Education' in the same year by the Organisation for Economic Co-operation and Development (OECD), and in 1970 the publication of the Committee of Inquiry into Industrial and Reformatory Schools (Buckley et al, 1997). These reports highlighted the inadequacy of the 1908 Children's Act in meeting the needs of children, the undesirability of the issue of care for children and the lack of State involvement in the provision of child care services more generally (ibid). The changing role of the Catholic Church played a significant role also. The religious orders requested the closure of fourteen industrial schools between 1964 and 1969. These changes pushed the State centre stage in the delivery and organisation of residential care in Ireland.

In 1970, the health boards were established as a result of the Health Act, 1970, and in 1974 they were given a central role in child care services. 1973 also saw the establishment of the Task Force for Child Care Services. In 1975, the Department of Health set up a committee to discuss the issue of 'non-accidental injury to children' (ibid). The first report of the committee on non-accidental injury to children was published in 1976 and this represented the basis for all subsequent guidelines issued by the Department of Health. In 1977, the first edition of national child abuse was published known as the 'Memorandum on non-accidental injury to Children'. A later edition was published in 1980, followed by another revised version in 1983. In 1984, full responsibility for industrial schools was given to the Department of Health, transferred from the Department of Education (ibid). At this time the health boards already had responsibility for a number of voluntary homes approved for funding by the then Minister for Health.

The number of reported cases of child sexual abuse increased dramatically during the mid 1980s, accompanied by the beginnings of considerable media attention on the issue. Revelations of sexual abuse of young children by their families, by the clergy, and by other persons in positions of trust, together with recent disclosures about physical abuse of children in residential care settings, combined critical attention on both the existence of child abuse as a serious problem in Ireland and on the systems dealing with it (ibid). The Task Force for Child Care Services, established in 1973 and due initially to report on recommendations for change within six months had its final report eventually published in 1981 (ibid). In 1984, the Irish Council for Civil Liberties set up a working party on child sexual abuse, whose brief was to gather data, to renew existing policies, services and laws concerning child sexual abuse and to make specific recommendations. Also in the late 1980s, the Department of Health signalled its acknowledgement of the problem by allocating funds for research and the establishment of services.

In 1987, the Department of Health published guidelines, the 'Child Abuse Guidelines' which gave a comprehensive definition of abuse as 'physical injuries, severe neglect and sexual or emotional abuse (Department of Health, 1987)'. For the first time, the guide abandoned the concept of child abuse as defined exclusively as 'non accidental injury'. These guidelines also emphasised the importance of interagency and inter-professional work and the centrality of case conferences were underlined. Following an abortive attempt to get a Child Care and Protection bill through the Dáil in the mid 1980's, it was another full decade before the Child Care Act reached the Statute book in July 1991. The purpose of the act is to 'update the law in relation to the care of children who have been assaulted, ill treated, neglected, or sexually abused or at risk (Government of Ireland, 1991, Explanatory memorandum accompanying the publication of the Act: 1)'. It represents the culmination of attempts to provide a modern legislative framework to deal with children who are at risk or neglected in Ireland. Existing legislation, primarily in the form of the Children's Act 1908 was deemed inadequate in catering for the needs of children at risk in Irish society. The 1991 Act incorporated, modified and repeated much of the existing legislation in relation to children under its broad remit, thus becoming the first legislation to deal with children in a comprehensive manner (Buckley et al, 1997). Although the act was formally enacted on the 10th of July 1991, it came into force on a phased basis and was only fully implemented in December 1996. From the outset, the government signalled its intention to implement the 1991 act on a phased basis. Matters did indeed move along relatively slowly and by the end of 1992, just sixteen of the seventy nine sections had been implemented.

The context of implementation and level of public interest in child care changed dramatically in March 1993 when the Kilkenny Incest case hit the headlines. It examined the circumstances surrounding the continued physical and sexual abuse by a father of his daughter over a thirteen year period, during which the family was known to a number of child

protection professionals. It received major coverage in the media and is generally regarded as having provided the catalyst for widespread overhaul and expansion of the child protection services. The Child Care Act was central to its concluding recommendations. 'We cannot recommend too strongly the urgent need to provide the necessary resources to implement the remaining sections of the act and in particular parts III, IV, V and VI (McGuinness, 1993, p95)'. The publication of the report resulted in an immediate response from the government in the form of a commitment to release £35 million over the following three years to implement the Child Care Act in full by the end of 1995. It was fully incorporated in December 1996.

Further high profile cases of child abuse during the 1990's continued to raise the public awareness of the issue of child abuse and the vulnerability of children. In 1995, Madonna House which was run by the sisters of charity closed down amid a torrent of allegations about child abuse. The Madonna House report detailed continuing physical and sexual abuse of children in state and church care by staff in these homes (Department of Health and Children, 1996). Furthermore, in 1996, Kelly Fitzgerald died in a London hospital resulting from her parent's brutality and neglect after the family moved to Mayo. The findings of an inquiry into Kelly's death became known amid huge controversy. The actions of the Western Health Board (WHB) for failing to protect the child were published in 1996. The report 'Kelly Fitzgerald, a child is dead' spoke of the need for strong leadership in the handling of neglect cases and found there was an over emphasis on intervening only because of sex abuse, rather than recognising the dangers of physical and emotional abuse and neglect (WHB, 1996). In 1998, the McColgan case (which became known as the West of Ireland Farmer Case), was published. This case involved the physical and sexual abuse of four of the six McColgan children by their father (North Western Health Board, 1998). 1998 also saw the publication of the child sexual abuse in swimming inquiry. This was followed in quick

succession by the Sexual Abuse and Violence in Ireland (SAVI) report in 2002. The main aim of the study was to 'estimate the prevalence of various forms of sexual abuse among Irish women and men across the lifespan from childhood through adulthood (McGee et al, 2002, xxxi)'. Because the participation rates of those involved were so high, at 71%, the results can be taken as broadly representative of the general population in Ireland. The evidence from the report highlighted that overall, almost one third of women and a quarter of men reported some level of sexual abuse in childhood and sexual abuse in Ireland was considered a significant problem (McGree et al, 2002).

In addition to the Child Care Act of 1991, developments in child protection took place against a backdrop of legislative and policy reform. The Domestic Violence Act of 1996 introduced changes in the legal remedies for domestic violence and granted health boards the power to intervene to protect individuals and their families from violence (Government of Ireland, 1996). The Freedom of Information Act, which came into effect in April 1998, enabled members of the public to gain access to the greatest extent possible, consistent with public interest and the right to privacy, to information in the possession of public bodies (Government of Ireland, 1997). The main provisions of the Protection for Person's reporting Child Abuse Act, 1998 included: (i) the provision of immunity from civil liability to any person who reports child abuse 'reasonably and in good faith' to designated officers of health boards or An Garda Síochána (ii) the provision of significant persons for employers who report child abuse and (iii) the creation of a new offence of a false reporting of child abuse when a person makes a report of child abuse 'knowing that statement to be false' (Government of Ireland, 1998).

In 1989, the Convention on the Rights of the Child (CRC) achieved the status of a human rights treaty, when it was adopted by the UN general assembly in November 1989 (Glendenning, 1999). Ireland ratified this international treaty on September 28th, 1992,

thereby not only committing itself to implementing the provisions of the CRC, but being legally obliged to do so. The CRC contains 54 provisions, 42 of which specifically recognise the individual rights of children (UNCRC, 1992). Article 12 is regarded as the cornerstone of the CRC and provides that any child who is capable of forming his or own views shall express those views freely in all matters, based on the age and maturity of the child. The CRC has not imposed any age limit prior to when a child can exercise their right to be heard (Burns & Lynch, 2008). The degree to which the views of the child are taken seriously depends on their understanding of issues, depending on both their age and level of maturity. The issue of whether the unborn child should have a right to life finds its place in this debate on age limit, an issue on which there are profound differences and deeply held views throughout the contemporary world (Schweppe, 2008).

The CRC has indicated that States need to be pro-active in ensuring that measures are taken so that all children, including those without parental care and those in institutions are not discriminated against (ibid). Social work professionals need to ensure that children always have the right to express their views when decisions are being made concerning their welfare. Social work practice however, has been criticised for failing to take the needs of children into account. In 2006, the Ombudsman for Children (OCO) commissioned research to examine barriers to the protection of children's rights in Ireland. The general barriers to children's rights were identified as: invisibility of children in the law, an absence on advocacy mechanisms to represent children and their rights, absence of services and supports for children, lack of investment in children's services, and lack of training in children's rights (Kilkelly, 2007). Increasing pressure has been brought to bear on the Irish government to address the issue of incorporating children's rights under the Irish Constitution. In 2007, the 28th Amendment to the constitution bill was published but without any express reference for the need to respect the views of children (Parkes, 2008). The Constitution and the protection

it affords to the family based on marriage will always take priority although cohabitating couples are now the fastest growing family in the State (McLoone, 2009). Research in the area highlights the advantages of involving children in decision making including; involvement in decision making can increase a child's sense of identity, self esteem and autonomy and can give them an element of control over what can be deeply distressing and traumatic events for them (O Callaghan, 2010). The annual Amnesty report (2011) has outlined the failure of governments to implement a number of commitments, including a referendum on children's rights as promised in 2010. Following the publication of this and other recent high profile reports, the government is under increased pressure to hold a referendum to ensure children's rights are enshrined in the Constitution.

The 'Children First' national guidelines were issued by the Department of Health and Children in 1999. While they do not have a statutory basis, they are national guidelines and are expected to be applied consistently by health boards, government departments and by organisations which provide services to children. The guidelines outline procedures for strengthening arrangements for the protection of children and in assisting people in identifying and reporting child abuse. Guidance is also offered to health board workers in responding to reported child protection concerns and the different phases of the child protection assessment/investigation process are considered (Department of Health and Children 1999). Revised 'Children First' guidelines were published on July 15th 2011. The revised edition of the guidelines 'supersedes all others (Department of Children and Youth Affairs, 2011)' and should be the only set of guidelines now in use. However, given that the research for this work was carried out prior to 2011, and during the interviews with the participants, the 1999 guidelines were in operation, both sets of guidelines will be referenced throughout this work. The 2011 guidelines became operational during the final stages of this work, after the draft thesis had been submitted.

In 2001, following discussions between the Department of Education and Science (DES), the health boards and organisation's representing school management, pupils and teachers, the DES Child Protection Guidelines and Procedures were published (DES, 2001). While the guidelines 'should be read in conjunction with 'Children First' (DES, 2001, p5)', they outline the responsibilities of school personnel and the procedures to be taken when reporting concerns to the health board. In 2006, Circular 0061/2006 (DES, 2006) was issued to schools, outlining the importance of schools having clear and effective child protection procedures and in service training for teachers was encouraged as was the importance of implementing 'Stay Safe' or a similar child abuse prevention programme in the school. The DES has redrafted their child protection procedures and now that the revised 'Children First' guidelines have become operational, they should be published early in the school year 2011/2012. A circular will be issued to schools following their publication to advise them of the new procedures.

Over the turn of the century, The National Children's Strategy (Government of Ireland, 2000) was launched. This strategy calls on the statutory agencies, the voluntary sector and local communities to work to improve the quality of all children's lives. The 'The National Children's Office' was established in 2001 to oversee the implementation of the National Children's Strategy. Known as the Office of the Minister for Children and Youth Affairs (OMCYA), OMCYA is part of the Department of Health and Children. It was set up by the government in December 2005 to improve the lives of children under the National Children's Strategy and bring greater coherence to policy making for children (www.omc.gov.ie). It is regarded that although Ireland has a much acclaimed children's strategy, its implementation has been weak (Harvey, 2011). In March 2011, the Department of Children and Youth Affairs was established, and the functions and priorities of the OMCYA are now managed by this department.

Further relevant legislation enacted in the 21st century included the Children's Act in 2001. This act focuses on preventing criminal behaviour, diversion from the criminal justice system and rehabilitation (Government of Ireland, 2001). In 2002, the Ombudsman for Children Act was enacted, which provided for the appointment and functions of an OCO (Government of Ireland, 2002). The Ombudsman for Children's Office was established under the act and Ireland's first Ombudsman for Children was appointed in 2004. Section 176 of the Criminal Justice Act 2006 introduced the criminal charge of reckless endangerment to children, whereby a person having authority or control over a child or abuser and intentionally or recklessly endangers a child; including leaving them in a situation where they are at risk of being harmed is guilty of an offence (Government of Ireland, 2006). In 2007, the Child Care (amendment) updated the Child Care Act of 1991 and the Children Act, 2001. Its principal purpose was to provide that a foster parent or a relative who has had a child in his/her care for a continuous period of five years, having being placed with that person by the HSE, could apply for a court order for increased autonomy in relation to the care of the child (Government of Ireland, 2007).

The last number of years in Ireland has seen investigations into and reports of clerical abuse. The Ferns Inquiry published in 2005 examined the handling of over 100 allegations of child sexual abuse against Roman Catholic Priests in the Diocese of Ferns from 1966 to 2002. It is clear from the report that effective action was not taken to protect vulnerable children over a period of many years (Department of Health and Children, 2005).

As part of the government's response to the publication of the Ferns report a national review of compliance with 'Children First' was undertaken. Key stakeholders including the Health Service Executive (HSE), An Garda Síochána, and the OCO, academics and all government departments were involved in the consultation process and discussions. The main finding from the review was 'that the guidelines have stood up well to the passage of time

and with minor amendments can serve us well in the future (OMCYA, 2008a, pv)'. The continuing challenge that remains is awareness of the guidelines and their consistent implementation. The recommendations arising from the review were set out under five headings: 1) Protection 2) Access 3) Standards 4) Integration and 5) Implementation (OMCYA, 2008a).

As part of the review of the 'Children First' national guidelines, interested parties were invited by the OMCYA to make a submission. A structured response form was made available to respondents for completion. The focus was on the extent to which each area of the guidelines was being implemented. Key problem areas identified in the implementation of the guidelines included operational difficulties, lack of support services, the absence of a mandatory basis for the guidelines and lack of coordination and joint working (OMCYA, 2008b).

The third document in the suite of documents was a study commissioned by the OMCYA with the aim of examining the views of service users of the child protection services. Overall the study showed from the accounts of the service users and the image they presented of the system that statutory child protection services were 'perceived as unsympathetic, powerful and intimidating (OMCYA, 2008c, p5)'. Many of the service users saw the institution as one to be avoided where possible.

In 2009, the Report of the Commission to enquire into child abuse was published. Known most widely as the Ryan report, this report was dependant on people giving evidence, which they did in large numbers. The period covered by the investigation committee was from 1936 to the present, however most complaints came from between 1936 to 1970, when large scale institutionalism was the norm. Although positive experiences have been identified by witnesses, the confidential committee heard evidence that physical and emotional abuse and neglect were features of the institutions, while sexual abuse occurred in many of them,

particularly boys' institutions. The recommendations arising from the report outlined that child care policy had to be child centred and ultimately based on the needs of the child and furthermore that the 'Children First' national guidelines would be consistently implemented in dealing with allegations of abuse (OMCYA, 2009).

The Dublin Archdiocese Child Abuse Commission known as the Murphy Report was published in November 2009. This report investigated how allegations of child sexual abuse by priests in the Catholic archdiocese of Dublin were dealt with by the State and Church authorities from 1975 to 2004. The report highlighted a litany of horrific abuse that remained unreported and hidden for 35 years and furthermore that there was little regard or concern for children who came into contact with clerical abusers. Many of those who came forward to report abuse said they did not do so as children for fear they would not be believed or because their abuser had told them not to tell (Department of Justice, Equality and Law Reform, 2009). Following this report, an investigation was carried out in the Diocese of Cloyne and the Report into the Catholic Diocese of Cloyne was published in December 2010, describing the handling of allegations and complaints and suspicions about child sexual abuse in respect of 19 clerics (Department of Justice, Equality and Law reform, 2010).

The most recent high profile case of child abuse, the Roscommon Case Report was published in October 2010 by the Roscommon child case inquiry committee and despite developments in policy and legislation since the Kilkenny Incest Investigation Case of 1993, it has served to remind us of the challenges that remain in this country in child protection work, particularly in the areas of interagency communication and cooperation, and in awareness of indicators of ongoing neglect (Gibbons, 2010). 'Neglect and emotional abuse have been described as remaining 'on the margins of child protection' even though the consequences for the well-being of children who suffer chronic neglect are well documented (Gibbons, 2010, p4)'. Most notable in this and indeed many reports is the absent voice of the

school and school personnel, questioning the value that is placed on the schools voice in the overall child protection debate

As far back as the report of the Kilkenny Incest Investigation there have been recommendations for the introduction of mandatory reporting in this country. 'Mandatory reporting of child abuse involves a mandatory investigation of an alleged abuse followed by a mandatory adjudication concluded by a mandatory consequence (McElwee, 2000, p15)'. A discussion document on mandatory reporting was produced by the Department of Health in 1996 followed by a draft white paper on mandatory reporting of child abuse in 2000 along with a draft memorandum for government. In view of the comments and observations made, and consultations with the Attorney General's office, it was deemed there were complex legal issues which needed further consideration. Many arguments have been raised both in favour of and against mandatory reporting (Harries & Clare, 2002, cited in Wash et al, 2006). The 'National Review of Compliance with Children First' concluded that 'a renewed focus on the provision of a more effective child welfare and protection system through improved implementation of the existing guidelines, training and education, and good recruitment processes (OMCYA, 2008a, p4)' is the way forward in this country without the introduction of mandatory reporting.

Further developments in child protection are imminent in this country. In 2010 the HSE appointed a national director for children and family services. Most recently, a dedicated Minister for Children has been appointed and the Department of Children and Youth Affairs has been established, and the Minister's foreword in the 2011 'Children First' guidelines has indicated the creation of a dedicated National Child and Family Support Agency for the provision of family support and child protection services. While progress has been made in this country in child protection work, some of the developments in the last two decades could be said to derive more from political reaction to public inquiries and high

profile scandals than from any coherent reform agenda (Burns & Lynch, 2008). The child protection 'scandals' in this country have challenged two of Ireland's strongest institutions, the family and the Catholic Church. Ireland's history of failing to actively intervene to protect children continues to resonate through the testimonies of those who have suffered child abuse in institutions, the wider community and the private 'safe' domain of the family and suggest that some children continue to be left vulnerable and unprotected (ibid).

1.3 Child Protection systems in the UK and New Zealand

The development of child protection practices in Ireland has not been without influence from other systems, most particularly the United Kingdom (UK). This section of the literature provides a very brief overview of the current child protection system in the UK and then considers the system of child protection in New Zealand in order to provide a comparison to the current child protection system in operation, in a country with a similar population and a system that has re envisaged itself in recent years.

1.3.1 Child Protection in the UK

The current child protection system in the UK is informed by the Green Paper 'Every Child Matters (Department for Education and Skills, 2003)'. This paper was published alongside the formal response into the death of Victoria Climbié. In 2004, the Children Act became law and provides the legal underpinning for 'Every Child Matters'. 'Every Child Matters' sets out the Government's approach to the well being of children and young people from birth to age 19. The publication of the 'Children's plan' in 2007 has further developed the agenda for 'Every Child Matters'. The 'Children's plan' is a ten year strategy to make England 'the best place in the world for children and young people to grow up (Department

for Children, Schools and Families, 2007, p3)'. Families are placed at the heart of government policy, taking into account the fact that young people learn best when their families encourage and support them and when they are taking part in positive activities outside of the school day. The plan, contributes to the achievement of the outcomes for 'Every Child Matters' by aiming to improve educational outcomes for children, improve their health, reduce offending rates among young people and eradicate child poverty by 2020 (ibid).

'Every Child Matter: Change for Children' was published in November 2004 and sets out the national framework for local change programmes to build services around the needs of children and young people (HM Government, 2004). One of the key aims outlined that each local authority who have responsibility for child protection would work with its partners, through children's trusts and work in the best needs of children and young people in the area, who would also be involved in the process (ibid). In March 2005, the first children's Commissioner for England was appointed to give children and young people a voice in government and public life. 'Working Together to Safeguard Children' published in 1999 provides a guide in interagency work to safeguard and promote the welfare of children and has been updated since 2006. It sets out how organisations and individuals should work together to safeguard and promote the welfare of children and young people (www.education.gov.uk). In relation to schools in England, the 'head teacher' is responsible for putting procedures in place relating to child abuse. They must also liaise with a nominated governor on child protection issues and school policy. It is the responsibility of the head teacher to appoint a designated senior person to coordinate activities within the school and liaise with other agencies in relation to child protection issues (ibid). The head teacher must ensure staffs know procedures to follow and parents are aware of the schools child protection policy and that they understand the role of the designated senior person. A self review tool

for safeguarding and child protection in schools (ibid) has been designed to assist head teachers with their functions.

In essence, this very brief overview highlights that many of the structures in the UK are not unsimilar to Ireland and policy development is moving in the direction of increased emphasis in family support, as is policy development here. It could be said that the UK are steps ahead of us and have paved the way for many of the developments that have happened in this country.

1.3.2. Child Protection in New Zealand

The New Zealand child welfare system has experienced many of the same challenges as western jurisdictions and in response has developed and implemented an integrated reform process to strengthen services for children and families (Connolly & Smith, 2010). The child welfare system in New Zealand (Child, Youth and Family (CYF)) is a service of the Ministry of Social Development, which is the largest government department in New Zealand. CYF has statutory responsibility in the area of child protection and like Ireland there are no mandatory reporting requirements. Child welfare law in New Zealand directs family involvement and participation in matters relating to the care and protection of children (ibid). In 1989, the Family Group Conference (FGC) was established in law, which is a solution focused meeting which members of the child's family including the extended family are entitled to attend (ibid).

The 1990s, like many other countries worldwide had left its mark on New Zealand and the Integrated Service System (ISS) was developed to 'foster a more responsive, resilient and sustainable organisation (Connolly & Smith, 2010, p3)'. It is worthy of note that in the

reform process, staff were engaged from the very beginning and senior managers visited all operational sites throughout the country to listen to staff and hear their experiences (Connolly & Smith, 2010). 'Leading for Outcomes' was published, a strategic document which provided the vision and key priorities moving forward. Following a strategic focus on organisational discipline, self regulation and leadership, the ISS model then provided a conceptual plan which brought together four interrelated elements designed to support professional reform: (1) the knowledge framework which provides a succinct picture of good practice, is ethics and evidence informed (2) the service model, providing the pathway system which supports service responsiveness to families (3) the practice package, providing the tools and resources to effect the framework and service model and (4) the support of staff, providing an environment wherein staff can do their job.

1.3.2.1 The Knowledge Framework

Practice framework articulates child welfare knowledge and 'integrates empirical research, practice theories, ethical principles and experiential knowledge in a compact and convenient form that helps practitioners to use the knowledge and principles to inform their everyday work (Connolly & Healy, 2009, p32)'. The New Zealand Care and Protection Practice Framework was introduced into the child welfare system in 2005. It identifies three key perspectives on which practice is based; child centered, family led and culturally responsive and has a set of best practice reminders drawn from research and practice literature across these three perspectives (Connolly & Smith, 2010).

1.3.2.2 The Service Model

The next step was developing a consistent service model to strengthen child welfare responsiveness. The differential response model was chosen; 'designed to help determine the most appropriate service provision for families in a more timely manner, the model aims for CYF to make a preliminary assessment that would then lead to a range of outcomes such as a child and family assessment or a statutory social work investigation (Stanley, 2007, p165)'. This model is widely practiced in the United States, Canada and some Australian states.

1.3.2.3 The Practice Package

Shifting practice culture was deemed to be the hardest challenge in the change process. A new practice package was developed which was better integrated with the practice frameworks key messages, with a particular focus on protecting the child and family, including the extended family to care for the child.

1.3.2.4 The Support of Staff

The final element of the ISS relates to staff support. The 'Practice Center' is an electronic resource developed for practitioners across the country. The information relates to organisational vision, service pathways, knowledge frameworks and the operational policies necessary for practice.

While it is acknowledged that there are further areas which need to be addressed, certain measures indicate the ISS is reaping successful rewards. Results indicate that unallocated reports have decreased by 93% since 2004, the number of children in out of home care has decreased by 13% since 2006 and frontline staff retention has risen from an average of 5.6 years in 2005 to 6.7 years in 2010 (ibid).

It has taken time to reform child welfare in New Zealand and it is a practice that has been informed not only from review and research but by staff working in the system on a daily basis. The system has been influenced by measures from other countries but it ultimately reflects a model suited to its people. Learning from the practices in a similar country, this model of forming a system based on staff responses and research could be a worthwhile structure for Irish policy makers to explore. The next section of the literature offers an overview of a systems approach to child protection put forward by UNICEF and offers a conceptual framework of what a child protection system should look like, which considered alongside the New Zealand model offers a model of what the overall child protection system should encompass.

1.4 A Systems Approach to Child Protection

UNICEF have initiated a process to move towards a more systemic approach in its child protection programming and have prepared a paper 'Adapting a Systems Approach to Child Protection: Key Concepts and Considerations (2010)' which outlines a conceptual framework of the child protection system. Indeed all families, communities and nations have a child protection system in place which reflects cultural norms, standards of behaviour, history, resources and external influences within the context in which it operates. In

developing a child protection system, several elements which apply to all systems are involved in its makeup. These include:

- Every system involves a collection of components or parts which are organised around a common purpose or goal- this goal being what holds the system together.
- All systems reflect a nested structure- with child protection- children are embedded in families, families live in communities and communities exist within a wider societal system.
- A system will accomplish its work through a specific set of functions, structures and capacities, which will be determined by the context in which the system operates.
- A system which is working well pays particular attention ‘to nurturing and sustaining acts of cooperation, coordination and collaboration among all levels of stakeholders (Wulczyn et al, 2010, p3)’, both managing key activities and performing key functions.

A systems approach is not prescriptive and a child protection system will work best when there is symmetry between the systems goals, structures, functions and capacities and the normative context within which it operates. A child protection system relies on people and organisations that are properly equipped to carry out the work and enabled to meet the goals set forth. A key question that must guide all the work is; are children being protected in a manner consistent with their rights? If the answer is no, then the system must be strengthened to fulfil this expectation (ibid).

The child’s primary protector is the family and ultimately the family plays a central role in child protection. The family is nested with the family system. Children are also part of the broader community and their engagement and role in the community deepen over time. As a result, protecting children is both a private and a public responsibility. In relation to child protection systems, actors at each level i.e. the child, family, community, play a vital

role in shaping what the system looks like overall. In order to protect children, a coordinated response is required on the part of individual actors, whether it be families, communities, government organisations or international organisations who work in the best interests of children. Rather than treating each child's safety concerns in isolation, the system approach promotes the engagement of all actors involved in protecting children's rights. Each of the sub systems influences other parts of the system and given that the interacting nature of systems is vital, there is an integration of values across systems. In discussing health systems, Begun et al (2003, cited in Wulczyn et al, 2010) refer to relationships among agents in complex systems as 'massively entangled' with other actors in the system.

The functions of systems are referred to generally as organisational activities to promote the achievement of the system goals. System functions relate in essence to what a system does to achieve its goals and system structure refers to how the elements of the system are connected. Relating to child protection, structures include; laws, policies, standards and regulations which facilitate coordination across service sectors. Capacity relates to the facilities, material resources, personnel and funding which is needed to operate the system. It is argued that the extent to which a system will be able to achieve its goals is dependent on capacity to the greatest extent.

'Systems are comprised of multiple actors working at multiple levels, from the individual level to the level of transnational organisations (Wulczyn et al, 2010, p14)'. Cooperation, coordination and collaboration are regarded in the systems literature as 'pivotal' for systems to function successfully. While increased levels of collaboration among child protection services is encouraged at the agency level, of equal importance is the fostering of relationships and building of interpersonal networks at all levels in the system, including service providers and the community.

Figure one below illustrates that child protection goals result from the normative framework in which the child protection system operates. Figure one also illustrates the relationship that exists between the status of children (measured as outcomes), child protection goals and the child protection system. Child protection systems do not exist in isolation and are one of many systems working to influence the well being of children. Figure one also highlights that externalities and emergencies influence the system and the system must be able to adapt to the context within which it operates. The impact of bi-directional influence between the child protection system and its context is the final feature of figure one. In summary, a systems approach to child protection begins with a normative framework which defines the boundaries of the system in a given social, political and economic context.

Figure 1.1 Child Protection Systems: Context and Dynamics (UNICEF)

Figure 1. Child Protection Systems: Context and Dynamics

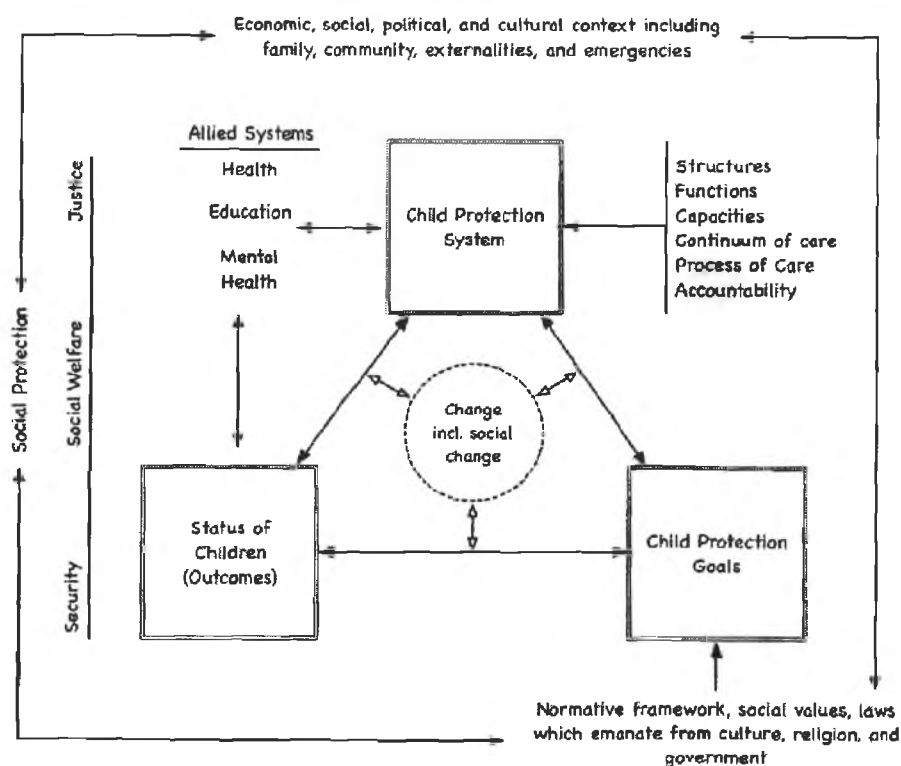
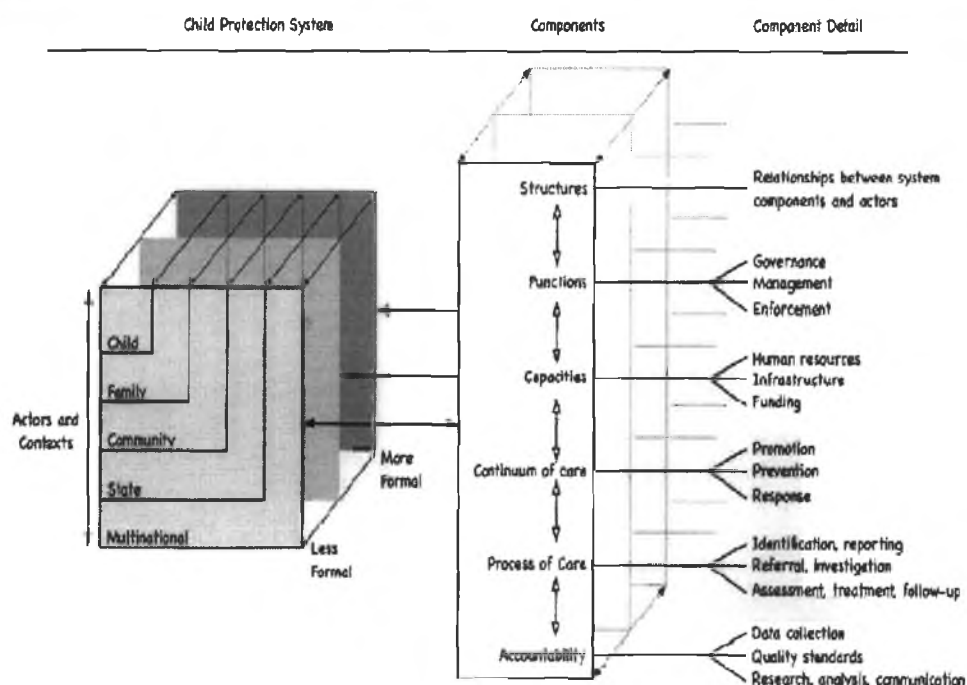


Figure two expands on figure one and reveals the important features of the child protection system. It highlights that the system operates at several levels and relies on different actors. As the child protection system serves children coming from diverse circumstances with diverse protection needs, the system must have a service continuum which will match the range of protection needs. Each point in the service continuum is a subsystem within a larger system. How relationships are formed and maintained is dependent on local context, efficacy and other factors affecting child protection. Figure two highlights the interactive nature of the system components and how each part of the system relates to and influences all the other parts.

Figure 1.2 Child Protection Systems: Actors, Context and Components (UNICEF)

Figure 2. Child Protection Systems: Actors, Context, and Components



The contribution of the systems approach to child protection describes the manner in which it accommodates diverse perspectives and creativity within an analytical framework that favours accountability. Clarity is essential to the systems approach so there is a shared understanding both within the system and across other systems. If there is a gap between the goals of the system and the protection of children, efforts within the system will focus on matching the system to its perceived goals. The hallmark of the systems approach to child protection is a holistic view of children, families and communities which responds to protection and includes promotion and prevention as points along the continuum.

The conceptual framework of a child protection system offers a holistic structure of both what a system is and what a system does. This model also offers a conceptual framework for this study, outlined below, as it locates schools within the overall child protection system. Given the unprecedented levels of child protection reports and the policy changes being promoted by the 'Agenda for Children's Services', the revised 'Children First' guidelines, and the proposed amendment to the Constitution to reflect children's rights, now might be the time within which it is appropriate for Ireland to formally set out the system that exists in this country in relation to child protection, which has been shaped by history, culture and external influences amongst our norms and standards of behaviour. One of the key actors in the child protection system in Ireland is the HSE, who have statutory responsibility for dealing with children in need of care and protection. The next section of the literature focuses on the role of the HSE, and in particular the nature of interagency communication and collaboration between the HSE and schools. The case conference in the context of interagency communication and cooperation and the theory of interagency working is outlined.

Table 1.1 Conceptual Framework for a Systems Approach to Child Protection

Goal:	The primary goal of a child protection system in Ireland priorities the principle underpinning the Child Care Act, that the safety and welfare of the child must be the first and paramount consideration
Nested Structure:	Children live in families, families live in communities, and schools are a core part of community life in this country
Context:	In relation to child protection, any concerns or suspicions of child abuse observed or disclosed in the school environment are reported to the HSE. Given the unique perspective that school personnel offer on children, it is argued that schools should play a vital role in shaping what the overall system looks like
Subsystem:	All of the subsystems operating within the overall child protection system influence each other and it is essential that there are common values shared among systems. The hallmark of a system offers a holistic view of children, families and communities which prioritises the promotion, prevention and protection of children

1.5 Dealing with Children in need of Care and Protection

The legislative basis of dealing with children in need of care and protection is provided by the Child Care Act of 1991. The main provision of the act places a statutory duty on health boards to promote the welfare of children who are not receiving adequate care and protection up to the age of 18 (Government of Ireland, 1991). The act regulates the role of health boards in three major areas of child care: alternative care, child protection assessment and family support. However the Child Care Act of 1991 enshrines the principle that it is generally in the best interest of a child to be brought up in his own family (ibid). While the health boards have overall responsibility for the investigation of alleged offences, the 'Children First' national guidelines remind us that 'everyone has a duty to protect children (Department of Health and Children 1999, p9)', not simply social workers and other health

professionals, therefore a coordinated response to child protection by all personnel involved with children underpins the thrust of all the work that is done in child protection.

1.5.1 Family support

The 'Children First' national guidelines specify the statutory responsibilities health boards have for the protection and welfare of children under the Child Care Act of 1991, where each health board has a Social Work Manager to coordinate their services (Department of Children and Youth Affairs, 2011). The HSE clearly differentiates between child protection which is concerned with risk and child welfare which is concerned with need (HSE, 2007). The primary services included under child protection are social work services. The services offered under the child welfare and family support heading are more extensive and include Springboard, social work interventions, family support worker services, community child worker, home help, family centres, pre schools, community groups or referrals to other professionals (Duggan & Corrigan, 2009). Intervention, through the provision of family support may be made available to families to 'help to prevent any deterioration of current difficulties being experienced by a family and assist the development of protective factors (Department of Children and Youth Affairs, 2011, p32)'. A definition of family support is provided by the Department of Health and Children in its draft family support strategy 2006; 'intervention across a range of levels and needs with the aim of promoting and protecting the health, well being and rights of all children, young people and their families in their homes and communities, with particular attention to those who are vulnerable or at risk (HSE, 2007, P31)'. Family support services may be offered at three different levels. These are: services specifically directed at children, services to support the family and services to enhance the friendship and support networks of the child and his/her family (HSE, 2007). The services offered to families and their take up vary considerably

across the health service areas. McKeown et al (2003), state that 69% of family support services are delivered by community and voluntary organisations with funding from the relevant health authority. The 'Children First' guidelines (2011) outline an expectation that where support is being provided to a family where there are child welfare concerns, it must be coordinated and monitored by the HSE. As well as family support being delivered formally through the direct services of statutory and voluntary organisations, services may also be delivered informally through the support networks of family, friends, neighbourhoods, communities, parishes and other local networks. Increasingly, the role of informal supports are being highlighted as being of key significance in offering sustainable and long lasting 'real' support to families. It is recognised that individual, family and wider community factors need to be addressed together rather than being considered separately (Barnes et al, 2006). Ultimately, however, for health services, their work with children and families is polarised between child protection and child welfare and it is believed that the latter is 'squeezed out' by the former (Buckley, 2002).

The number of services involved under family support does not appear to be communicated locally by the HSE. Professionals who interact on a daily basis with children, namely teachers, and who constantly endeavour to support families appear to be ill informed of the range and variety of services available to them locally and what the correct protocols are for connecting families with these services. The 'Service Users Perception of the Irish Child Protection System (2008c)' highlighted that information about the child protection system should be disseminated to inform the public about specific services and a convenient and accessible means of availing of these services should be provided. Ferguson and Kenny (1995) argue that just as there are child protection guidelines, there should also be family support guidelines.

1.5.2 The Agenda for Children's Services

The Agenda for Children's Services (OMCYA, 2007) is to set the strategic direction and key goals of public policy in relation to children's health and social services in Ireland. In this context, supporting families is identified as the central concern underlying all children's health and welfare services, whether aimed at prevention, early identification, hospital services or out of home care. The challenge for the HSE going forward will be to fully integrate the full range of existing family support services with child protection and alternative care services, placing the emphasis of the whole service on support and prevention (HSE, 2007). The role of social workers must be considered in this context and the role of voluntary and community agencies as well as the role of child welfare and child protection work in ensuring the highest priority is placed on children's safety.

1.5.3 Preparation of an Annual Report

Under section eight of the Child Care Act 1991, the HSE are required to prepare an annual report which provides an opportunity to assess the extent to which the organisation's responsibilities in the area of child protection are being carried out. The latest set of data published from the HSE at the time of writing of this thesis is from 2008 (HSE, 2008). The reviews from both 2007 and 2008 highlight the climate of change that the HSE are facing. The era of change stems from a multitude of factors. The demographic profile of population change, with smaller nuclear families unable to care for each other as was the tradition previously, the increased incidents of marital breakdown, the need for both partners in a relationship to be in paid employment and the increased levels of unemployment in this country all effect the sense of well being of adults and children and place increased pressure on the social care services (HSE; 2007, 2008). Combined with this, within the context of the Agenda for Children's Service, the HSE are now committed to providing services that are

evidence based and focus on increased outcomes for the child (ibid). This era of change for the HSE signals the end of cases of child protection concerns dominating the agenda and a stronger focus on child and family needs through the provision of comprehensive family support services (ibid).

Of the 1, 036, 034 children in this country which amounts to 24% of the entire population, 24, 668 reports were received by social work departments in 2008, an increase of 6.02% on 2007 (HSE, 2008). Of those 24, 668 reports received, there was an 'initial assessment' undertaken in respect of 15, 364 children. One of the highest increases included the number of reports of international families, presenting challenges of language, culture and parenting practice in social work departments across the country. The 2007 and 2008 reports however, lack commentary and analysis of family support services as a result of the paucity of national standardised data on these services. The report further highlighted that variations exist across the country in the integration of family support services with child protection services (ibid).

It is not only in relation to the integration of family support services that variations exist across the country in relation to social work practice. The 'Report of the Audit of Social Work Practice' conducted in Cork and Kerry between 2003 and 2006 (O Leary, 2006), highlighted that in five departments practices differed in the majority of areas examined, including the reporting and protection of welfare cases and the management of cases of girls and boys. While the 'Children First' (1999) national guidelines direct that management of records held by social workers should be standardised in each health board, the responsibility for drawing up local guidelines was decentralised to former health boards which resulted in a number of interpretations (O Leary, 2006). To take the example of practice in Cork and Kerry, a set of guidelines, 'The Child Protection and Welfare Process Practice guidelines' were introduced, detailing processes for reporting, assessment and management of child

protection and welfare concerns. They introduced practice standards, standard forms, and an assessment framework, 'The framework of Assessment for vulnerable children and their families' by which processes should be conducted and documented (ibid). However the proactive response in this region is not consistent across all HSE social work departments. Evidence from working groups in Ireland, including the national child care information systems project, the section 8 report, national working group 2005, and documented evidence in the national data set and annual reviews of adequacy of child care and family support services indicated that practices and processes are interpreted variously and not standardised (ibid). Most recently, the OCO undertook a review of the implementation of the 'Children First' national guidelines. All relevant documents from the 32 local health offices of the HSE setting out their child protection policies were sought. Over half of the offices were found either not to have proper local procedures or to have only recently drawn them up (Logan, 2010).

As a result of varying practices around the country the data that is produced annually by the Department of Health and Children is criticised for being unreliable. Buckley (2009) argues that child protection data provided by the HSE consists only of crude information. As there has been no systematic empirical review of child protection practices conducted in Ireland to date, we do not have an accurate national picture of either the macro or micro level of practice and no specific information regarding the origin or extent of weaknesses. Such reviews in other jurisdictions have provided valuable insights into national child protection practices. Two such examples include the Scottish Executives audit and review 'It's everyone's job to make sure I'm alright' and the 'Report on the child protection services in Tasmania' published in 2006. Findings from both of these reviews have produced very precise guidance on areas requiring change (Buckley, 2009).

1.5.4 The Role of Social Workers

Social Workers have also been criticised for their approach to their work and the prioritising of certain categories of abuse over others. Buckley's study (2003) of social work highlighted that the lowest proportions of neglect allegations were investigated showing how hard it is to define neglect and separate it from other categories that do not fit as comfortably into the abuse framework. Her study replicated earlier findings by Thorpe (1994, cited in Buckley 2003) that the identification of 'risk' or neglect or the substantiation of abuse does not automatically trigger intervention even though this is assumed in the literature. It is the expectation of DLP's that once a report is sent to the HSE, preventative measures will be put in place, but where this may not be the case it causes high levels of frustration for school personnel. Maher (1987) also considers that social work is a profession with a very high turnover of staff which can result in different personnel working on a particular case. Analysis and discussion of what social workers do have become deeply concerned that their work is too defined by bureaucracy, time spent at the computer and engaging in inter-professional collaboration. As a result this leaves them little time to spend on home visits and doing quality work with children and families (Ferguson, 2010). Figures from 2005 show the Irish rate was one social worker per 1, 828.6 persons. In Northern Ireland the figure was one social worker per 660.6 persons (Logan, 2010). In the 2000's it seems that levels of performance, management and bureaucratisation are intensifying as more horrific cases of abuse and organisational failure are publicly disclosed. There are concerns about the bureaucratised and narrow focus of the work which is frequently practiced from a defensive perspective that seeks to protect workers and agencies as much as it does children (Buckley et al, 1997). Enormous energy is put into information gathering and investigations, which in a high percentage of cases, ends up offering little or nothing to the families. This is not because professionals are in any sense uncaring. On the contrary, for the most part, they appear to be

only too well aware of what they cannot offer, because a system of family support services is not in place to which needy cases can be referred. If children are to be seen and worked with, everyday social work practice requires workers to 'leave their desks, make car journeys, walk the streets, housing estates and walk into and around homes in which their service users live (Ferguson, 2010, p1101)'. Social workers are at the front line of interagency work between many professionals and organisations. The role of communication and cooperation specific to child protection work will now be considered.

1.6 Interagency Communication and Collaboration

'No one professional has all the skills, knowledge or resources necessary to comprehensively meet all the requirements of an individual case. It is essential therefore that all professionals and organisations involved with a child and his/her parents/carers deliver a coordinated response (Department of Children and Youth Affairs, 2011, p18)'.

Interagency collaboration and cooperation have for many years been considered fundamental to effective practice and have been enshrined in legislation and official guidance here in Ireland as elsewhere. The national guidelines for child protection place interagency communication and cooperation as a central thrust in safeguarding and protecting the welfare of children. The guidelines do not give a definition of interagency communication and cooperation; rather they outline its benefits and the conditions which should be addressed specifically in training programmes (Department of Health and Children, 1999, Department of Children and Youth Affairs, 2011). Following its establishment in 2007, the CAAB was charged with 'the promotion of interagency cooperation including the sharing of information (Duggan & Corrigan, 2009, P1)'. CAAB uses Bardach's (1998) definition of interagency working. 'Interagency cooperation' is defined as 'any joint action by two or more agencies that is intended to increase public value by their working together rather than separately

(Duggan & Corrigan, 2009, p2)'. It is not only the national guidelines that recognise the need for interagency cooperation. Recent policy developments in the children's sector also recognise the importance of this approach. These include: 'Our Children, their Lives', 'Towards 2016' and 'The Agenda for Children's Services'. The ideal child protection system is presented as a multi-professional network whose interlocking elements combine to produce a seamless, comprehensive and holistic response to the cases of child maltreatment that come to its attention and the advantage of inter-professional communication is that the information base for a particular client or family is broadened across the dimensions of activity, knowledge and time (Stanley et al, 2003).

Despite the fact that interdisciplinary and interagency work is generally regarded as central to child protection practice, it is generally regarded in the literature as fraught with difficulties (Buckley et al, 1997). The difficulties stem from the complexity involved in identifying child abuse, especially by professionals whose primary vocational role is not in the area and furthermore, the various members of the child protection network come from very diverse backgrounds. The literature suggests that problems of role confusion, absence of shared understanding, different ethical norms and vocational orientations, combined with professional rivalries, assumptions about difference and status and stereotyping all contribute to interagency and inter-professional tensions in child protection work (ibid). Most high profile cases of child abuse in the country dating back to the Kilkenny Investigation Case and the Kelly Fitzgerald and McColgan cases and as recently as the Roscommon case of child abuse have repeatedly highlighted instances where information was not shared and working relationships broke down (McGuinness, 1993; Western Health Board 1996; North Western Health Board, 1998, Gibbons, 2010). It has been claimed that weaknesses in interagency work were fundamental to the inadequacies in practice, identified in these high profile cases. The 'National Review of Compliance with Children First (2008a)' also supports the

contention that sharing of information is not happening in the way it was envisaged. Analysis offered in British and Australian literature as well as Irish literature further suggests problems can be structural, whereby there are inadequate resources, stringent gate-keeping, a lack of interagency strategies, isolation of workers and non-synchronous work patterns, poor recording systems and a high turnover of staff and unfilled vacancies (Buckley, 2003). Wise (1989, cited in Buckley, 2003) observes a contradiction inherent in the official assumption that child abuse is the responsibility of social workers, while at the same time social workers are constantly urged to share this responsibility with others.

The coordinating role of professionals and agencies such as medical personnel, the police, schools and non- statutory agencies is not essentially specified in the national guidelines for child protection and the interpretations ascribed to it by themselves and by the statutory social workers are often widely divergent and this can give rise to quite bitter resentments (Buckley, 2003).

1.6.1 Inter-professional work between Social Workers and Teachers

Inter-professional relationships between social workers and teachers are identified as being particularly challenged. Lack of role confusion and feedback, combined with teachers' reluctance to report abuse are cited as the main reasons that challenge interagency work between both disciplines. A project carried out by McNamara in 2005 (cited in Buckley, 2003) highlighted that as well as role confusion, the major impediment to interagency cooperation included social workers lack of feedback to teachers (ibid). This further resulted in teachers feeling isolated and ill equipped to deal with the consequences of making a report and thus disinclined to refer again in the future. An earlier report exploring the potential for schools and community care services in a health promotion role to work together was undertaken by John Kelly in 1996, who was at the time seconded to the Child Abuse

Prevention Programme (CAPP). Interagency difficulties identified included; the isolation of schools, the way teachers are 'taken for granted' by other organisations and the apparent impossibility of 'off the record' conversations with social workers (Kelly, 1996, cited in Buckley, 2003). Kelly also found that while teachers acknowledged their role as protectors of children and were keen to promote child welfare, their duty to report suspected child abuse caused them some discomfort.

The 'Review of the role of Irish National Teachers Organisation (INTO) members acting as DLP' (2008) highlighted the lack of feedback to a DLP from social workers once a referral is made, particularly if a decision had been taken not to pursue the matter and also the increasing pressure the DLP felt to make a report when they may have called to seek advice. It was the perception of DLP's that social workers were protecting themselves at their expense (INTO, 2008). Given that the DES Child Protection Guidelines (2001) state that it is 'incumbent' on schools to report suspicions and allegations of abuse, and also that the HSE should provide feedback, mindful of confidentiality to those involved in cases, it is apparent that weaknesses can be identified within both organisations in relation to ensuring effective collaborative work. No evidence exists at a national level towards furthering collaborative work between both sets of professionals, comprising of purposeful and planned activity, joint training and clarity about tasks of leadership and coordination. In order to support and strengthen issues of cooperation, the issues need to be addressed at several levels, starting with the agencies themselves and putting in place strategies to improve interagency working arrangements. Often, it is at a case conference meeting where social workers and teachers meet face to face in relation to a particular child or family.

1.6.2 Child Protection Conference

‘A child protection conference is an interagency and inter-professional meeting which is convened by the child care manager designate ... It is appropriate to hold a child protection conference when decisions of a serious nature are being considered which require the input of a number of professionals from different disciplines and agencies (Department of Health and Children, 1999, p78)’.

Child protection conferences facilitate several aspects of child protection practice, including the reporting and processing of information and assessment and decision making processes. Buckley et al (1997) found very strong support for the case conference, among professionals involved. Reasons included; it provided a means of sharing information, facilitating planning and making decisions, clarifying roles and hearing different perspectives. Furthermore for social workers, the case conference functioned as a means of sharing responsibility by highlighting the role of other professionals and agencies in child protection work. Equally, however, Maher found that case conferences perform a number of covert functions such as seeking to manipulate other agencies and passing responsibility and the problems inherent in multi disciplinary working are often seen at their most intense at the case conference (Maher, 1987). DLP’s referred to their experience at case conferences being unsatisfactory for reasons including; the time taken, the unsuitability of meeting times for teachers and in the event of being unable to attend it was difficult to obtain the conference notes (INTO, 2008). Mistaken beliefs about the worth of child protection conferences have been identified by Reder et al (1993) and Hallett & Stevenson (1980, cited in Buckley, 2003) whose analysis still has pertinence for current practice. These works have offered the perspective that case conferences can be the objects of unrealistically high expectations, given the complicated nature of the processes involved and the potential for rivalries, prejudices and stereotyping to come to the fore. Research carried out in the UK on case

conferences highlighted that they can be problematic in a number of different areas including stereotyping and poor chairing (Hallett & Stevenson, 1980, cited in Buckley et al, 1997). Further criticisms have been cited about the process of discussion and decision making, including too much conversation on hearsay and personal opinion, a tendency to rush decision making and the unrealistic nature of some plans put in place (Buckley et al, 1997).

Once more, teachers have faced criticism in several studies carried out in Ireland and the UK for their low participation rates in child protection conferences, despite the central position ascribed to them in the guidelines (Buckley, 2002). The potential for tense relationships between social workers and other professionals lies in the conflict between, on one hand, the statutory social workers' responsibility and on the other, their lack of authority over those professionals on whose cooperation they depend (Buckley, 2003). The number and diversity of agencies and professions which necessarily become involved in a child abuse case has also been found to be a source of complication in the response to individual cases (Maher, 1987). Exaggeration of hierarchy was also identified by Reder et al (1993) as an issue in child protection conferences and they concluded that the conference is a 'brief episode in the continuous, inter-relationships between members of the network (Reder et al, 1993, p68)'. The interagency and inter-professional dynamics are undoubtedly fundamental to professional behaviour right throughout the case conference. Theorists have defined two issues of child protection work which are defined as 'surface' and 'depth' issues (Buckley, 2009). Surface issues are the laws, policies, procedures, and tools for auditing which combine to provide a framework for the delivery of services. 'Depth' issues are the more subtle issues of the work and include the dynamics between professionals and organisations, the relationships between practitioners and service users, 'buck passing' between professionals and agencies and lack of confidence that the system is doing more harm than good. Many of the depth issues 'that complicate the nature and quality of practice and are often at the root of

what appear to be dysfunctional and deficient systems (Buckley, 2009, p1)', are at their most apparent during the case conference process. The following section of the literature outlines a theory of interagency working by CAAB, which offers a structure to challenging work between professionals and agencies.

1.6.3 The theory of interagency working

Despite the promotion of interagency work by both policy and government documentation, there is relatively little attention paid to what constitutes interagency working in the literature on child protection in Ireland. Following their establishment in 2007, CAAB was charged with 'the promotion of interagency cooperation including the sharing of information (Duggan & Corrigan, 2009, p (i))'. The 'Literature Review of Interagency Work with a particular focus on Children's Services' reviews the information available on interagency work in this country. One of the first points is the lack of consistency in the use of terms. The terms 'cooperation', 'collaboration', 'partnership', and 'interagency working' are used interchangeably without attempt to highlight differences between the terms. The analyses of different types of interagency work are provided by Warmington et al (2004, cited in Duggan & Corrigan, 2009).

- Interagency working: this is where more than one agency works together in a planned and formal way as opposed to informal networking (though this may develop through interagency work).
- Multiagency working: This is when one or more agency works with a client though not necessarily jointly.
- Joined up working: refers to deliberate and coordinated planning and thus takes account of multiple policies and various agency practices.

The literature also gives clear examples for the motivation for interagency work:

- Interagency work helps to provide answers to complex problems which cannot be addressed by one agency alone.
- The desire for economies is cited by Serrano and Tomlinson (cited in Duggan & Corrigan, 2009).
- Sloper (2004, cited in Duggan & Corrigan, 2009) notes that requiring families to deal with many different professionals and agencies places huge demands on them and in this scenario it is very likely that children's and families needs will fall between the gaps.

Specifically relating to child protection work, due to its complex nature and widening definitions of abuse and risk, it has resulted in the need for the involvement of a whole range of professionals. Furthermore, the increasing emphasis on the need for child and welfare family services highlights that families should receive the services they need without being inundated by a wide range of agencies. A further rationale for interagency work rises from what Buckley (1999, cited in Duggan & Corrigan, 2009) describes as 'text base cases'. In reality text base cases are rarely text base cases and generally involve a range of circumstances which could be poverty, substance misuse, and disability. Given the complexity of cases, it affirms the need for the involvement of different professionals and agencies to address the complex needs of families. Children's needs arise at different times and across various combinations of services.

Various models of interagency work are provided in the literature. Atkinson et al (2002, cited in Duggan & Corrigan, 2009) provide a typology of multiagency working based on the purpose of the multiagency work. The models identified are:

- Decision making groups
- Consultation and training events
- Centre based delivery

- Coordinated delivery and operational team delivery

Dyson et al (1998, cited in Duggan & Corrigan, 2009) developed the typology of interagency relationships based on the following:

- Mutual cooperation where agencies recognise each other's statutory responsibilities and have systems whereby they can respond to information requests.
- Shared responsibility whereby agencies 'recognise the concept of need as multifaceted and therefore requiring a multiagency response (Duggan & Corrigan, 2009, p18)'.
- Natural lead where different agencies take the lead at different times in a client's life.
- Community service, where the individual's need is seen in the broader context of the community need.

Sloper (2004, cited in Duggan & Corrigan, 2009) classifies joint working based on the way professionals may work together:

- Multidisciplinary working between individuals within a single agency.
- Interdisciplinary working where individuals from different agencies carry out separate assessment and meet together to discuss findings and set goals.
- Trans-disciplinary working where different agencies work together jointly sharing aims, information, tasks and responsibilities.

At a conceptual level Warmington et al (2004, cited in Duggan & Corrigan, 2009) recommend the use of 'boundary objects' as a valuable conceptual tool to aid understanding and interagency learning, communication and transfer. Using the example of a child's care plan this may be negotiated by many different professions. The boundary object provides the

means where professions can adopt their own perspectives and these can be shared and constructed across professional boundaries.

A wide range of successes and enabling factors are identified in the literature across multiagency, interagency and joint working. Advantages include; personal well being, professional development, professional identity and improved services for service users. The importance of local networks and strategies are highlighted in the work, without being over reliant on them. Inhibiting factors include; conflicts, within or between agencies, lack of funding, concerns about sustainability, lack of understanding about roles and responsibilities of others, poor communication, professional and agency cultures which may impact on interagency culture, management and lack of training opportunities. Buckley (2003b, cited in Duggan & Corrigan, 2009) provides a framework in which obstacles can be located. The framework identifies three types of behaviour or obstacle (i) professional (ii) psychological and (iii) structural or organisational. Professional barriers place unrealistic parameters on the role of various professionals. Psychological barriers include professional rivalries, stereotypes, and 'baggage' from previous experiences. Structural and organisational barriers include: high staff turnover and the fragmentation of services, inadequate resources and inadequate allocation of resources, poor communication networks, lack of managerial commitment and lack of administrative backup.

In conclusion, the theoretical underpinnings of interagency work remain weak and require considerable development in Ireland. The emphasis now rests on a lifecycle in policy making, focusing on the integrated nature of various aspects of children's lives and how integrated services are best to support vulnerable children and their families. The community sector has a key role to play in relation to interagency processes in the children's sector in Ireland and therefore considerable investment needs to be made in this sector. The recommendations from the research report (2009) include: the development of a conceptual

approach to interagency working, the development of protocols to support the participation of key agencies in local structures and that appropriate training is developed and tool kits delivered to support the development of interagency work in Ireland. The role of the CAAB will be very significant in the development of stronger interagency and good practice in this country, in what is undoubtedly a challenging task given the complex nature of child protection work. Different professionals and agencies working with children rely on definitions of abuse to guide them in their decision making around concerns or suspicions of neglect. The next section of the literature outlines the definition of the different categories of child abuse and signs and symptoms associated with each category.

1.7 Definition and Recognition of Child Abuse

‘Child abuse is a highly complex issue and, as will be seen, is not easily defined or measured (Corby, 1993, p39)’.

Child abuse reflects the international consensus about what constitutes unacceptable child care and the violation of children’s human rights, which are outlined in the United Nation Convention on the Rights of the Child (1992). The ‘Children First’ national guidelines (2011) outline four principal types of abuse; neglect, emotional abuse, physical abuse and sexual abuse. These categories of abuse will now be considered individually in terms of the signs and symptoms they may present and the impact of each abuse category. Socio demographic factors will also be considered and the impact of the community and other influencing factors taken into account. Finally, particular categories of children who may be especially vulnerable will be outlined.

1.7.1 Neglect

‘Neglect can be defined in terms of an omission, where the child suffers significant harm or impairment of development by being deprived of food, clothing, warmth, hygiene, intellectual stimulation, supervision and safety, attachment to and affection from adults, medical care (Department of Children and Youth Affairs, 2011, p8)’.

As child neglect can take many forms and because it occurs in a wide range of contexts, it has proven very difficult to define it in a way that generalises across all cases (McSherry, 2007). Of the four categories of abuse, child neglect is the most under studied and as a result the least understood type of maltreatment. This is commonly referred to as ‘the neglect of neglect (Wolock & Horowitz, 1984, cited in McSherry, 2007)’. With neglect there is passive ignoring of the child’s needs which include:

- Physical needs for feeding, clothing and shelter
 - Safety needs for protection
 - Emotional needs for nurturance and a secure base
 - Intellectual needs for stimulation, social interaction and conversation
 - A need for age appropriate limit setting and discipline
 - A need for age appropriate opportunities for autonomy and independence
- (Carr, 2006).

Further evidence suggests that neglect is the most commonly reported and ultimately seriously harmful form of child abuse, but it does not always receive a consistent child focused response from professionals (Buckley et al, 2006). Frequent absence from school constitutes neglect. In the 2007/08 school year alone, 12.0% of primary school children were absent from school for 20 days or more (OMCYA, 2010). Neglect also impacts on children’s intellectual development as children are often reared in environments where there is little cognitive stimulation or support.

1.7.1.1 Correlation of Neglect with low Socio-economic Factors

‘Neglect is closely correlated with low socio-economic factors and corresponding physical deprivations (Department of Children and Youth Affairs, 2011, p70)’.

Neglect is recognised as correlating very strongly with poverty and social deprivations. Especially vulnerable people often lack the personal and communal resources to survive the adversity of chronic social disadvantage which characterises the lives of so many children and parents in this state. Stevenson (1996, cited in Buckley 2003) in highlighting the links between neglect and poverty argues that social workers have become used to certain families ‘bumping along the bottom (p124)’. The children at greatest risk of poverty include those in lone parent households, in workless households, and in large families where the mother is under 25 (Stevenson, 2007). It is concluded that neglect cases are less likely to succeed when compared with other cases of child abuse, because underlying severe neglect is indifference to the child and lack of empathy. This makes it particularly difficult to recruit and engage neglecting families into programs (Watson, 2005).

1.7.1.2 Addressing Neglect

One of the biggest challenges in addressing neglect is that other, more ‘serious’ categories of abuse tend to be prioritised to the detriment of neglect. Furthermore, service providers are slower to report neglect than other forms of abuse and there is also an awareness that the current child protection system cannot cope with the volume of neglect cases (Watson, 2005). Neglect may also be seen as less important because of its links to poverty and social workers may be reluctant to pathologise families already disadvantaged by being poor. Watson (2005) outlines a number of factors that lead to the minimisation of child neglect;

- Isolated incidents which occur over time are considered too 'trivial' to report, so the risk often remains unrecognised and manifests itself over time.
- 'Cultural relativism' allows some behaviour to be justified by labelling it as a cultural practice.
- 'Natural love' assumes that parents love their children and evidence of child neglect is interpreted under the presumption of 'natural love', thereby proving child maltreatment difficult.
- The culture operates whereby overwhelming evidence of abuse should be evident before action is taken.
- The rights of parents can take priority over the rights of children. The efforts of parents can be empathised with, which leads to a failure to see the gradual changes in a child.
- 'Case drift' is a label given to the situation where social workers get to know a family and adapt to their circumstances and the state of the child. Certain behaviours become 'normal' for a family and they let the case drift and fail to notice how bad the situation has become for the family.

1.7.1.3 The Role of the Community

Research has shown that houses, communities and neighbourhoods in which families live can have an influence on both parenting capacity and children's development (Buckley et al, 2006). Networks such as those within the family and community play a crucial role in supporting children at risk of abuse, particularly neglect. As highlighted by the CAAB research on interagency work, it is now recognised that individual, family and wider community factors should be addressed together rather than being considered separately (Barnes et al, 2006, Duggan & Corrigan 2009). Of all networks, Marsh & Crow (cited in

Stevenson, 2007) point out that the importance of the family network for all families is powerful and pivotal in child welfare. However, in the cases of mothers who neglect their children, their social network tends to be dominated by relatives who are critical rather than supportive. Often neglectful families become isolated from their wider network of relatives cutting them off from a source of support which is of immense significance to most families. The levels of support within a community are of significance also. There is evidence that children have improved developmental outcomes on starting school if a range of community services such as libraries, parent education classes, child care, pre-schools, parks and toy libraries, within easy walking distance, are available (Watson, 2005). Where these services are co-located and have strong links to those providing services such as health care and parent education and support, developmental outcomes are improved. In Scandinavia, the university community services model which they use has proven very effective. In this model, some of the long term needs of children are taken care of via the education system, where the wellbeing of children is monitored at school by each school having a nurse or doctor attached to it (ibid). Tommy & Wise (1999, cited in Watson, 2005) argue the effectiveness of the model, due to the fact that the rate of child abuse notifications in Scandinavian countries is eight times lower than the United States and four times lower than Australia.

1.7.2 Emotional Abuse

‘Emotional abuse is normally to be found in the relationship between a care giver and a child rather than in a specific event or pattern of events. It occurs when a child’s developmental need for affection, approval, consistence and security are not met (Department of Children and Youth Affairs, 2011, p8)’.

In contrast to neglect, emotional abuse involves intentionally carrying out some of the following actions with respect to the child;

- Regular punishment for minor misdemeanours
- Regular punishments for positive behaviours like smiling, playing or problem solving
- Regular criticism, ridicule, humiliation and threats
- Regular rejection, discouragement of attachment and exclusion from family life
- Frequent blocking of the development of appropriate peer relationships
- Involving a child in drug use, prostitution or theft
- Regular attitudinal corruption through encouraging prejudicial hatred of specific groups of people or family members (Carr, 2006).

Developmental delays and adjustment problems are common among children who are emotionally abused. Children may show developmental delays in sensor motor, cognitive development and language development. These children also typically have low self esteem and find it difficult to control negative mood states such as anger, anxiety, and depression. Longer term difficulties include making and maintaining intimate peer relationships, and forming stable romantic attachments. Parents who emotionally abuse their children may themselves have experienced poor early attachment experiences and suffer from depression, drug abuse, or have an intellectual disability (ibid).

Exposure to domestic violence is also considered a symptom of emotional abuse. While the effects of domestic violence on children are mediated by factors including the level and severity of violence, the age of the child and the presence of protective factors, there is substantial evidence, both in Ireland and internationally highlighting the potentially deleterious impact of domestic violence on children and young people, placing domestic violence firmly on the child abuse agenda (Burns & Lynch, 2008).

The changes in family life highlighted by the 'Review of Adequacy of Services for Children and their Families' (2007) published by the HSE are also presenting issues of relevance to the emotional abuse debate. The devastating effect that parental separation can have on children is receiving increased attention as is the role of fathers in family life and child development. The rising number of births outside marriage has led to an increase in one parent families, many of whom are fatherless. It is estimated that approximately one in six children in Ireland live in a lone parent household (OMCYA, 2010). Furthermore, there may be justifiable concerns for the safety and welfare of children engaged in post separation contact with a parent, who was engaging in domestic violence (Burns & Lynch, 2008). It must be remembered that 'every child who is abused sexually, physically or neglected is also emotionally abused (Department of Children and Youth Affairs, 2011, p71)', but it is when emotional abuse occurs in isolation that it presents the greatest difficulty in unambiguous diagnosis.

1.7.3 Physical Abuse

'Physical abuse of a child is that which results in actual or potential physical harm from an interaction, or lack of interaction, which is reasonably within the control of a parent or person in a position of responsibility, power or trust. There may be single or repeated incidents (Department of Children and Youth Affairs, 2011, p9)'.

Physical abuse may be intra familial or institutional and may occur alone or in conjunction with sexual abuse, neglect or emotional abuse (Carr, 2006). It is estimated that the overall prevalence of physical abuse during childhood and adolescence is somewhere between 10 and 25% depending on the definition used, the population studied and the cut off for the end of adolescence (Wekerle & Wolfe, 2003).

Physical abuse has short and long term physical and psychological consequences. Physical consequences include scarring, disfigurement, neurological damage, visual and auditory impairment and failure to grow. Psychological consequences include negative self evaluative beliefs, developmental delays linguistically and cognitively, relationship difficulties and problems with affect regulation (Carr, 2006). Low self esteem and low self efficacy are among problems highlighted and relationship difficulties may occur with peers. Many of the children who run away from home have been physically abused. Long term effects of physical abuse include teenage delinquency, aggression, domestic violence, child abuse and substance abuse. Internalising behaviour problems include self injury, suicide, depression and somatisation (ibid). Munchausen syndrome by proxy may sometimes involve physical abuse. With this syndrome, the parents, usually the mother, fabricate stories of illness about their child or cause physical signs of illness (Department of Health and Children, 1999).

1.7.4 Sexual Abuse

‘Sexual abuse occurs when a child is used by another person for his or her gratification or sexual arousal or for that of others (Department of Children and Youth Affairs, 2011, p9)’.

With sexual abuse, a distinction is made between intra familial sexual abuse, the most common form is father-daughter abuse, and extra familial abuse where the abuser resides outside the family home (Carr, 2006). As highlighted by the SAVI report, almost one third of women and a quarter of men reported some level of sexual abuse in childhood and the conclusion of the report highlighted that sexual abuse in Ireland is now acknowledged as a significant problem (McGree et al, 2002). It is recognised that child sexual abuse dominates the other three categories of abuse and is considered the most ‘serious’ form of abuse.

Research highlights that more girls than boys are sexually abused and that more abusers are male (Carr, 2006). Furthermore, in comparison to the normal population, rates of sexual abuse are two to three times higher among children with physical and intellectual disabilities and children in residential care are more at risk of abuse. Girls are more commonly abused intra familiarly and boys are more commonly abused extra familiarly (ibid).

A history of child sexual abuse has been linked to fear, anxiety, depression, insomnia, obesity, self destructive behaviour, headaches, aggression, anger, hostility, poor self-esteem, substance abuse, suicide attempts and sexual maladjustment (Wilson, 2010). Low self esteem, poor coping skills, disrupted self identity, poor interpersonal skills, lack of social support and increased stress levels have all been found in higher prevalence in adult survivors of childhood sexual abuse. The quality of relationships with partners is negatively influenced by a history of childhood sexual abuse (ibid). Aspects of abuse such as the level of frequency, invasiveness, amount of physical violence, and denigration involved and the degree to which a child's trust in an adult was violated all impact on the level of abuse related stress experienced (Carr, 2006). Once a problem of abuse becomes entrenched, it may continue as children may fear their own safety and the integrity of the family will be threatened if they disclose abuse. Children may also feel intense guilt and believe they are responsible for the abuse. Factors such as low self esteem, low self efficacy and an internal locus of control render children vulnerable to repeated acts of abuse (ibid). While the last two decades have raised awareness of sexual violence like no other previous period, 'one of the most striking findings of the SAVI study is the extent to which sexual violence is still a completely private and hidden matter for almost half of those affected (McGree et al, 2002, p278)'.

1.7.5 Especially Vulnerable Children

The 'Children First' national guidelines outline that children with disabilities, homeless children, children in foster care and children in residential settings are children who may be especially vulnerable towards abuse (Department of Children and Youth Affairs, 2011). The 'Framework for the Assessment of Vulnerable Children and their Families (2006)', outlines that children from minority groups in society may have additional needs. Minority groups are identified as; 'children with disabilities, children with complex health needs, children with HIV and Aids, refugee children, asylum-seeking children and traveller children (Buckley et al, 2006, p68)'. The 'Children First' guidelines address some of the reasons which make children with special needs so vulnerable among which include; their communication difficulties, their need for intimate care, a huge dependence on the good will of their carer's and an inability to see warning signs and danger (Department of Health and Children, 1999). In 2006, there were 42,021 children in Ireland with a disability which accounts for 4.1% of the total child population of Ireland (OMCYA, 2010).

Travellers are recognised in Ireland as a distinct ethnic minority group. Murphy et al (2000) consider that the Traveller community form an ethnic group as they are biologically self-perpetuating, they share fundamental cultural values, they share a field of communication and interaction and the group may be subject to oppression. The 'Framework for the Assessment of Vulnerable Children and their Families (2006)' recognise that the Traveller community have a history of being fearful and suspicious of the authorities which adds another dynamic to the already challenging nature of the work and furthermore, the nomadic lifestyle of the Travellers does not make it easy for social work services to remain in contact with families. Newcomer children now account for approximately 6% of the total child population in Ireland (OMCYA, 2010). Culturally approved practices in different parts of the world that in Ireland would almost certainly be defined as abusive present many of the

challenges associated with newcomer children. Korbin, (1992, cited in Corby, 1993) highlights that culturally approved practices unacceptable in Ireland include; punishments, including severe beatings, harsh initiation rules that include genital operations and deprivation of food and sleep. However, she highlights the reverse is also true and many of our cultures would be at odds with the philosophies of newcomer families. There is no universality regarding child rearing standards or a definition of child abuse. While the 'Framework for the Assessment of Vulnerable Children and their Families (2006)' recognises the need for cultural sensitivity, they outline that Irish legislation must be used as a benchmark in order to overcome this dilemma.

Child abuse, whether an individual category, or abuse across categories has devastating short and long term effects on children and these effects continue to threaten forthcoming generations of children. Child abuse is not constrained by social class, economic circumstance or geographical setting and is likely to occur in all communities (Maher, 1987). In line with the fundamental underpinnings of the Child Care Act of 1991, the safety and welfare of children must be the responsibility of all citizens, particularly those whose professions bring them into daily contact with children. The final section of the literature considers the role of schools and teachers and the contribution they have to offer to child protection work.

1.8 The Role of School and Teachers in Child Protection

'Schools have never found their role in child protection easy. This is partly because it is a challenging field for everyone engaged in it (Adams, 2002, p3)'.

Currently in Ireland there are approximately 3,300 primary schools under various management bodies, including the Catholic Primary Schools Management Association, Church of Ireland Board of Education, Educate Together and An Forás Patrúnachta. The DES

Child Protection Guidelines and Procedures (2001) provide schools with guidance on dealing with allegations or suspicions of abuse, how to deal with a disclosure of abuse, dealing with parents and allegations against a school employee. The 'Children First' guidelines also provide a summary of the responsibilities of school management which include; having clear procedures in place in the school in relation to child protection issues, allocating a senior member of staff specific responsibility for child protection, monitoring children at risk, having curricular provision in place in relation to children's safety and promoting in service training for teachers and Boards of Management (Department of Children and Youth Affairs, 2011). Further enforcement of the school's child protection responsibilities are outlined in the DES Circular 0061/2006 which re-emphasises the need for schools to report allegations or 'reasonable suspicions' of abuse and outlines that each school must have child protection procedures in place. In response, schools have drawn up and agreed procedures based on the national guidelines and DES guidelines and formulated the schools child protection policy. Gilligan (1995) highlights the importance of a comprehensive school policy informed by guidance and knowledge in ensuring there is a competent response by teachers and schools. In addition, 'school management and authorities should provide all new staff, whether teaching or otherwise with a copy of the school's child protection guidelines and ensure that they are familiar with the procedures to be followed (DES, Circular 0061/2006)'. In recent years the DES Inspectors, through incidental visits to schools or through their Whole School Evaluation (WSE) process have requested to see the schools child protection policy. Buckley and McGarry (2010) highlight that one cannot assume that protocols are adhered to just because they are in place and as of yet the compliance of primary schools has not been the subject of any formal review. Indeed the study conducted by Buckley & McGarry (2010) highlighted the low place that is occupied by child protection on an increasingly crowded

primary school agenda and furthermore that informing new staff about child protection policies is not a matter of priority for school management.

1.8.1 The Designated Liaison Person

‘All Boards of Management must designate a senior member of staff to have specific responsibility for child protection. This person will be the Designated Liaison Person for the school in all dealings with health boards, An Garda Síochána and other parties, in connection with allegations of abuse (DES, 2001, P8)’.

The DES guidelines recommend that the principal teacher assumes the position of DLP. In the absence of the DLP, for whatever reason, another nominated member of staff should be appointed to ‘assume their responsibilities and this person would be the Deputy Designated Liaison Person (DES, 2001, p8)’. The sharing of information or the professional relationship between a DLP and Deputy DLP is not interpreted in the guidelines. Confidentiality is defined in the guidelines as ‘all information regarding concerns of possible child abuse should be shared on a need to know basis in the interests of the child (DES, 2001, p5)’. Giving information to those who need to have it to ensure the protection of vulnerable or abused children is not regarded as a breach of confidentiality in the guidelines (DES, 2001). Each DLP has a professional responsibility to interpret confidentiality in relation to each particular circumstance and decide with whom information should be shared, be it the Deputy DLP, or other staff members within the school.

The purpose of this research is to investigate the experience of persons nominated to the position of DLP in their respective schools. The author could locate only one relevant study on the role of DLP carried out in Ireland. The INTO, at their annual conference in 2007 adopted the following resolution: ‘Congress demands that the CEC carry out a thorough investigation and review of the role of INTO members acting as the Designated Liaison

Person under the child protection guidelines, Children First, this review would examine the structures of interagency communication along with the supports and legal advice available and report to Congress 2008 (INTO, Report to Congress, 2008, p1)'.

The INTO sent a survey to a random 15% of their principal teacher population in the country. Following the results of the survey a number of respondents were requested to attend a focus group to discuss the findings of the survey. The specific aims of the survey and focus groups were to; identify training needs and other supports and to identify the experiences of DLP's dealing with other agencies in order to enable the INTO to address the terms of the Congress resolution (INTO, 2008). While this study was not unrelated to the INTO resolution in that it focused on a key aspect of the DLP's role in communicating with other agencies, and identified training and other support needs, the central aim of this research was to explore the participants 'lived experience' of the role, with an in depth focus on the supports and challenges in the role and also the role of schools and teachers in child protection work. Many of the recommendations of the INTO survey were in relation to training needs for both DLP's and whole school staffs and in response to this a one day seminar for DLP's and Deputy DLP's was offered nationwide over the last number of years. The experience of the role, encompassing the personal experience of the role, dealing with outside agencies, the role of staff, children disclosing abuse and training needs is the thrust of this research which sought to understand the multi faceted nature of the role within its environment.

The INTO report to Congress highlighted that 91% of the 335 respondents were the principal of the school. Members found their role as DLP 'time consuming, and very isolating and solitary (INTO, 2008, p3)'. While the DLP has to support class teachers and others involved in child protection issues, the report indicated that there was no support structure for the DLP or the school. Among the recommendations from the CEC of the INTO included; that support should be put in place for the DLP as the key school link person with the family

and all other agencies, that child protection matters should be included in Leadership Development in schools (LDS) Misneach training for newly appointed principals and that support groups should be established for DLP's (INTO, 2008).

1.8.2 Delivering Equality of Opportunity in Schools

DLP's in Irish schools serve in a variety of different size and type of school from a one teacher school, where the DLP is obviously a teaching principal to large schools where, if the DLP is the principal, he/ she is in an administrative role with large numbers of staff and students to administer to. It is estimated that approximately two thirds of all the principals in this country are teaching principals. Economic deprivation is a feature of many communities in Ireland. 600 of the approximately 3,300 primary schools in Ireland participate in the 'DEIS-Delivering equality of opportunity in schools (DES, 2005a)' initiative, aimed at combating educational disadvantage. These schools are categorised as DEIS band one and band two schools. Contextualised by the Education Acts definition of educational disadvantage; 'the impediments to education arising from social or economic disadvantage which prevents students from deriving appropriate benefit from education in schools (Government of Ireland, 1998, section 32.9)', band one and band two schools target those deemed the most educationally disadvantaged in the state. Generally speaking, urban/town schools are categorised as either band one or band two schools, while all rural schools are band two schools and in each category it is indicated that there are approximately 300 schools (DES, 2005a). The overall aims of the DEIS action plan comprise 'a new integrated School Support Programme (SSP) which will bring together, and build upon, existing interventions for schools and school clusters/communities with a concentrated level of educational disadvantage. The differences between urban and rural disadvantage will be taken into account in targeting actions under the programme (DES, 2005a, p9)'.

One of the existing schemes to be implemented into the SSP was the Home/School/Community/Liaison (HSCL) scheme. The HSCL scheme was introduced by the DES in late 1990 as an initiative to counteract disadvantage through increasing cooperation between schools, parents and other community agencies in the education of young people (Ryan, 1994). The report on the evaluation of the scheme highlighted a major advantage of the scheme was the provision of a coordinator who could liaise with parents and the community outside the school (ibid). The DEIS action plan (2005a) saw the role of the HSCL teacher as renewing the emphasis on the involvement of parents and families in children's education in schools participating in the SSP (DES, 2005a). All DEIS band one and two schools have a HSCL teacher to cover either one or more schools. In general, urban or band one schools have a full time teacher and band two schools have a teacher working with clusters of rural primary schools. However, as and from September 2011, HSCL teachers will cease to work with clusters of rural schools. This will be a loss to the pupils, parents, teachers, and community representatives in prioritising children's educational needs.

1.8.3 Informing Parents

'Any designated liaison person who is submitting a report to health boards or An Garda Síochána should inform a parent/guardian unless doing so is likely to endanger the child or place the child at further risk (DES, 2001, p5)'.

Informing parents that a report has been submitted to the HSE is an aspect of the role that DLP's find very difficult. The INTO report to Congress (2008) highlighted that there was little recognition of the fact that through making a disclosure there was huge potential for damage to the relationship built by the school and parents over the years and furthermore it would be difficult to maintain any form of positive relationship with parents into the future. Webb & Vulliamy (2001) describe the relationship built between schools and the parental

community. Parents often come to school to seek advice from the principal on a range of different issues concerning their children. These issues are often in relation to emotional or behavioural problems, developing issues with other children or a child's learning difficulties. In addition, they come to confide personal problems such as a relationship breakdown, bereavement, domestic violence in the home, drug problems, issues to do with re housing or partners who have left the home. Webb & Vulliamy (2001) argue that they turn to the school principal to receive practical help and support; counselling or additional understanding for their children whose behaviour is likely to be adversely affected by these problems. This is a moral dilemma for the principal as DLP, mindful of the need to maintain a relationship with parent's, combined with child protection responsibilities and also a desire to support parents who are genuinely in very trying circumstances. Baginsky (2000a) highlights that historically teachers have been very reluctant to engage with the child protection system as they are unwilling to breach confidentiality with parents for they fear this will damage relations and this will ultimately lead to difficulties for the children. Zellman & Bell (1990, cited in Walsh et al, 2006) feel that in deciding to report, the quality of relationships with the child and the child's family, combined with knowledge of relationships within the family is an influencing factor. Walsh et al (2006) feel that given the range of issues that parents discuss with teachers and the school principal, some of which are child protection issues and others may not necessarily be, the presence of social workers and other professionals in the school who teachers can discuss concerns with informally would make the reporting process much easier (ibid).

1.8.4 Keeping records

The DES Child Protection Guidelines and Procedures (2001) outline the importance of having records of all information available when child abuse is suspected; 'signs of injury

should be described in detail, and if appropriate, sketched. Any comment by the child concerned, or by another person, about how an injury occurred, should be recorded; preferably quoting words actually used as soon as possible after the comment has been made (DES, 2001, p10)'. The 'Children First' national guidelines (1999, 2011), in outlining the responsibilities of school management indicate that monitoring the progress of children who may be at risk of abuse is among the responsibilities. No guidance is given on monitoring in the DES guidelines. The Child Abuse Prevention Programme (CAPP) issued a booklet to schools in 2008 entitled 'Stay Safe: Best Practice in Child Protection: Guidance for Schools'. The booklet offered guidance to schools on drawing up their child protection policy and what should be included therein. The guidelines recommend that a comprehensive school policy should address the three P's of child protection: prevention, procedures and practice. In the procedures section of the policy; 'the school policy in relation to the practicalities of record keeping should be addressed here (Child Abuse Prevention Programme, 2008, p11)'. Appendix II of the booklet contains a sample record sheet, and many schools have used this suggestion sheet in adopting a monitoring system for the school. The in service training provided for DLP's issued a handout to participants entitled 'Some suggestions for Monitoring' which offered a list of headings whereby teachers could categorise their observations and this would enable them to note an emerging pattern or deteriorating situation. The headings included:

- Attendance and punctuality
- Appearance, hygiene, care
- Physical injury
- Child's behaviour
- Child's language
- Child's drawings, writings, play

- Mood changes

It is the expectation that all teachers would be aware of monitoring procedures in the school, that an agreed system would be in place and that this would feed into the overall record keeping system of the school in relation to child protection issues. Gilligan (1995) confirms the usefulness of teachers making 'contemporaneous' notes about any concerns they might have, including the circumstances in which they arose, as patterns or clues are often much more obvious when reviewed over time.

1.8.5 The Ethos of Care in Schools

'Clearly, teachers, in addition to their professional duty of care, share a moral responsibility towards children in their care (Gilligan, 1995, p29)'.

Gilligan (1995), in outlining the role of teachers and schools in protecting children at risk of abuse references the White Paper in Education issued by the DES in 1995. The White paper outlines the role of teachers and schools in promoting the welfare of their students. Among these aims include;

- To nurture a sense of personal identity, self-esteem and awareness of one's particular abilities, aptitudes and limitations, combined with a respect for the rights and beliefs of others.
- To promote quality and equality for all, including those who are disadvantaged through economic, social, physical, and mental factors in the development of their full educational potential.
- To promote physical and emotional health and well being (DES, 1995, cited in Gilligan, 1995).

Schools and teachers play an important role as guarantors of their student's welfare. Hargreaves (1998, cited in O Connor, 2006), identifies that teaching and learning are socially

embedded practices which are deeply embedded in emotional experiences, among which is a desire to care for students. Nias (1999, cited in Vogt, 2002) argues that primary teaching has been conceptualised as a 'culture of care' and distinguishes six aspects of the culture of care in primary teaching: care as affectivity, as responsibility for learners, as responsibility for the relationship in the school, as self-sacrifice, as over-conscientiousness, and as identity. Buck & Freeman (1986, cited in Vogt, 2002) have identified that prospective primary school teachers, more so than secondary school teachers give reasons related to caring as motivation for becoming a primary school teacher. The nature and work of a primary school teacher both demands and fosters an ethical orientation towards care. Hargreaves (1994, cited in O Connor, 2006) believes that teaching involves human nurturance, connectedness, warmth and love and that each teacher's belief about their role in caring for their students forms an essential part of their identity.

Hargreaves & Goodson (1996, cited in O Connor 2006) argue that teaching has traditionally been seen as a caring profession rather than a high status one; however the caring standards of teaching are more often than not ignored. Public policy, generally seeks to assess teacher quality and the ethical and emotional nature of teacher's work is consistently ignored (Constant & Gibbons, 2004, cited in O Connor, 2006). Public policy and professional teacher standards tend to ignore the emotional dimensions of the teaching role and the role that teacher's emotions play in their work is rarely acknowledged (O Connor, 2006). Jeffrey (2002, cited in O Connor, 2006), feels that the humanist discourse in education has been challenged by a policy culture which emphasises ability and creates hierarchical and depersonalised relationships. In his view, the introduction of teaching standards have created a per formative culture and there is an emphasis on accountability and the public demonstration of professional attributes which is regarded as superior to teacher's ethical and emotional qualities. In 2007 the Teaching Council published the 'Codes of professional

conduct for teachers (The Teaching Council, 2007)'. Care is regarded as one of the 'core values' of the code and it is regarded that teacher's 'practice is motivated by the best interests of the students entrusted to their care (The Teaching Council, 2007, p12)'. The first standard of the code outlines that 'teacher's should take care of students under their care with the aim of ensuring their safety and welfare insofar as is reasonably practical (The Teaching Council, 2007, p22)'. Developments are now taking place in England to pilot a new accountability mechanism: the school report card. This will be piloted during 2009-2011 and will increase measures of pupil wellbeing, although it is recognised it is not easy to measure a school's contribution to well being as it is dependent on many other factors (Munn, 2010). Ultimately, Forrester (2005, cited in O Connor, 2006) outlines that teacher's work also consists of non-work as there is no economic benefit for caring and those activities technically do not constitute work. Hargreaves (2000) contends that there is 'a disturbing neglect of the emotional dimension in the increasingly rationalised world of educational reform (Hargreaves, 2000, p811)'. What appears to be ultimately at stake for educational policy and administration are increasingly rationalised, cognitively driven and behavioural priorities of knowledge, skill, standards, targets, performance, management, planning, problem solving, accountability, decision making and measurable results. It is well established that children and young people cannot learn effectively unless they feel secure and their basic needs are met. This does mean that coupled with curriculum requirements, teachers have a responsibility for pastoral care (McKee & Dillenburg, 2009).

Teachers, through their emotions and actions motivate, help, and inspire their students. Often the children who need this care in greater quantities are children in DEIS band one schools and teachers working with these children strive to make school a safe and secure environment for them, where consistency and routine can be taken for granted. Lovitt (2010) argues that for children living in stressful and dysfunctional situations or

circumstances of abject poverty, or where violence of one type or another is common, their safest, most enjoyable and productive situations can be in the schools which they attend. Policy documentation, without diminishing educational expectations should reflect the dual role of caring within the school environment and the aim of each student achieving high educational outcomes as opposed to creating a tension between the two.

1.8.6 The Role of School within Communities

Barnes et al (2006) note that schools are communities within their own right but are also part of their local communities. Because schools have such a unique position in society, Barnes et al (2006) believe they can be developed in order to maximise their potential whereby they can impact positively on the whole community of children and their families and other local residents. Traditionally, the role of school has been to educate children and this, along with extracurricular activities such as sport has resulted in few resources available to go beyond that remit.

A review conducted for the UK Department of Education and Skills concluded that parental involvement in their children's education is the single biggest factor in the educational attainment of children (Desforges & Abouchaar, 2003 cited in Barnes et al, 2006). In addition to supporting parents, there is a growing recognition that schools can do a lot more to become engaged with the local community, particularly in supporting vulnerable children and families. If schools are in the position where they have a range of health and care professionals working with them, this may form the potential for closer relationships with parents and schools and enable schools to play a role in supporting vulnerable families within the community (Barnes et al, 2006). While links between schools, families, and communities have been recognised in the literature, these links have never been fully developed in policy. What must also be taken into account are the increasing pressures on

school with more and more curriculum requirements and the ever increasing focus on educational targets, planning and accountability.

In the UK, the focus of the Green Paper 'Every Child Matters' provides a framework for improving children's outcomes by encouraging early intervention, joined up working between professionals, better educational outcomes and information exchange between agencies (ibid). Research has shown that some groups of service users find it difficult to access services in schools (ibid). In prioritising the welfare of vulnerable children, schools have a key role to play to families and the wider community in ensuring their services are accessible but also in exploring all avenues to maximise their potential within the community. This needs to be supported however, by adequate resources, finance and personnel that can work in school and through school to ensure that it is both realistic and achievable.

1.8.7 The Role of Teachers in Child Protection Work

'The contribution of teachers to effective child protection has increasingly been brought to the fore with an acknowledgement that the role of teachers in school is crucial (Bishop & Lunn, 2002, p187)'.

The effectiveness of a DLP depends to a large extent on the ability of other teachers to report their concerns and respond appropriately to children who may be at risk (Baginsky & MacPhearson, 2005). It is widely recognised in the literature that teachers have a very significant role to play in both detecting and reporting child abuse, although that role can largely go unacknowledged. Teachers are the only profession who are in close and continued contact with all children (Kellmer Pringle, 2000). As children spend one third of their time in school, teachers and indeed others working in the field of education are in a unique position to contribute to child abuse detection and prevention (Baginsky, 2003 cited in McKee & Dillenburg, 2009). Gilligan (1995) outlines that in this country; the total number of teachers

comfortably outstrips the total number of all other professionals dealing with children. Briggs and Hawkins (1997, cited in McKee & Dillenburg, 2009) argue that the teacher's role has far reaching influences because they are able to observe early signs of abuse such as changes in behaviour or a failure to develop typically. Walsh et al (2006) note that teachers have a background in child development, further they are trained to be recorders and observers of children's play and learning and the practice of teaching includes a focus on individual needs and interests which equips them with many skills for a role in child protection. Braun & Schoenfeld (1994, cited in Webb & Vulliamy, 2001) argue that teacher's concerns to educate the whole child by meeting their social, emotional and psychological needs as well as developing them academically means the value base in teacher's work is very supportive to child protection work.

1.8.7.1 Challenges to reporting

'Despite legal mandates to report, many teachers are not compliant with the law and often fail to report child abuse (Kenny, 2004, p1312)'.

Historically teachers have been very reluctant to engage with the child protection system and in Ireland; the small amount of research evidence that does exist indicates teacher's commitment to fulfilling their child protection obligations is fragile (Buckley & McGarry, 2010). Many of the major high profile cases both here and in the UK have been critical of teachers for a number of reasons. The most recent high profile case in Ireland, the 'Roscommon Case' raised questions about the role of the teacher; 'It is not possible that teachers and other pupils at their school did not notice that these children were not toilet trained, that they were crawling with head lice down their faces and that they were unable to learn (The Irish Times, January 24th, 2009)'. A casual glance at the international literature highlights the non reporting rates of child abuse by teachers. Non reporting rates varied from

14% to 67% for US teachers and 8% to 46% for Australian teachers (Bunting et al, 2010). Unfortunately, a number of factors have been determined which may interfere with teachers ability to identify and report child abuse (Kenny, 2004). To begin with, they are better at reporting some kinds of abuse over other kinds. For example, cases of physical abuse are more likely to be reported over emotional abuse and neglect and teachers consider cases of physical abuse as more reportable (Walsh et al, 2006). 'This tendency has been attributed to teachers' difficulty in recognising symptoms as evidence of abuse and the complexities involved in determining if abuse has occurred when the signs and symptoms of abuse are difficult to distinguish from other childhood and developmental difficulties (Walsh et al, 2006, p68)'. Kenny (2004) further indicated that teacher's lack of ability to identify symptoms specifically deters teachers from reporting suspected abuse. Secondly, with teachers, there is a tendency to delay reporting until they feel they have significant evidence. Hawkins & McCallum (2001b, cited in Bunting et al, 2010) suggest that for some teachers there is a mismatch between the level of evidence required by law and the level teachers expect to satisfy their own personal need for confidence in initiating the seriousness of a child abuse report. O Toole et al (1999, cited in Walsh et al, 2006) highlight that sometimes teachers fail to report because of their perceptions that the abuse or neglect is not serious enough.

Teachers' pre service and on the job training is another impediment to reporting. Many studies have highlighted that the child protection training for student teachers has been insufficient (McKee & Dullenburger, 2009; Buckley & McGarry, 2010). Studies have highlighted that during pre service training child protection is often overlooked in favour of other core curriculum areas (Baginsky, 2003). In the Irish context, Buckley & McGarry conducted a study in 2009 which sought to ascertain the degree to which newly qualified teachers, in their first six months of full time teaching, understood their formal child

protection responsibilities. The findings demonstrated newly qualified teachers' lack of awareness of their responsibilities, and in doing so highlighted that training at pre qualifying level appears to be very light in terms of hours and not sufficient (Buckley & McGarry, 2010).

In Ireland, training has been offered to the DLP and Deputy DLP in recent years but it has not been extended to all teachers. There are options for schools to apply for training through the Professional Development Service for Teachers (PDST) or the CAPP; however this remains the responsibility of the school principal most often. Baginsky (2000a) has highlighted that while training and updating of designated teachers is absolutely essential, training for other teachers has been more of a hit and miss matter. Baginsky (2003) feels that regular in service training should be a requirement for teachers to continue in employment. A survey conducted by Baginsky highlighted that teachers are more confident of what to do after training (Buckley, 2003).

Walsh et al (2006) note that teacher characteristics such as gender, parental status, years of experience and teaching context may predict whether teachers will report. Zellman & Bell (1990, cited in Walsh et al, 2006) outline that male teachers are less tolerant of abuse and will report it more frequently. Previous reporting behaviour has been shown to predict professional responses to child abuse, including whether the respondent had ever made a report of abuse, the number of reports made and whether the respondent had ever not reported abuse they had recognised (O Toole et al, 1999). Concerns and fears about the negative consequences of reporting also influence teachers. Smyth (1996, cited in Walsh et al, 2006) note that this may be as a result of prior negative experiences when reporting. Often despite interventions by school staff which include reporting concerns to the HSE, a student remains in difficult circumstances. Witnessing this can leave staff helpless, inadequate, angry and perhaps less likely to report in the future (O' Dowd, 2008). Interpersonal difficulties,

including poor communication between schools and the HSE, and lack of feedback from staff have been cited in Irish schools as reasons which discourage schools from reporting (Buckley & McGarry, 2010). Other factors which may inhibit reporting include the fear of legal consequences due to a false allegation, fear of reprisals against the child and parental disapproval and denial of reports (Walsh et al, 2006). Reluctance to report may be due to fears of retaliation from parents who live in the same community (Buckley & McGarry, 2010). Professionals may even fear their own personal safety in the aftermath of a report. 'Teachers' concerns and the fears of the consequences of their reports may lead them to conclude that in some cases, informal school based interventions rather than referral to statutory authorities have better outcomes for children (Walsh et al, 2006, p70)'.

The climate of the school can also influence teachers in reporting abuse. The role and attitude of the school principal is cited as influential in determining whether or not a report will be made (Walsh et al, 2006). Lumsden (1992) argues that particularly in situations where teachers are unfamiliar about their role in child abuse, the attitude of the principal are a crucial determinant. A study of school counsellors in the United States noted one barrier in making reports was that sometimes the school manager did not wish to see a report made and this was highlighted by a number of respondents (Bryant & Baldwin, 2010). A study conducted by Kenny (2004) highlighted that very few teachers were aware of school procedures suggesting that they have not been educated in the workplace. As has been highlighted, the 'Children First' (2011) guidelines outline that Boards of Management, in consultation with the DLP must prioritise that all school staff are over familiar with the child protection procedures in the school. Given all of the potential constraining factors of case characteristics the temptation is for teachers to be really sure before they report what they suspect. But, in doing so, they may be placing the child at risk and damaging the prospect of any subsequent intervention.

1.8.7.2 The R's of Teachers' Role

In order for teachers to play an effective role in child protection Gilligan (1995) outlines the five R's of their overall role; (i) Readiness to recognise the possibility of abuse (ii) Identification of risk of abuse (iii) Timely referral (iv) Resource person for those involved in the process of investigation and (v) Rehabilitation and Recovery. With readiness to recognise abuse, it is necessary for all teachers to be alert to signs that a child may be experiencing abuse. The teacher's knowledge of a child may enable him to spot clues that all is not well. In identifying the risk of abuse Gilligan (1995), highlights that trends may be very telling and outlines the importance of teachers making 'contemporaneous' notes about concerns and this may lead to a pattern or trend emerging. The importance of a timely referral on teachers' behalf is very important as this is a professional duty teachers have to the welfare of children in their care and is outlined as an 'incumbent' duty in the DES child protection guidelines (2001). Of greatest concern, it leaves a child exposed to further abuse. While teachers may find child protection conferences difficult and stressful events, they should attend if invited as they do have a significant contribution to make and play a resource role in the investigation, planning and assessment phase. Finally, in the rehabilitation and recovery phase teachers have a significant role to play in ensuring that the classroom is a safe place for a child and in conveying a caring and accepting attitude towards the child.

1.8.8 Children Telling

'Teachers enjoy a relationship of trust with children so that children may be more willing to inform teachers of their abuse or that of a class mate (Tower, 1996, p1084, cited in O Toole et al, 1999)'.

Barriers to victim disclosure include feelings of shame, blame, dependence, isolation, difficulty in challenging authority, fear of retaliation by the abuser and the motivation for

reporting being misrepresented (McCormack et al, 2005). Factors which facilitate victim disclosure include the significance of the event for the victim, their communication skills and confidence, having somebody trustworthy and receptive to report to, the probability of being believed and receiving an efficient response, the perceived consequences for the safety and well being of the victims and others and whether the victim feels any sympathy for the abuser (ibid). While the SAVI report conducted in Ireland indicated that for 47% of participants who disclosed experiences of sexual violence, it was their first time disclosing the abuse to others (McGree et al, 2002), the literature suggests that if children are to disclose abuse they will seek a neutral, trusted figure when they decide to talk about their problems and teachers are very often the people that abused children turn to for help (Maher, 1987). Indeed, Maher (1987) contends that it is not an accident that a child chooses a teacher to disclose to, as children anticipate that a teacher can maintain an influence over the pace of events and as they do in most events in a child's life, they will take action. Furthermore, while a child may not disclose abuse directly, they may try to tell by their behaviour or by running away (ibid) which is why unusual behaviour should always be questioned and the space given to children to share feelings as to why they are acting in a particular way. Whitney (1993, cited in Webb & Vulliamy, 2001) reminds us of the extremely valuable nature of the relationship between teachers and students. A study suggested that a child's approach to seeking help when they are in difficulty is more likely to be influenced by positive qualities in the potential helper as opposed to the severity of the child's problem (Westcott & Davies, cited in Gilligan, 1995). Gilligan (1995) reminds us that during a disclosure of abuse it is not the teacher's task to investigate the circumstance, rather to establish that there are reasonable grounds for referral to the HSE. In relation to schools, Blyth & Milner (1997, cited in Webb & Vulliamy, 2001) argue that lack of privacy and timetable commitments means that schools do not provide the optimum environment for teachers to listen to children who want to talk about their abusive

experiences. It is also acknowledged that in relation to sexual abuse, many children disclose abuse initially to another child, usually a friend or child of the same gender as the victim (MacIntyre et al, 2000). For teachers, it is very important that information relayed from another child in relation to abuse is taken seriously and acted upon and also teachers must bear in mind that families exert a very long lasting and powerful influence over children (Buckley et al, 2006). The main message from the SAVI study, which is augmented by other studies must be borne in mind: 'much sexual violence remains unknown, but people may be willing to disclose abuse if asked (McGree et al, 2002, p282)'.

1.8.9 Training Requirements for Teachers

'Professionals working with children and young people could contribute to breaking the cycle of abuse if appropriately trained (McKee & Dillenburger, 2009, p326)'.

In addition to providing training for teachers, the specific training needs of DLP's and teachers have received some consideration in the literature. Studies of teacher knowledge reveal that following appropriate training, teachers report an increased knowledge which helps them to feel better equipped to deal with the challenges of identifying and reporting abuse and neglect (Walsh et al, 2006). Specific training requirements highlighted by DLP's included: ongoing effective training and refresher courses, whole staff training in addition to specific training for DLP's, training on report writing and an input on training from the HSE and An Garda Síochána (INTO, 2008). Indeed training needs for teachers are equally necessary for DLP's and in addition specific training in relation to their role should be provided. Gilligan (1995) outlines the aspects of child abuse teachers should understand if they are to be effective in their role in protecting children and these should be addressed through training; teachers must be able to recognise the signs and symptoms of abuse. A study of school counsellors in the United States examining their reporting experiences

highlighted that participants valued past training which was specific to defining and identifying the types of abuse, specific indicators and softer signs that are present in some abuse victims (Bryant & Baldwin, 2010). In addition, teachers must have an understanding of the effects of abuse and be able to appreciate the 'irreparable harm' that abuse may cause to children, particularly those who are vulnerable due to other adversity in their lives (Gilligan, 1995). Also, teachers need to be aware of the unequal power relations between the abuser and the child and that abuse is often visited on a child less well able to protect him or herself. A training need identified by school counsellors was on how to have discussions with students or question them where abuse was suspected (Bryant & Baldwin, 2010). A further requirement of training is to develop skills in multi disciplinary work and there is a recognised need for multi agency training as a component of the training process (McKee & Dillenburg, 2009). This will help different professionals to understand the different terms of reference under which they operate, how their roles inter relate and most importantly the need to get to know and trust each other as professionals (Maher, 1987). Braun & Schoenfeld (1994, cited in Webb & Vulliamy, 2001) outline that training should provide staff with the opportunity to explore their own feelings, attitudes and values about abuse. The Green Paper 'Every Child Matters' (Department for Education and Skills, 2003) conceptualised an approach to child protection training in four tiers where each tier equates to a different level of training and service need: Tier one training and service issues relates to universal issues including introduction to and basic awareness of child abuse; tier two training equates to an intermediate level and concentration and multi agency practice and early prevention issues; tier three offers consolidation and reflection related to services provided directly for children in need and tier four focuses on specialised issues that are advanced and offer specialist subject based training. The adoption of a tiered approach to training in Ireland could help to address training needs along a spectrum and offer appropriate training to teachers and DLP's

with different levels of experience. It would also show a commitment in Ireland to adequate training for teachers in the area. One of the major challenges in going forward will be in providing sufficient training to staff to enable them to have the confidence to meet their child protection responsibilities, while bearing in mind Buckley & McGarry's study (2010) that the commitment of school managers and DLP's and a climate of school that supports reporting are equally important factors.

1.8.10 Extending the Teachers Role in Child Protection

Arguments which exist for extending the teacher's role in child protection are very valid given the amount of time children spend in schools and the relationship that children and teachers develop. However, these arguments raise two fundamental questions. The first is about teachers' preparedness and perceptions of the role? The literature clearly demonstrates that while it may be very valuable to extend the role of teachers in the area of child protection, this would have to be supported by specialist training and interagency collaboration on the school premises. The second question ponders whether it is possible or appropriate in the current climate to sustain, let alone further develop a culture of care (Webb & Vulliamy, 2001)? Given the exponential growth in teachers' roles and responsibilities, it is important not to increase the scope of expectation on class teachers so they are not burdened with the current sense of doing everything inadequately. A project carried out in 1999 in England, 'Social Work in Primary Schools (SWIPS)' argued that while schools are valuable sites for child protection, primary teachers should only be expected to do this workload alongside their teaching and curriculum responsibilities if they are given adequate training, non contact time and specialist support and resourced accordingly, while bearing in mind it is one aspect of a teacher's life (Webb & Vulliamy, 2001).

1.8.11 Personal Safety Education

Personal safety education is taught within the context of Social Personal and Health Education (SPHE), as Safety and Protection is one of the strand units of the curriculum (Government of Ireland, 1999). The programme which is in use in the vast majority of schools to address personal safety is the Stay Safe programme, 'a culturally sensitive, developmentally staged child abuse prevention programme (MacIntyre et al, 2000, p200)'. It is a multi systemic insofar as it involves teachers, parents and children. It was developed in the late 1980's as a result of the significant rise in the numbers of official reports of child abuse, when it was decided that a positive preventative approach was necessary to deal with the problem (An Roinn Oideachas, 1995). Given the predominantly catholic and conservative nature of Irish society at the time of its development, together with the absence of sex education in schools, a particularly sensitive approach was needed in approaching child abuse prevention (MacIntyre et al, 2000). 'The need for children to tell a trusted adult every time someone continues to touch them in a way that makes them uneasy was the corner stone on which the disclosure training element of the Stay Safe programme was built (MacIntyre et al, 2000, p206)'. Assertiveness training and enhancing self esteem was incorporated into the programme in addition to providing reassurance for children that they were not to blame for abuse. Studies of sex offenders suggest that enhancing children's assertiveness is one of the best ways of preventing sexual abuse (MacIntyre & Carr, 1999). Stay Safe has been implemented in the majority of primary schools in Ireland since 1991 and since its introduction a study by MacIntyre & Carr has highlighted that the role of teachers in the disclosure process and a referral being made by a child actively and purposefully telling a trusted person increased significantly (MacIntyre et al, 2000).

An evaluation of the programme conducted for the DES in 1995 showed that the Stay Safe programme seemed to have been well reviewed by the majority of parents and schools (An Roinn Oideachas, 1995). The main matter of controversy was the suitability of the programme in the Irish context. Other criticisms included the teaching of lessons related to sexuality to innocent children and the potential for damage to the trusting relationships between children and their relatives and friends as a result of the programme (ibid). The study by MacIntyre & Carr (1999) highlighted that all but one teacher out of 28 were willing to teach the programme and all but five parents out of 406 wanted their children to participate in the programme. The final report of the primary curriculum review by the National Council for Curriculum and Assessment (NCCA) (2009) noted that 89% of the respondents found Stay Safe either 'helpful' or 'very helpful'. However, this review noted that time was a major impediment in implementing SPHE, given that it only has one half hour per week on the timetable. As one participant noted 'It's very easy to put it aside and say it's done informally everyday (NCCA, Primary Curriculum Review, Phase 2, 2009, p151)'. Carr (2006) recommends the use of validated prevention programmes in primary schools to provide children with the necessary skills to prevent child sexual abuse. While the Stay Safe resources for schools are due to be updated, CAPP is currently working with the National Centre for Technology in Education (NCTE) to develop lessons and resources to address the issue of cyber bullying and internet safety. CAPP also liaises with the DES in endeavouring to ensure that schools which have been identified as not teaching Stay Safe are targeted and receive training and up skilling in the area.

1.9 Conclusion

This literature review has provided an overview of the areas which are pertinent to the topic under exploration; the role of the DLP. The literature reviewed the following areas; the history of the development of child protection in Ireland, Child protection in the UK and New Zealand, a systems approach to child protection, the role of the HSE in child protection, interagency communication and cooperation, including the child protection conference and the theory of interagency working, definition and recognition of child abuse and the role of schools and teachers in child protection work. A review of the literature has demonstrated that a very limited amount of research has been conducted on the role of the DLP, who has the ultimate responsibility for all child protection matters in school. The present thesis uses a qualitative methodology in the main to uncover an understanding of the role of the DLP incorporating factors in the school environment such as the role of school staff and the ability of children to be able to disclose abuse. There were two phases of study in this research. Initially, a survey questionnaire was sent to thirty two DLP's. The data from the questionnaires was used to select sixteen DLP's, eight from DEIS and eight from non DEIS schools with a variety of years of experience, for interview. Interpretative Phenomenological Analysis (IPA) was determined the most appropriate method of analysis for the study.

2.1 Methodology

2.1.1 Introduction

This chapter provides an overview of the research design and its subsequent implementation. It begins by examining the purpose and context for the study and provides a rationale for why the choices in relation to research design were appropriate for this particular study. It gives an explanation of the study's sampling technique and the manner in which the study participants were selected. Finally, the chapter provides an account of the research process, and a description of the strategies used for ensuring methodological rigour.

2.2 Research Questions

This research investigates the experiences and perceptions of sixteen DLP's for child protection in primary schools. The target population for this study was DLP's with a variety of levels of experience and serving in different categories of primary school. The purpose of this study was to investigate the role of DLP's and from the investigation to use the learning to ensure that vulnerable children will be protected more adequately. The issues of what meanings the DLP's assign to their 'lived experience' of undertaking the role underpin the investigation. Each participant's account of their journey as DLP, incorporating the supports and challenges they have encountered, their preparedness for the role and the education programmes and supports that are offered to children in the school setting were among the main questions which would underpin the investigation.

2.3 Research Design

Implicit to this research was an exploratory approach. Exploratory research is used in projects where one is trying to seek new insights, ask questions and generate ideas and hypotheses for future research (Robson, 2002). More specifically, the research holds to the philosophical assumptions of the advocacy/participatory approach. This worldview is typically seen with qualitative research and holds that research inquiry needs to be intertwined with politics and a political agenda. The research thus contains an action agenda for reform that may change the lives of the participants, the institutions in which individual's work or live and the researcher's life. Specifically, issues need to be addressed that speak to important social issues of the day, issues such as empowerment, inequality, oppression, domination, suppression and alienation. Advocacy research provides a voice for the participants, provides a voice for these participants, raising their consciousness and advancing an agenda for change to improve lives. It becomes a united voice for reform and change (Creswell, 2009). Ultimately, through the voice of the DLP, this research addresses the most pressing social issue of children's protection and in doing so aims to advance an agenda to guarantee greater protection and safety for vulnerable children. The choice of methodology was influenced by three issues. Firstly, the researcher could source only one study in the Irish context investigating the role of the DLP which was carried out by the INTO. (2008). This study issued a survey questionnaire to a sample of over three hundred DLP's and following on from this two focus groups were carried out in different locations in Ireland to follow up on responses with DLP's. Secondly, in order to address the research questions and to afford primacy to the voices and experiences of the DLP's themselves, a qualitative approach was deemed, in the main, the most appropriate for this research. The researcher wanted to ensure that the participants in this study would have an opportunity to elaborate on their lived experience of the role, and therefore felt an interview with each

participant would provide the most suitable opportunity for this, which determined that the research would be mainly qualitative in its approach. The researcher was also very conscious of her own background throughout the research process. Having worked in a DEIS school for all of her teaching career to date and having delivered child protection seminars and workshops to DLP's and school staff, the researcher was very aware of the impact of these experiences on the study. This process and the researcher's involvement in it, therefore invoked the employment of a qualitative approach in an emergent design. Qualitative data seeks to 'uncover the thoughts, perceptions and feelings experienced ... by the participants (Mincicello, Aroni, Timewell & Alexander, 1995, p10)' and as such it offers an avenue to uncover the lived experiences of individuals and the meanings which are attached to these (Lincoln & Guba, 1985).

However, preceding this the researcher wanted to gain some knowledge into what were the most salient issues that would guide the semi structured schedule for the interviews, and further ensure that the most suitable candidates reflecting a variety of years of experience and school category would be chosen, hence the decision was taken to precede the interview with a survey questionnaire to support the researcher in acquiring this information.

2.4 Survey- Questionnaires

Pitman & Maxwell (1992) contends that 'methods deriving from different paradigms can validly and usefully be combined within the same study' and so 'it is meaningless to ask which of these mini-paradigms is right, best or most useful, because the answer depends on what the researcher wants to do (Pitman & Maxwell, 1992, p734)'. Patton characterises this approach as 'an attempt to move beyond formal modes to the practice of evaluation (Patton, 1990, p121)'. Exploiting the logic that the 'choice of research practice depends upon the

questions that are asked, and the questions depends on their context (Nelson et al, 1992, p2)', this enquiry employs the idea of researcher-as-bricoleur (Levi-Strauss, 1996), with the briocoleur as a kind of professional do-it-yourself person using whatever strategies, methods and empirical tools are available.

'The notion of a survey involves the span of vision which is wide and inclusive (Brown & Dowling, 1998, p27)'. The questionnaire was designed to uncover the focus for the interview questions. From the perspective that 'there is no reality except that created by people as they attempt to make sense of their surroundings (Guba & Lincoln, 1989, pp12-13)', the questionnaire attempted to identify the perceptions of the DLP in relation to their role. Ultimately the questionnaire was used 'for the measurement of opinions, attitudes, beliefs or orientations which has face validity, is internally consistent, has discriminative power and is reliable (Brown & Dowling, 1998, p71)'. A questionnaire consisting of twenty questions was sent to DLP's initially (see appendix C). The questions themselves were deliberately broadly framed so as to ensure that each study participant was provided with the greatest degree of autonomy in sharing their experiences. The covering letter (see appendix B) accompanying the questionnaire informed the participants about the nature and purpose of the study. Conscious of the fact that 'the design of effective questionnaires is fraught with technical difficulties (Brown & Dowling, 1998, p66)' survey approach uncovered through relevant literature on the methodology was used to guide the short questionnaire design. The initial data gathered in the questionnaire ensured that the interview participants could be chosen with a gender balance where possible and with varying lengths of experience in the role and from a variety of size and category of school. The remaining questions in the survey-questionnaire were employed to gather relevant data from DLP's in relation to their perceptions of the role, the challenges and supports involved, the training received and the supports offered to children in the school context. The responses from the questionnaire,

which were analysed in detail by the researcher, were used to ascertain the perceptions of the participants relating to the role of DLP and to assist the researcher in preparing an interview schedule. To improve survey-questionnaire response rate, a telephone call was made to each of the thirty two schools selected. The researcher had to be confident that each question would be interpreted in a similar manner. Therefore, the questions were kept as free as possible from ambiguity. Questions had to be carefully checked to ensure they were as free as possible from bias and did not lead the respondent towards a particular answer (Brown & Dowling, 1998). The questionnaire contained sets of Likert scale answers constructed to measure the respondents' perceptions and experiences of the role. The scales were useful devices in the research as they built in a degree of sensitivity and differentiation of response. Furthermore as Anderson (1998) comments 'Likert scales and rank order questions will serve most needs to achieve reliable and valid responses (p171)'. The survey was piloted by two DLP's and a friend of the researcher who does not come from an educational background. Their advice was taken on board in making alterations before the survey was administered-no further changes were made.

2.5 The Context of the Study

The study participants outlined below were drawn from a range of both urban and rural primary schools. Initially, when the questionnaires were distributed, sixteen schools were chosen from urban primary schools participating in the school support programme, Band One and Two, under the DEIS action plan for educational inclusion (Department of Education and Science, 2005a). The remaining sixteen schools were chosen to represent schools with teaching and administrative principals inclusive of gael scoileanna, special schools and schools under various school management bodies. The decision to choose eight

DLP's from DEIS Band One schools was taken in order to embody the richness of the lived experiences of DLP's. As certain categories of abuse, for example neglect is 'closely correlated with low socio-economic factors and corresponding physical deprivations (Department of Children and Youth Affairs, 2011, p70)', it was considered by the researcher that DLP's serving in such areas would have a huge wealth of experience to offer. The process of recruiting the study participants commenced during the first term of the school year in which the research was undertaken. The questionnaire with an accompanying cover letter was posted to the DLP of the thirty two schools chosen for inclusion in the study. As outlined, the letter sent to each of the thirty two schools explained the context of the study and the DLP's were invited to complete the questionnaire and indicate on its completion, their willingness to participate in an interview. From the thirty two questionnaires that were distributed, thirty one were returned and twenty six people consented to participating in an interview. After the questionnaires had been returned to the researcher, each of the questionnaires were analysed in detail and based on an agreement to participate in an interview and the range of responses given in the questionnaire, combined with the school type and years of experience of the DLP, sixteen participants were chosen, eight from DEIS schools and eight from non DEIS schools. During the second and third term of the school year in which the research was undertaken, interviews were completed with the sixteen participants. The table below outlines a demographic of the participants chosen for interview, highlighting the type of school they worked in and the number of years of experience they have in the role. The table distinguishes between those participants working in DEIS and non DEIS schools. The participant titled participant one, was the DLP with the least number of years of experience in the role, and participants were numbered through to number sixteen, representing the participant with the greatest number of years of experience in the role.

Table 2.1: Participant Profile (N=16)

Name	Gender	Principal Type	School Category	School Type	Years of experience as a DLP
Participant 1	Female	Administrative Principal	Co-educational	Non DEIS	0-1 Year
Participant 2	Female	Administrative Principal	Special	Non DEIS	0-1 Year
Participant 3	Female	Administrative Principal	Co-educational	DEIS	3-4 Years
Participant 4	Female	Teacher in school	Co-educational	DEIS	3-4 Years
Participant 5	Male	Administrative Principal	Co-educational	Non DEIS	4-5 Years
Participant 6	Female	Administrative Principal	All Girls	DEIS	4-5 Years
Participant 7	Male	Administrative Principal	Co-educational	DEIS	5-10 Years
Participant 8	Male	Administrative Principal	Co-educational	DEIS	5-10 Years
Participant 9	Male	Administrative Principal	Co-educational	Non DEIS	5-10 Years
Participant 10	Male	Teaching Principal	Co-educational	Non DEIS	5-10 Years

Participant 11	Female	Teaching Principal	Co-educational	Non DEIS	5-10 Years
Participant 12	Female	Administrative Principal	Co-educational	Non DEIS	10-15 Years
Participant 13	Female	Administrative Principal	Co-educational	DEIS	10-15 Years
Participant 14	Female	Administrative Principal	Co-educational	Non DEIS	10-15 Years
Participant 15	Female	Administrative Principal	All Boys	DEIS	15-20 Years
Participant 16	Female	Administrative Principal	All Boys	DEIS	20 + Years

2.6 Qualitative Approaches

Several qualitative approaches were considered for this study, including grounded theory, ethnography, and phenomenological methods and IPA was accepted as the most appropriate approach for this investigation. In the phenomenological tradition there are two schools of thought: descriptive and interpretative (Cohen, 1987). Firstly, descriptive phenomenology seeks to provide a full description of the experience, and although more idiosyncratic in its approach, it is argued that describing experience is insufficient as it does not account for the meaning attached to the experience and it is also argued that the ability of researchers to bracket beliefs about the phenomenon under investigation is questionable

(Parse, 1996). Therefore, in considering these issues and considering the aim of the research was to understand experience as opposed to describe experience, an IPA approach was adopted.

2.7 Interpretative Phenomenological Analysis

Specifically, IPA is a qualitative approach developed in particular within the field of psychology (Smith, 2004) and it contends that 'human beings are not passive perceivers of an objective reality, but rather that they come to interpret and understand the world by formulating their own biographical stories into a form that makes sense to them (Brocki & Wearden, 2006, p88)'. Participants are experts on their own experience and can offer researchers an understanding of their thoughts, commitments, and feelings through telling their own stories, in their own words, and with as much detail as possible. IPA also acknowledges a debt to Symbolic Interactionism (Denzin, 1995), with its concern for how meanings are constructed by individuals within both a social and personal world. The participant's 'lived experience' is coupled with a subjective and reflective process of interpretation, in which the analyst explicitly enters the research process (Reid et al, 2005).

As with grounded theory the work is largely inductive and 'bottom up', and is not theory driven. IPA encourages an open-ended dialogue between the researcher and participants and may therefore lead to unforeseen answers, including a new perspective on the research question (www.wikipedia.org). Sometimes IPA involves a close examination of the experience and meaning making activities of only one participant. Sometimes they may draw on the accounts of a small number of people; however it does retain an idiographic focus. Across the IPA literature base collectively, the mean number of participants involved in IPA research collectively is fifteen (Reid et al, 2005). More advanced IPA study designs

may draw together samples which offer multiple perspectives on a shared experience. Considering that this research was drawing together both the perspective of DLP's from DEIS Band One and non DEIS schools, and within these perspectives a variety of size and category of school were included, the views of sixteen DLP's seemed to be a suitable number for the investigation. In comparison studies, the exploration of one phenomenon from multiple perspectives can help the researcher develop a more detailed and multifaceted account of that phenomenon. This is one kind of 'triangulation' (Elliott et al, 1999).

In IPA, researchers gather qualitative data from research participants using one of a number of techniques such as interview, diaries or focus groups. The chosen method is more often a semi-structured interview and this was the method the researcher chose to use. An open-ended and semi-structured interview was undertaken with each of the sixteen participants as Mischler (1986) denotes this method as a 'flexible strategy of discovery (p27)' as it enables the contents to be re-ordered, digressions and expansions made, new avenues to be included and allows further probing to be undertaken. IPA researchers are aware that interviews are not 'neutral' means of data collection (Rapley, 2001). The interviewer is understood to work with the respondent in flexible collaboration, to identify and interpret the relevant meanings that are used to make sense of the topic. One to one interviews aid this: they are easily managed, allow rapport to be developed, allow participants to think, speak and be heard, and are well suited to in-depth and personal discussions. Semi-structured interviews further allow the researcher and participant to engage in a dialogue whereby initial questions are modified in the light of the participants' responses and the investigator is able to probe interesting and important areas which arise. While the researcher did develop a set of questions as a guide to interviews (see Appendix D), the interviews were guided by the schedule rather than dictated by it. The research was guided by the advice of Bell (1993) that some sort of structure was required in order to focus the interviewer and to ensure the topics

relevant to the study were covered. The schedule was sufficiently open-ended to enable the contents to be re-ordered, digressions and expansions made, new avenues included and further probing to be undertaken.

The aim of the researcher was to try and enter, as far as possible, the psychological and social world of the respondent. In order to facilitate this, each respondent was given the opportunity to share more closely the direction of the interview which gave respondents the opportunity to introduce issues the investigator had not thought of. The advantages of the semi-structured interview in this process was that it facilitated rapport and empathy with each participant, it allowed a greater flexibility of coverage allowing the interview to go into novel ideas and thus produced richer data. On the debit side, this form of interviewing reduced the control of the researcher over each interview, they took quite a long time to carry out (each interview lasted approximately one hour) and many themes presented themselves for analysis. However, the researcher was aware that her role was to encourage the participant to speak as much as possible and she remained a guider and facilitator rather than determining exactly what happened during the encounter.

Anonymity was promised to each participant and a pseudonym guaranteed. In addition to the cover letter which had outlined the research context to the participants, prior to each interview a brief positioning of the research project and a succinct account of the research design was supplied to all participants. Interviews took place at various locations, mainly in the school that the DLP worked in, but also in three of the respondents own homes and on one occasion in the researcher's own home. Finally, each interview was concluded with the following questions; 'Is there anything you would like to ask me' and 'Is there anything else I should have asked you?' Morse & Field (1996) noted the researcher could access data with these questions that may otherwise have been lost. All interviews were

digitally recorded. Furthermore, at the end of the interview, participants were given the opportunity to air any personal concerns and they were once again reassured that confidentiality was the researcher's top priority. The interview schedule developed was piloted by the three people who had initially piloted the questionnaire and suggestions were taken on board and the schedule adapted prior to commencement of the interview process. The interviews took place over a ten week period during the second and third term of the particular school year the research was being completed.

2.8 Method of Analysis

The analysis involved a five stage process that was detailed by Smith & Osborn (2003). This involved 1) Looking for themes in the first place, 2) Looking for connections 3) Developing a table of themes, 4) Continuing the analysis with other cases and 5) Developing a master list of themes for the group.

2.8.1 Looking for Themes in the First Place

The researcher read each transcript numerous times in an attempt to become intimate with the narrative. The researcher recorded anything which was of interest in the left hand margin and on the right hand margin the researcher documented emerging themes, reflecting on her interpretations of the participant's experience of the role of DLP.

2.8.2 Looking for Connections

A list of emerging themes were collated from the interview and connections between them were established and as clusters of themes developed the researcher remained in close contact with the original transcripts to ensure the accuracy of these themes. This involved much interpretative resources.

2.8.3 A Table of Themes

Having established connections in one transcript a table of themes was developed which captured the major themes which emerged from the narrative and again the original transcript was referred to, to ensure the theme was represented in the verbatim script.

2.8.4 Continue the Analysis of Other Cases

The themes which emerged from the first interview then guided the analysis of further transcripts and the researcher also remained open to the emergence of new ones. All new themes were checked against prior transcripts and the process involved continual checking and rechecking against previous research.

2.8.5 Develop a Master List of Themes for the Group

Finally, in this comparing process, a master list of themes was produced and a list of superordinate and subordinate themes emerged, referring to major and minor themes. The

analysis process was cyclical (Smith, 1996) and the stages were worked through several times.

The inductive and iterative procedures of IPA are intended to help the researcher to develop an initial 'insider's perspective' on the topic. Taking the insiders perspective is only part of the analysis process, because the analyst also offers an interpretative account of what it means for these participants to have these concerns in this particular context. This means there is a balance of 'emic' and 'etic' positions in IPA. In the former position, the researcher begins by hearing people's stories, and in the latter the researcher attempts to make sense of the participants' experiences and concerns, and to illuminate them in a way that answers the particular research questions. This is underpinned by a process of coding, organising, integrating, and interpreting of data.

The interviews were transcribed by the researcher herself. Cohen et al (2000, p281) see transcribing as a 'crucial step for there is potential for massive data loss, distortion and the reduction of complexity'. The interview is a 'social encounter' not merely a data collection exercise and the difficulty with transcription is that it becomes solely a record data. This demonstrates the correctness of the advice issued by Maykut & Morehouse's (1994) that the process should begin as soon as possible after the interview, with the piece still fresh in the mind, so that practical issues like intonation are more accessible and the penning of initial reactions, even informally, provide useful signposts for more thorough examination later. Indeed, frequently, the non-verbal communication gives as much, if not more information than the verbal communication. Although hesitations or other speech delays were not noted verbatim, non-verbal indicators were noted on all occasions where the researcher believed them to be significant, such as an occasion in one of the interviews where the participant

became upset recalling an incident about a child under her care in the school. All participants were offered a transcript and this was e mailed to the participants.

2.9 Sampling Technique

Purposive sampling was chosen as the most appropriate sampling strategy in order to seek richness of data of the phenomenon under investigation (Ezzy, 2002). Specifically, purposeful sampling refers to the process of selecting participants who have the most insight into a phenomenon and it involved the selection of participants based on specific inclusion and exclusion criteria required, with selection being focused on those individuals who are living the experience, in this case, undertaking the role of DLP (Polit & Hungler, 1995). In this research the stipulated inclusion criteria was DLP's working in both DEIS Band One and Two and non DEIS primary schools and who had a variety of years of experience of the role and the exclusion criteria included DLP's in second level schools.

2.10 Ethical Considerations

This research followed the ethical guidelines laid down by the governing body of Dublin City University. O' Leary (2004) defined ethical behaviour as conforming to standards of conducts of a given professional or group. Ethical concerns were foremost in the researcher's mind when distributing the questionnaire and during the 'enrolment' of volunteers to participate in the research, during the interviews and in the transcribing and analysis of the data. The sensitivity of publicly sharing DLP's perceptions through systematic enquiry though may 'have far reaching implications for teachers, school and providing institutions and for relationships between them (Nias & Groundwater Smith, 1998, p10)'.

Anonymity was promised and maintained following the admonition of Cohen et al (2000); 'the obligation to protect the anonymity of research participants and to keep research data confidential is all inclusive. It should be fulfilled at all costs unless arrangements to the contrary are made with the participants in advance (p61)'. As outlined, pseudonyms were agreed upon and were used throughout the data analysis stage.

The principle of informed consent was adhered to in line with Denier & Crandall's (1978) definition as 'the procedure in which individuals choose whether to participate in an investigation after being informed of facts that would be likely to influence their decision (p51)'. Each DLP was informed by cover letter on receipt of the questionnaire about the nature and context of the study and were invited to participate but the choice ultimately remained with them. When the researcher made a telephone call to each DLP prior to sending out the questionnaire, she spoke only in relation to the survey-questionnaire and the cover letter and survey-questionnaire invited the DLP's to participate in an interview. Five people completed the questionnaire but did not consent to their agreement to partake in an interview. Once again, when the researcher met the sixteen participants that were chosen for interview anonymity was guaranteed and the participants were assured a pseudonym would be given and the data would not be traceable to any participant. All data relating to the study was safely stored and access to this material was restricted to the researcher's supervisor and herself. Conducting qualitative data in the interpretative tradition means that significant amounts of narrative data are in turn rigorously used. In presenting the analysis and conclusion in the final written report the use of specific quotes from the participants provided support for the validity of the findings. In addressing issues of confidentiality the researcher was aware that including actual quotes from the interview transcripts could legitimately be constructed as breaking confidentiality, even when anonymity was assured. As a means of addressing this, all interview participants were informed at the outset that actual quotes would

be used in the final report but anonymity was guaranteed. The short debriefing session at the end of each interview confirmed that none of the research participants were concerned about any negative consequences as a result of their involvement in this research. Undoubtedly, the researcher was challenged at times during the research in relation to ethical considerations, particularly when on occasions participants were not fully knowledgeable in relation to the national and departmental child protection guidelines, but remained her position as a researcher in contrast to her professional role which involves delivery of seminars and workshops in the area.

2.11 Rigour

Verifying the methodological soundness of a qualitative inquiry is essential to credible analytic research and this study was guided by the trustworthiness criteria of the widely endorsed guide of Guba & Lincoln (1985) which claimed rigour is achieved when the following trustworthiness criteria are met; credibility, transferability, dependability and conformability. These are discussed individually in relation to this research below. Credibility is obtained when the findings represent an accurate description of the participants' experiences (Guba & Lincoln, 1985). Methods of establishing credibility in this study included (1) member checking with consenting participants, which involved clarifying and validating the emergent categories for accuracy and completeness (2) discussing the analysed data with a professional colleague who works with the Professional Development Service for Teachers (PDST) and has delivered child protection seminars to DLP's, confirming the themes which emerged and (3) self awareness.

A copy of the interview transcript was returned to all participants. Comments were invited from all participants so that meanings could be 'jointly constructed by interviewer and

respondent (Mischler, 1986, p34)'. Specifically two participants in the study consented to member check the findings of the study. Based on the recommendations of Hollaway & Wheeler (2002) these two participants were posted a summary of the interview interpretations which were developed at stage two of the IPA analysis and in a follow up telephone call the participants were asked if the interpretations made sense and it reflected their experience. Following on from this, minor changes were made to the interpretations.

In this research it was acknowledged that IPA involves a two stage interpretative process however involving 'participants trying to make sense of their world' and the researcher 'trying to make sense of the participants trying to make sense of their world (Smith & Osborn, 2003, p104)'. This indicated the researcher's experiences and theoretical pre-conceptions inevitably were brought to bear on the research. In consideration of this, the researchers personal background and personal perspectives related to this phenomenon were made explicit as a process of self reflection and were clearly outlined in the summary of the thesis to help elucidate any contribution as a researcher as recommended by Quinn Patton (1990).

Dependability pertains to the audibility of the qualitative findings (Guba & Lincoln, 1989) and in this study the researcher attempted to make every aspect of the process explicit (Smith, 2004). The process of data collection and analysis are outlined in this chapter and notes were taken at interviews and a research diary was kept throughout the analysis process. Finally, to ensure transferability, that is whether the study could be applied to a situation beyond the specific context described, the contextual features were described in detail including the school types, the participants, and procedures and to ensure conformability, that is the degree to which the findings were shaped by the accounts of the participants, the researcher made attempts to provide text sources for the interpretations.

2.12 Conclusion

The meaning that DLP's assign to their lived experiences is the central component of this research. Investigation of this role with a view to ensuring that vulnerable children will be protected more adequately is the principle purpose for undertaking this piece of work. This chapter has outlined the rationale for the study. The survey-questionnaire which was used to guide and focus the qualitative interpretative semi-structured interviews served to provide personalised and rich stories of the experiences of DLP's. Consequently it was the job of the researcher, using IPA to describe and then interpret understanding so that a shared perspective may advance the knowledge of this particular area.

3.1 Findings overview

The findings, based on the researcher's interpretation of the DLPs' accounts of what their role involves, are presented by the following five super ordinate themes:

- (1) The DLP Role
- (2) Experience of dealing with outside agencies in relation to child protection issues
- (3) The school story
- (4) Children telling and
- (5) Guidelines and training.

The themes were chosen to reflect shared aspects of the experience of all participants and these themes and their associated subordinate themes are illustrated below and the quotations chosen are used to exemplify the theme. All quotations are presented in speech commas and in the extracts dots such as ... indicate omitted text. Words in brackets such as this () shows explanatory text that was added by the researcher to help clarify quotations.

3.2 Results from the Survey-Questionnaire

The findings from the survey-questionnaire guided the researcher in preparing an interview schedule and in identifying the most salient issues for further exploration. Results highlighted that the participants had many experiences in their role and reached the point of referring cases to the HSE in different ways, and this was an area the researcher wanted to explore in depth. Supports and challenges in the role were varied as were experiences of dealing with outside agencies in relation to child protection and the researcher wanted to probe these areas for further discussion. For example, Question 5 asked the DLP's to rate how supportive the role of the Deputy DLP was and the results portrayed there were varied responses from 'very supportive' to 'unsupportive', highlighting the need for further

exploration during the interview stage. The responses to Question 13 and Question 14, which identified participant's feelings about sending a report to the HSE, indicated that the personal implications of the role required consideration in the referral process. Further results from the survey questionnaire indicated DLP's had varied experiences of dealing with school staff and children telling and the researcher wanted to provide participants with an opportunity to share their stories and further indicate training needs. The results from the survey questionnaire also highlighted in some instances, the similarities and differences in responses by DLPs working in DEIS and Non DEIS school and this was something the researcher wanted to explore further during the interview process. The findings from the survey questionnaire are outlined in Appendix E.

3.3 Findings of IPA Analysis

3.3.1 Superordinate Theme One: The DLP Role

The first superordinate theme describes how the participants undertook the position in their respective schools and what the duties of the position entail as they perceive them to be. As is outlined in the DES Child Protection guidelines (2001), all Boards of Management must nominate a senior member of staff to have specific responsibility for child protection who becomes DLP for the school in relation to all child protection matters. This theme highlights the responsibilities of the role and the course of action undertaken in seeking advice or making a report about a child protection issue. This theme is discussed under the subordinate themes: (i) Becoming and being DLP (ii) Supports and challenges in the role (iii) Taking action.

3.3.1.1 Subordinate Theme: Becoming and Being DLP

Being appointed DLP and being informed about the role came about in different ways depending on the years of experience the participants had served in the position. The general consensus, as highlighted by the survey questionnaire responses was that it was expected that as principal of the school one would undertake the duties of the DLP:

'Nobody told us, just assumed it. It more or less came with the job. It was sort of looked on that the person who had the responsibility for the school would now have that as well (Participant 1)'.

'Well I suppose at the time when I became principal I took on everything you know. I even took on the bins so the DLP was just another thing (Participant 3)'.

For the participants who have served between five to ten years or more as DLP, awareness in relation to the role has increased significantly in recent years:

'From my memory in 1998, I wasn't aware that that was the job of the principal and the word DLP wouldn't have meant anything to me in 1998. I think in about 2001/2002 it became an issue, not really a big issue but I realised that child protection was part of my brief as Designated Liaison Person in the school (Participant 10)'.

For one participant who is not the principal, she undertook the role *'not knowing much about it'* but feels in her own particular school it is a good thing that the principal does not have this responsibility also:

'With the nature of it and how much I have to deal with it .. I think if the principal had to do that and was running every other aspect of the show, I think it would be a very heavy load, especially in today's world where child protection issues are so much in our face (Participant 4)'.

There were mixed opinions as to whether or not the principal teacher should assume the position of DLP:

'I thought about this and I said, it should be someone other than the principal. But why? Why would that be and could you possibly envisage a situation where the DLP would be reporting something to the HSE and the principal not knowing about it (Participant 16)''?

'I don't think that the DLP should be principal because I think the principal in the school, particularly the teaching principal has a huge degree of responsibility in the day to day running of the school... and I think within the umbrella of the principal's role it can get lost (Participant 5)'.

One principal had allocated the role of DLP to a post holder after initially undertaking the position but has resumed the role again:

'I felt at the end of it, it is such an important role, it is something the principal should do themselves (Participant 12)'.

Two of the sixteen participants felt that the DLP should be more of a joint role involving a team approach:

'Just in case a person ran off and a case got wings. Just in case the parents would think it's a personality thing or she just picked on my family or whatever (Participant 11)'.

One DLP concluded that while the principal is the person who is best positioned to be in the role:

'I must say it is one of the few things that no one was willing to take on in our school, it was one of the few roles, because again people are afraid of the role, because they are aware of where it leaves them and how it judges them and all that (Participant 14)'.

Being DLP is described by the participants in terms of being very responsible, isolating and soul searching and a very big learning curve and the value of experience in the role is articulated by those DLP's with more years of service:

'I would realise that there is definitely a need for it, and even in our school, we don't know anything about, we don't know half enough about what's happening in the school (Participant 1)'.

'Is is a huge, you know it's a massive responsibility. I feel it's massive for the children in the school, and I didn't feel I was fully equipped until I had the proper training (Participant 2)'.

'I found it's been very thought provoking. A lot of the times you really have to search your own conscience about what you feel about a thing... you feel a heavy load of responsibility on your shoulders really, you know (Participant 6)'.

'It's a position that is all about responsibility but not a lot of empowerment to it (Participant 5)'.

'Ah it's not stressful; it does not bother me really doing it (Participant 7)'.

'I would say it's probably isolating in so far as it is your job and no one else really wants to know about it (Participant 14)'.

The value of experience in the role is articulated by DLP's who have a considerable length of time served in the role and furthermore have had many situations to deal with. Notably, the DLP's who spoke at length about this all served in DEIS schools:

'If you are doing something once it is hard. If you are doing it the tenth time, it is not as hard, you get used to it. It might not get any more pleasurable but it gets easier to do and experience is what it is about, you know (Participant 7)'.

In responding to the question which asked participants about their duties in relation to the role, answers varied from not having to report a child protection incident to date to applying

the Child Protection guidelines stringently, to dealing with incidents in a sympathetic and empathetic manner. Other responsibilities included being the person for staff to talk to and express concerns and also being the person to keep staff up to date and informed of their responsibilities. Further duties entailed recording everything that was reported and liaising with the HSE where necessary and also drawing up the child protection policy and circulating this within the school. A composite summary of the duties involved was articulated most clearly by participant 8:

'I would see my role as applying the Children First Guidelines and applying the Child Protection Policy in the school and ensuring the welfare and safety of the children is paramount at all times, that is what I would see as our role'.

Undoubtedly the DLP's working in DEIS schools expressed having a greater range of issues relating to child protection to deal with. Concerns raised included issues relating to children's health, hygiene and sometimes absences of lunches or adequately nutritional lunches and absence from school. There were also emotional and behavioural issues relating to parents' own ability levels and parenting skills and the level of interest in their children's education which impacted on children's welfare. One DLP working in a DEIS band one school in an urban area described the range of issues that would be brought to her attention to include:

'Issues like neglect, you know head lice not been treated, lunches, children coming in without lunches, children not being picked up on time, children going home to empty houses. It can be children coming in and disclosing that they have been in quite traumatic situations and witnessing parents fighting... one of the parents being hospitalised as a result (Participant 4)'.

Another principal who is also principal of an urban DEIS band one school reported that amongst the various cases of abuse he has had to deal with; emotional abuse would be the

category of abuse he deals with most often from the perspective of children being left home alone and to care for younger siblings in:

'One parent families where the mother would try to balance a social life with a family life and put the social life before the family life (Participant 8)'.

However this DLP compared addressing emotional abuse to a psychological assessment where there are definite outcomes and concluded it was very difficult to assess a child at an emotional level. The DLP of a special school also described her feelings of being 'overwhelmed' by the number of people who came to her expressing concerns over different issues. A further DLP in a DEIS school who had previously worked in a non DEIS school would argue that while issues pertaining to neglect and physical abuse are very relevant to DEIS schools she concluded that sexual abuse:

'Is the secret one and that is the one that needs to be broken and I don't know how you break that (Participant 3)'.

Indeed these and other DLP's working in both DEIS and non DEIS schools described dealing with these issues often as a challenging aspect to the role. Supports and challenges within the role represented a salient feature of participants' accounts and are described below.

3.3.1.2 Subordinate Theme: Supports and Challenges in the Role

In describing their experience of being DLP, the participants were asked to elaborate on the main supports and challenges that they encountered in the role. Supports identified reflected those from the survey questionnaire and included the HSE and the Guards, the 'Children First' national guidelines and the DES Child Protection guidelines, the schools child protection policy, in service courses and training, support from staff and the Board of Management, to include the Chairperson of the board, the Deputy DLP and the HSCL teacher in DEIS schools. However while some participants felt that there were many supports

available, others felt it was a position where very little support was offered. What some participants identified as a support was not viewed in any way supportive by others. The common challenges faced by DLP's included; dealing with newcomer families, the responsibility of the judgement calls one is required to make as DLP, personal consequences of the role and dealing with parents.

Participants elaborated on supports in the role:

'I feel supported here in the school. Like, my staff, I would feel they are pretty much on the ball... I would feel supported by the board... Sometimes with the HSE, I have had quite good experiences with the HSE (Participant 9).'

'Am, to my experience the supports that are in place are the information that you get from the in service courses, right. Am, beyond that you are on your own (Participant 5).'

Internal structures within individual schools also offered a support to DLP's to include a monitoring system established within a school and a care team. While four DLP's spoke of the importance of the staff keeping records, one DLP identified her system of monitoring and recording as her biggest support:

'Just recently we had to report a suspected sexual abuse case... but it was very interesting, when we put all the documentation together it was very very clear that this was something to be concerned about (Participant 2).'

Two DLP's also spoke about the establishment of a care team within the school. While one DLP was at the point of getting the initiative underway he viewed it in some ways as 'selfish' and a 'support for himself (Participant 16)', the other DLP had considerable experience of working with a team and it was a very significant support to him. The personnel on the care team varied from case to case and met with the aim of establishing the cause for a child's referral to the team, the interventions that could be put in place for a child and then depending

on the outcomes, a decision could be made to refer the case further. The DLP clarified that confidential issues in relation to child protection would never be discussed at care team meetings. Its greatest support to him as DLP was in helping him to make informed judgement calls:

'The judgement call, if you have one person and it's left up to you to make the judgement call, it's difficult (Participant 8)'.

The role of the HSCL teacher was noted by all DLP's in DEIS schools as a '*fantastic support*'. Through visiting families and reporting back to the DLP on the home circumstances this helped DLPs to contextualise situations:

'You wouldn't really be judging neglect totally on what you see off the child here.

You're judging it on a broader picture really (Participant 3)'.

It also offered a supportive role to parents in a non offensive and unthreatening way and by visiting a family the HSCL teacher had the opportunity to ascertain was there perhaps an issue that had upset the general routine of the home or what the particular circumstances were:

'Anything that enhances our knowledge of families and their circumstances enhances my role... that little bit of knowledge helps you to come to an understanding of what is happening (Participant 16)'.

What some DLP's considered a support to them other DLP's did not, most particularly the role of the Board of Management and the Deputy DLP. A number of DLP's were grateful of the support of the BOM, in particular the Chairperson:

'I have a fantastic Chairperson and I would discuss things with him and he would be supportive and trust my judgment (Participant 2)'.

Other DLP's however, while feeling they had support from their Board would question the level of knowledge they had in relation to child protection issues:

'Their knowledge would be really sketchy, sort of on a universal level rather than what applies to a school (Participant 14)'.

One DLP had the experience of being the only member of her Board who attended training that was arranged for all Board members while another DLP felt that training for the Board was a matter that needed to be addressed.

The role of the Deputy DLP varied from school to school. For some DLP's their Deputy played a very significant supportive role and was a trusted someone to be able to speak to in relation to confidential matters:

'And if you were the DLP and not consult anybody or if you did not consult your Deputy and talk through a case... if you were to take the confidentiality clause to the point that you never spoke about it with anybody it would be very unhealthy for you professionally (Participant 6)'.

Other DLP's did not rely on the Deputy for support or felt due to confidentiality requirements in the guidelines that this was not appropriate:

'I am trying to think who the Deputy DLP in the school is. It is not a hugely significant role (Participant 7)'.

'It is a name because at the moment because of the confidentiality issues you take the burden yourself and it is only the Deputy DLP to fill in on the absence of the DLP (Participant 5)'.

One recently appointed principal and DLP expressed some confusion between the two roles and concluded that should the Deputy have carried out some duties in her absence:

'Whoever was best placed would continue with the work and we would liaise (Participant 1)'.

Many of the DLP's expressed the need for further supports for them in their role as the job was so isolating and the responsibility of making judgment calls was enormous. DLP's

expressed the need for further updated training and also someone that they could speak to in a supportive, confidential capacity:

'The lack of support for a principal that has to go down this line (submit a report to the HSE) is something that has to be addressed (Participant 10)'.

The challenges DLP's faced in their role were numerous. While the one participant who is not a principal commented on how time consuming the job was and how it involves her having to leave her classroom if the situation has to be dealt with immediately, the common challenges faced by DLP's included; dealing with newcomer families, the responsibility of the judgement calls one is required to make as DLP and dealing with parents:

'In recent years the biggest single issues for us would be international families whose culture is different, where their culture accepts one form of punishment which would be at odds with the Irish system (Participant 8)'.

The above quote represents the views of all the participants facing challenges with newcomer families in that practices that they engage in and view as normal would be a cause of concern to the DLP.

Making a judgement call and knowing when to refer and what to refer is a further challenge many DLP's face. Despite all the supports a DLP has when making a decision to report a situation to the HSE, participant 2 commented:

'But yeah at the end of the day I do feel the decision is mine'.

Reaching a decision as to whether signs and symptoms of abuse that are apparent at school level are worthy of reporting is the crux of what judgment calls entail for DLP's:

'Do you know, as they say, there are two categories, there is ones that you know you definitely have to report and there is no really problem with those but it is those kind of in between ones and you are wondering is there a problem and you are wondering if you should report or are you wasting time reporting it (Participant 13)'?

The level of personal worry that situations like this cause is further highlighted by participant 13:

'It's the fact that you would have doubts about what is going on that is the biggest worry. Should you be reporting that, or am I neglecting my role by not working on certain situations'.

For one principal who has no experience of sending reports to the HSE after a number of years in the role her challenge remains:

'I dread the day that I would ever have to move into action and make a report (Participant 11)'.

Participant 10 who acknowledged that you do have judgment calls to make, as that is the nature of child protection issues felt:

'Because you have had your training and you have the books and you have researched it and you have sought advice maybe from other people... they are informed judgement calls'.

The experience of informing families if concerns or referrals are being sent to the HSE is not a pleasant one for DLP's. Between the participants they had experienced various responses from parents when they had to meet them. Many of the DLP's in DEIS schools had similar experiences in that families may already have the HSE working with them or the Education Welfare board may have been in touch so they would not be alone in voicing their concerns. And while DLP's did have the experience of parents being aggressive, it was common to find that the gravity of the situation did not really register with parents:

'Most of the time they have already been informed by someone else. You know, sometimes families, they hold things against me because I have informed, others don't care. They don't care because their lives are so chaotic (Participant 7)'.

One DLP had two experiences of having to inform parents he had sent a report to the HSE, and had an unexpected visit from one parent:

'The Mum popped her head into the office one day, and just said you know, 'Thank you very much for doing it, it really helped our family'' (Participant 9)'.

In contrast to this for participant 14, she felt it was unhelpful to have informed the family. Amongst the biggest upset for the family at the time was:

'That the school had reported it in because they would have felt that the school shouldn't have reported it in'.

Participant 2 described the reaction of parents on being informed a report has been submitted as a process:

'It's first of all fear, then a little bit of anger, then it comes into acceptance when they realise you are not out to get them'.

The worry that a family member might seek revenge on a DLP, the responsibility of ensuring you do not put a family through such a nightmare by reporting a false claim and the personal consequences of living and working in a local community should you have to refer a family were some of the personal concerns DLP's share in articulating the challenges of the role. One DLP recalled an incident where a parent was getting irate with her and how she was:

'Glad there is this counter between us because I can jump out the other end of the counter in case he goes for me (Participant 4)'.

Participant 12 recalls taking it upon herself to speak to a parent about an adults influence in a child's life and thinking to herself afterwards:

'You know it is quite an open place here and if the person had difficulties, was I bringing a lot of danger onto others, as well as myself, if that person flipped or whatever'?

Two of the participants expressed concern over children who were being home schooled:

'There is no random or on the spot inspection and the parents are informed as to when the inspections will happen, so it is one of those situations where it is farce, right (Participant 5)'.

One DLP had the harrowing experience of receiving threatening letters and the particular man who sent the letters then proceeded to move into the house next door to her:

'I must say when he was there I was careful because he had told me in letters that he would kill me (Participant 15)'.

The incident was reported to the Guards and the threats were as a result of particular incidents that had happened at school.

Participants also expressed the concern of making a referral and that this would then turn out to be false:

'I had visions, of you know, that if we made the reports and that if it was untrue and that you know, that it had caused terrible suffering in the family (Participant 2)'.

'You would always be blamed by the family for taking that step. Even though we all probably know it's the law, I suppose human nature is human nature' (Participant 14)'.

This participant concluded that although as principal of a school you make many decisions:

'It is a different thing making a decision about a child's life or a child's protection. That would be much more serious'.

Living and working locally is a reality for two of the sixteen participants and while neither person has had to send in a report to the HSE the very thought of it is a nightmare one for them. One participant had just moved from being principal of her local school to become principal of a large school some miles away from home. Reflecting on her experience of being DLP locally she recalled:

'I had a major major problem with it in my old school being so local and I was petrified that it would ever ever arise because you are dealing with your own neighbours and it's people that you have grown up with and your own children have grown up with (Participant 13).'

The other DLP in this situation expressed similar concerns:

'It may have ramifications for you personally, it may have ramifications for the school, it may have ramifications for the whole community because literally the ball has started to roll and this has gone into to the public as a result of what has been reported by you (Participant 10).'

The consequences of decisions taken and human nature being what it is means that when the tough decisions of sending reports to the HSE is taken it impacts on a DLP's personal life:

'It is something that is always with me, and I pray for that family all the time and they are always on my mind at a very personal level (Participant 2).'

Participant 6 felt that you have to try to be unemotive in making decisions otherwise you are *'Not going to be very fair'* and how important it is to be *'Secure in your beliefs that you are doing the right thing'* in order to be able to deal with the consequences of reporting.

Despite fears and uncertainties and dread of reporting, participant 11 summed up the beliefs of all the participants when she concluded:

'No I would do it if I had to, I'd have reservations and I would have concerns because you know the bottom line is you couldn't live with yourself if you ignored something and something was happening a child'.

3.3.1.3 Subordinate Theme: Taking Action

As DLP, a significant part of the role involves liaising with the appropriate HSE for advice and acting on the advice given as is outlined in the DES Child Protection guidelines (2001).

Reaching the point of referral and coming to a decision to report a family is not an easy decision for a DLP and different considerations were part of the decision making process depending on the circumstances of the potential referral case in question. The opinion of one DLP was that:

'Apart from disclosures it is all judgement calls (Participant 9)'.

In these situations participants would perhaps question a child, talk to family members, or deal with the situation as best they could themselves at local level. The course of action taken by participant 7 is reflective of the experience of many participants:

'I go down various avenues, I would start off by looking at the child myself, talk to the teacher about it... then we have a home school liaison teacher here... he would go out to the family... and then if we were still worried about any aspect of the child we would contact the HSE... we do as much as we can within the resources we have and then we pass it on after that'.

The participant's justification for taking this course of action:

'Is in fairness to the families and the children. Why put children through such a traumatic thing when really they don't need to and if we jump the gun and if we continually jump the gun, it is not good'.

Knowledge that participants have of the families involved is often an influencing factor in making decisions in relation to the circumstances they are living in and taking into consideration their parenting skills and ability levels.

The participants furthermore have found themselves in the dilemma of being unsure of what to do about particular situations. Participant 13 described dealing with a particular child who was showing no emotion and whose behaviour was very challenging and while feeling it was a matter that needed to be referred to the HSE; she felt she had no evidence to refer:

'Very, very, very, very, very, very, very, very difficult. And I can't prove it. It's only an observation. I can't make an assumption'.

Participant 3 felt equally as unsure what to do about the situation where children of the Travelling Community reported:

'My father will beat me' - and what do you do about that? I mean if I took that now I could have eighty phone calls here in the morning'.

Participant 11 spoke about a child whom the school was monitoring over a number of years as he would come to school with no lunch. The course of action taken was to:

'Contact the parent, and it was up to the parent to come and bring the child something'.

Participant 11 was not overly concerned about the situation:

'I think if it was something to do with sexual abuse or that I would be beside myself with worry. I would have classed it as minor enough'.

The participant expressed her fear that:

'Anything I put in writing, I would be terrified that it would come back to haunt me'.

And was also sure of the fact that had she reported;

'that same parents would have spoken throughout the village and blackened my name that I was doing this cause the child had no lunch for one day'.

For participant 10 who lives and works locally he felt that:

'If it was a local thing and if I felt by making discrete enquiries or looking into it that I might help the situation I would, but I would also be very conscious of doing the correct and proper thing'.

Participant 9 taught in the United States at the beginning of his teaching career before returning to Ireland where he is now principal and DLP in his school. His experience abroad

early in his career where there was mandatory reporting is his biggest support when it comes to reaching a decision to refer a child to the HSE:

'As a young teacher my frame of mind was very much about the importance of child protection'.

In recalling a situation where he was reaching a decision as to whether a child was abused or not he concluded:

'That while I was there (in America) that question really was only secondary you know, if there was a possibility then I had to go and say it, then somebody else decided then'.

This has been his mindset since he undertook his role here and he does believe that was he in a position to do so he would introduce mandatory reporting in Ireland.

Five of the participants have had experience of dealing with direct disclosures of abuse and indeed other participants have had to report abuse while one DLP has had an incident of peer abuse to deal with. Participant 14 in reflection of her decision to contact the HSE following a disclosure of physical abuse to a special needs assistant in her school declared:

'I would definitely think twice before I would contact Social Services again, as a matter of fact I would have to be very sure'.

Her justification for this while believing she would always do right by a child is that it is going into territory that is unknown and the position the school is in was very unclear. In making the decision to refer a child to the HSE participant 5 concluded:

'Referring your child is like washing your hands of them. It becomes someone else's problem and because there is nothing coming back it is not your problem anymore'.

Following on from reaching the decision to refer, the participant's spoke of their experiences of dealing with outside agencies in relation to child protection issues.

3.3.2 Superordinate Theme Two: Experience of dealing with Outside Agencies in relation to Child Protection

The experience of many of the participants in their role as DLP has involved contact with outside agencies with statutory responsibility for child protection issues, namely the HSE and to a lesser extent the Guards. The 'Children First' national guidelines highlight the importance of effective communication and cooperation between all agencies to ensure paramount protection and safety for children and successful outcomes. The experiences described by the participants are multi faceted and are discussed under the subordinate themes (i) Experience of dealing with the HSE and the Guards (ii) Experience of attendance at a child protection conference and (iii) Interagency communication and cooperation.

3.3.2.1 Subordinate Theme: Experience of dealing with the HSE and the Guards

Initial findings from the survey questionnaire highlighted a level of unease on schools behalf regarding contact with the HSE. All but one of the sixteen participants has had some involvement with the HSE in their role as DLP. This contact has generally come about as a result of the DLP seeking advice from the HSE in relation to a child protection concern within the school, and to a lesser extent as a result of a direct disclosure of abuse reported within the school. On occasion also, the HSE have been in contact with the school in relation to ongoing cases they are dealing with. Most especially for those DLP's who work in DEIS schools the level of contact with the HSE has been frequent, while for other participants their experience has been in relation to one or a limited number of incidents over a long number of years. Only a small number of participants had direct contact with the Guards in relation to child protection incidents. The experience of the participant's in dealing with the HSE ranged from very positive to extremely negative:

'Ah, my second experience of the HSE... I found them excellent, and they called me back... I must say giving a name, saying when they were available, ah, coming back all the time, liaising with us very well. I did find them very good (Participant 1)'

'(in relation to the HSE) I found somebody at the other end of the phone very open and understanding in relation to the kinds of questions I was asking and very good advice was given. I didn't feel like I was being hung out to dry, that I was trying to take this on my own. Each time I had to contact them it was taken seriously and acted appropriately (Participant 9)'

In contrast to this, some participants were left feeling extremely frustrated and disillusioned as a result of their experiences with the HSE. One participant who had a very stressful experience of a child going missing following on from him reporting abuse to the HSE and since then the child has not been located exclaimed:

'My impression and it might be obviously semi coloured is that some of the people I dealt with in the HSE seem to real crusaders and reactionary. They react to a situation and then if their mode of reaction didn't work out then they are looking for heads to roll as to why it didn't (Participant 5)'

Another participant, in describing her experience of reporting a disclosure of abuse to the HSE found them:

'Unsupportive in so far as I felt they were questioning us in so far as why the school had made... the report into them (Participant 14)'

Many of the participants who described their experience with the HSE in an overall positive light expressed discontent at various issues within the HSE, including slow response rates to reports and the level of feedback offered to the school. This is illuminated in the following passage by participant 2 and is elaborated upon below by other participants:

'At the end of the day very slow to respond. Ok, I had to make quite a few phone calls before I got what I wanted... I felt, considering the nature of what I was asking they would be quicker to respond, and I felt even when I did send in the report it was slow to be dealt with'.

The non return of phone calls from the HSE to DLP's is something they commonly found exasperating:

'Now, I rang that number so many times and still haven't got that person. And that's six weeks ago. That isn't good enough (Participant 13)'.

Participant 7 was not alone in considering the level of pressure personnel in the HSE were under:

'They always seem to be under pressure. Obviously they are under pressure social workers. They are always under pressure'.

The pressure one participant felt to name a child when she was seeking advice was noted by her:

'They push you in that area. I would have found that (Participant 12)'.

Mindful of confidentiality in relation to situations and for the families involved, the DLPs were not entirely satisfied with the level of feedback they received from the HSE. They felt that feedback would reassure them that cases were being dealt with and furthermore would be good training for them in terms of whether they had acted appropriately or not:

'You are left wondering, you know was that a correct thing to do, or did that family get the support that they needed or is that child ok now? (Participant 9)'.

For those participants who had any involvement with the Guards in relation to child protection issues they all reported very positive interventions. Indeed one participant, who described her experiences with the HSE in a very negative manner in terms of them failing to

intervene adequately to support children would seek the support of the Guards any day over the HSE:

'Now that young Guard, those children were all taken into care. That young Guard did more in one day, on his own, than social services with ninety nine helpers and God knows how many managers were able to do in ten years it was going on (in relation to a family where the school had made numerous reports to HSE over the years and felt nothing was done) (Participant 15).'

The adequacy of supports put in place for children and the level of follow through by the HSE was a common concern raised by many DLP's. Although it was expressed by participants that the HSE deal with so many families who in many different ways pose challenges in their capacity to support their children, the level of follow through to ensure children's needs are met was questioned:

(in relation to supports) 'They are put in place and it's sort of hunky dory. We have thought her how to do this now and she is going to do it, but it's not followed up on an ongoing basis, so the problem repeats itself again (Participant 2).'

Participant 3 spoke about different HSE interventions for children in the school where each time there were consistency issues. In relation to one child who came to school not toilet trained, where the HSE had worked with the family to implement a toilet training programme, she noted:

'Once the HSE turned up and the reason for only once was: 'Well we knocked on the door and they were not there. I was away the next week' and for every week they were supposed to do, there was no consistency'.

Indeed, two participants expressed grave concerns about children whose lives have been destroyed as a result of non intervention by the HSE:

*'I mean the outcomes for that family are ****. The family is destroyed. (Participant 16)'.*

While it was acknowledged by many DLP's that the high turnover of staff within the HSE was not to the same extent as it was in previous years the number of personnel who may deal with a case contributes to consistency issues and follow through with support:

'I mean today it's 'I'm Vanessa, I'm ringing up about John Greene'. In a week's time, 'Hello my name is Paula, I just want to check on John Greene (Participant 15)'.

Despite the big step it is for DLP's to report suspicions or concerns to the HSE, participant 2 summed up the overall worry for DLP's in concluding:

'You go through all this process and at the end of the day does it really make a difference to the lives of the children'?

3.3.2.2. Subordinate Theme: Experience of attendance at a Case Conference

Many of the participants had experience of being invited to attend at a case conference by HSE personnel, to represent the school and provide a report on the child/children based on observations from their time spent at school. The Department of Health and Children 'Children First' national guidelines (2011) defines one of the main tasks of a child protection conference in facilitating the sharing and evaluation of information between professionals and carers. The second key task is to outline a child protection plan for completion. Common concerns raised by the DLP's in relation to case conferences included the outcomes of the process and the implementation and follow through of the decisions taken, the challenge of being completely honest in the case conference forum and the absent voice of the child in reaching decisions about what ultimately affected them most.

Participants expressed a level of frustration at the lack of monitoring and follow through on the decisions taken at a case conference. While these sentiments were echoed by the majority of the participants they were exemplified by participant 2:

'I feel that so many people's hands are tied, that you go round and round and round and you wonder really is anything concrete done for the child at the end of the day'.

According to participant 16 the number of people in attendance at a case conference severely impeded on the decision making process:

'The number of non contributing people at them which is farcical, almost incredible sometimes. I have sat in on case conferences with twenty people around the table and four of them have had anything to say'.

This approach he considers a 'tick box' approach to ensure particular things are done which immediately diminishes the effectiveness of an intervention. One participant who had experience of being in attendance at many case conferences concluded that teachers were 'idealists' expecting 'immediate responses' and it had taken him years to understand that:

'although the process at case conference level may be painstakingly slow, the actual reality and they are dealing with huge legal ramifications, they have got to be very very careful in the way they approach things (Participant 8)'.

Not alone considering the number of people in attendance at a case conference, but when the audience more often than not included the parents, participants found it a challenge to be completely honest in voicing their opinions, keeping in mind the importance of the home school relationship:

'It is very difficult for a school because the only hope we have of helping these kids is if we have a good relationship with the home. So it's very difficult to be in a situation at a conference and be completely honest and say this is what is happening without breaking communication down (Participant 2)'.

However the importance of being honest at case conference level was also argued:

'There needs to be a forthrightness at it, and an openness in people to speak their minds (Participant 16)'.

The importance of listening to and hearing the child's voice was considered by participants as essential throughout the process:

'I feel that the children themselves should be more involved in the case conference and the children themselves should be listened to (Participant 2)'.

In tandem with supporting children, support for parents was also considered vital throughout case conferences in trying to bring families on board and working with them rather than directing them to take action:

'The parent gets a chance to talk, the parent says this is what is happening, and people listen to the parent and that everything that is said around the children or the child that the parent is included in that so it's not someone just reading out a report and saying to her really difficult things... you can still look after the welfare of the child but include the parent (Participant 2)'.

DLP's differed in their opinions as to whether their attendance at a case conference was valued and the perspective they had to offer on a child impacted on decisions that were made. One participant did not feel it was necessary to attend case conferences, rather providing a report was sufficient:

'I don't go to case conferences... generally just send a report. Once we have made the report to the HSE and the HSE have taken over the case it is really outside of our remit. Our remit is to teach the children, we are educators (Participant 7)'.

Participant 14 felt from her experience of attendance at case conferences the opinions of the DLP were not respected:

'There are no allowances made for the fact that you have to travel there and ... no negotiations around times of meetings... it's almost like schools are on the periphery or on the edge... I feel we are not valued and sometimes I feel schools are judged maybe regarding what they have or haven't done for the child in the school as well at the case conference'.

In contrast to this participant 10 who had one experience of attendance at a case conference felt:

'Everybody is coming from a different perspective on it... but they do see the unique place that a teacher and a school and the schools therapeutic influence can have on a child... and the way I kind of measured that, they would have asked me on the day about particular things I would have written... and the information that I was giving there was very important to the overall child protection issue that was being discussed'.

3.3.2.3 Subordinate Theme: Interagency Communication and Cooperation

Effective interagency communication and cooperation between all professionals involved in child protection work is recognised as essential in the Department of Health Children First national guidelines (2011) in ensuring the requirements of each individual case are met. In general, the levels of interagency cooperation and communication between schools and the HSE are not as open or as effective as DLP's would desire. Levels of cooperation and communication were highest among participants who had the largest number of referrals to the HSE, and particularly in cases of ongoing neglect which necessitated more communication. The building of a relationship was cited as the key component of good two way communication and participants expressed a desire to be made aware of students who are on the HSE file and furthermore of the services they provide.

Participant 1, who reported having very positive experiences with the HSE reported in no uncertain terms that it was effective interagency communication and cooperation that had led to successful outcomes for a particular case the school referred on:

'Ourselves, HSE and the Gardai worked together, so that's what helped, that's what made it work in the end'.

However for the majority of participants, they expressed a desire for more information from the HSE in relation to children who may be on their caseload unknown to a school and also in relation to how their system operates. Participant 6 expressed the frustration experienced by many participants when she declared:

'I mean when I look up my phone book for a Social Worker I have about eight different Social Workers. One deals with a young fella in the special class who is in care, one deals with another fella in the special class who's in care in another situation'.

The experience for many of the participants furthermore, was that they initiated the majority of contact with the HSE:

'I am surprised actually how little contact I have with social workers. It's almost all our way and we would contact them rather than they contacting us (Participant 2)'.

Some participants in considering the limited amount of contact that had been initiated by the HSE also felt that information was withheld from them. Participant 15, who criticised the HSE for withholding information from her time and time again in her role as DLP, compared her experience to an occasion where she contacted the social work services in England in relation to a case after an unsuccessful attempt to receive any information from the local HSE:

'Totally different, absolutely and totally different. Am, they couldn't have been nicer and they gave me names of different people who had been dealing with him so I could

speak to them and what to look out for and the different sort of things that had happened'.

The consensus of participant 14 was that interagency communication and cooperation was hampered due to the lack of trust between schools and the HSE:

'There is an awful lot of distrust between teachers and social workers... I know there has been experiences in our school where a teacher may have told a Social Worker something about a child, maybe in confidence and then the Social Worker may have told it back to the parent'.

Interagency communication and cooperation was reported upon most successfully by DLP's in DEIS schools where they had been many occasions for contact between schools and the HSE. The building of a relationship with a level of trust and mutual respect was cited as critical in building and maintaining cooperation and communication:

'Well it is crucial you know in anything, you build a relationship with someone... you can't be forever introducing yourself and getting over that. There has to be a bit of trust. To me, that is crucial (Participant 7)'.

Participant 8 who elaborated on the positive relationship he had built with the HSE reflected on the factors that enabled its success:

'I think from attending case conferences, from attending case discussions, from linking with the social work department, we have a concept of how the system works... We know the personnel... I think we are consistent... I think that they got to see that we are just arguing the case for the children here... that we are professional about it... we do keep our records'.

However the DLP was aware of the length of time it took to build a relationship:

'Those barriers are broken down but again it's taken time, and this hasn't happened over night. You are talking like this is over a ten, twelve, fifteen year period. Consistent attendance, consistent, am, you know, following up, good communication'.

The participants were unanimous in declaring that a specific member of the HSE personnel should be allocated to deal with a school's child protection issues, and DLP's would have one person to liaise with and this would help in building a relationship based on trust:

'Now do you know the way we have this, the NEWB and somebody walking in and you have a face with the name, and that is serious enough, children losing days from school but it is not as serious as somebody being sexually abused... I think it would be no harm if there was somebody in that field that was connected with x amount of schools. It would be much easier to get advice as well. I think, some people I think by their nature are going to be hesitant about seeking advice... You would be building up a trusting relationship as well (Participant 12)'.

Even though it was the opinions of participants that schools and the HSE may have different perspectives in relation to children's needs, rather than giving information over a telephone and in an effort to liaise further with the HSE, a desire to see their personnel visit schools was advocated for strongly.

3.3.3 Superordinate Theme: The School Story

The role of a school and of school personnel in considering the whole area of child protection is examined under the subordinate themes (i) Care practices in place in schools (ii) Staff attitude to and awareness of child protection (iii) Personal Safety education for children.

3.3.3.1 Subordinate Theme: Care Practices in place in Schools

The various care practices provided by schools for children was outlined by participants, and regarded as significant in protecting and safeguarding children and meeting welfare needs. The consensus of the participants was that the ethos of a school by its very nature was caring and the children's needs were a top priority. Participant 9 considered it as a given that a school prioritised children's needs:

'Like, you know, you are looking to care for them all day every day, so you know, am I think that really goes without saying'.

That teaching by its very nature was a vocational role was the opinion of participant 5:

'Is very very caring towards them (in relation to a teacher in the school) and has a genuine vocation there. And I think anyone that comes into teaching... becomes caring towards the kids'.

It was the participants working in DEIS schools and a special school who elaborated on care practices to include feeding children, providing lunches where necessary and implementing programmes to support parents in helping to care for their children:

'We do everything for them (the children). I mean we start at quarter past eight, they get their breakfasts, they get their lunches, they get their dinners. They got football after school, guitar, homework club, everything. And the best thing, like, if you can keep them in school for as long as you can in an atmosphere that's calm and enjoyable (Participant 15)'.

This elaboration on care practices is reflective of what is happening in many DEIS schools the participants worked in. The care practices in a special school as outlined by participant 2 provided an insight into both how vulnerable children with special needs are and how the staff of the school were so dedicated to caring for the children:

'We have changing facilities, showering facilities, like emotional care and a big programme we are running at the moment is taking care of my body... having awards for children who are am, making big efforts but, am, even just down to sanitation, you know, looking after their nose, wiping their nose and things like that, they are still massive issues for a lot of our children. And it's on a daily basis working around those issues'.

Providing supports to parents in caring for their children was a further component of support offered by schools:

'We have PEEPS going on at the moment. It is for Junior Infants... Where Mammies or Daddies come in for an hour and play with their children... and it shows them that this is what your child should be like. So I think it does, it really helps (Participant 3)'.

The participants felt that the care practices in place from a school's perspective were both necessary and successful:

'It's a standard policy across the board that you are not expecting a child to sit there with no food you know... Am, I really believe in Maslow's pyramid of needs, and if you can't get the bottom one right, you are not going to get to the top (Participant 6)'.

This participant considered the success of the care practices provided to the children in terms of the educational perspective the school was coming from:

'Definitely when you put the aim of the welfare and the education of the child at the top of your list that is what's happening because she is coming to school and she is managing to stay in the system and she is not losing her temper as she might or whatever'.

While the participants were in general agreement that the HSE were not very aware of the care practices established at school level, more than one participant commented that many of

the children who benefitted from such care were already on the HSE files. Furthermore, the participants were of the belief that the interventions put in place by school were more successful and more sensitive to a child's needs. Participants recalled situations where programmes had been put in place by the HSE for families, an example being in supporting a family to toilet train a child. The intervention resulted in little success and it was the school who had to deal with the situation and persevered to bring about a successful outcome. Participant 16 recalled another situation involving toilet training a child where the HSE had intervened and concluded the school were far more sensitive to the needs of the child:

'Social workers but that tended to be am (small laugh) unsuccessful, because of insensitivity. But we progressed that ourselves then. And we proceeded with getting additional uniforms for the child... making arrangements for the family to call in if the child had soiled himself and things like that'.

The opinion on this particular DLP knowing the family was:

'The thing is, it is actually not neglect, because they are a very caring family who don't have a lot of the skills for living in a house'.

Participant 14 spoke in relation to care practices the school undertook as a result of non interventions or unsuccessful outcomes by the HSE:

'We brought the mother in a couple of times and talked to her along the lines of what sort of a breakfast to make for him, and the importance of him being on time, and I know this particular child had no glasses... so we encouraged her to bring him to the optician... and we arranged follow up meetings for the mother to support her'.

Ultimately as well as a school caring to enhance a child's educational outcomes and ensuring to strike a balance between care and education, care practices contributed to a child's protection:

'So like the care they're getting and the support they're getting... from the teacher and from the school are really huge you know (Participant 6)'.

3.3.3.2 Subordinate Theme: Staff attitude to and awareness of Child Protection Issues

The role of school staff in relation to child protection concerns was considered by the participants in terms of the levels of awareness of personnel in relation to child protection issues, the attitude of staff to dealing with concerns, the responsibilities of staff in relation to child protection and furthermore the DLP's responsibility to personnel within the school.

That there was varying levels of awareness among staff depending on their age and their experience was reflected both by the survey questionnaire responses and by all participants:

'I do feel there is a genuine openness to accept that it does exist right, but I do feel that there would be... varying levels of understanding there. I think some people if they haven't had a situation to deal with... well they're so busy in their lives and teaching is such a busy thing, that you just get on with it, day to day, and you don't really get concerned about it, until it comes to your doorstep so to speak (Participant 12)'.

Participants differed in their views in relation to the attitude of their staff to child protection issues:

'Oh God, they are very open to it, the fear is around the ambiguity of not reporting and everything (Participant 2)'.

Participant 3 felt it was difficult for school teachers to comprehend what children's lives were like:

'Because we come from such a middle class background, we come from a different strata of society really. Some people couldn't believe like, they think Oh the mother forgot to give them their lunch... and they have got themselves out, they have got a bit

of bread together, and they have got themselves down to school, which is a great achievement. We are coming from a whole different place'.

The reluctance of some teachers to get involved in child protection issues was noted by some participants:

'I think teachers are also reluctant... because also they see themselves as going down a road of trouble...and reflect on their judgments and their personalities (Participant 14)'.

Participant 5 in his experience also felt there was reluctance on teachers to make a referral to the DLP:

'Now that begs the question as to whether children are falling through the net as a result of the caution of the teachers'?

The participants had certain expectations of their staff in relation to addressing any child protection issues and in relation to ensuring children's safety:

'If you have any concern, keep on recording everything and please talk to me about it and we will have a chat and I will seek advice if I feel it is a serious situation (Participant 12)'.

It is significant to note that only one participant spoke about expectations of the staff in relation to monitoring and while a small number of participants spoke about staff keeping records, Participant 8 was the only one to acknowledge having a specific monitoring system set up in school in relation to child protection concerns. Participant 8 elaborated on the significance of the system:

'in child protection issues, our monitoring system is key... if your child is coming in constantly without lunches you have the date... so that if you are meeting a parent or if you are making the referral you can say, look we have noticed that this is ongoing, there is a pattern... the biggest number of referrals come from signs and symptoms'.

The participants furthermore commented on the importance of being proactive in reminding their staff of their duties in relation to child protection and keeping it a live issue on the staff room agenda:

'At the start of every single year you should draw attention to the, it should be the first item on the agenda at every staff meeting at the start of the school year, and maybe I'm not sure, maybe we need to come into that ourselves (Participant 8)'.

Specifically the participants were challenged by keeping child protection at the top of the agenda because schools are such busy places:

'Schools have been such busy places for the last few years and there has been so many new policies and so many new areas between the revised curriculum ok (Participant 5)'.

Participant 6 in thinking of new, young staff in her school reflected upon:

'How do you prioritise and I suppose child protection should be top priority but at the same time inspector wise and all the rest, you've got all the other curricular areas and the DEIS plan and all the rest coming at them as well, do you know'.

Given all that is going on in schools Participant 3 summed up the reminders given to staff as:

'fire brigade... you know I suppose I don't do it as often as I should, it is only when there is something going on. We are a fire brigade kind of. There is a lot going on and it is fire brigade as well, it is fire brigade'.

3.3.3.3. Subordinate Theme: Personal Safety Education for Children

In providing education to children on the stand unit of safety and protection within the SPHE curriculum, the Stay Safe programme is the primary resource used by schools in addressing the issue of personal safety. Participants evaluated the Stay Safe programme in terms of its effectiveness in enabling children to disclose if they were in a potentially threatening or

unsafe situation. It is significant to note that one participant differed from the others in that the decision was taken in her school not to implement the programme:

'The staff did a number of years ago, made a particular decision not to do the Stay Safe programme because that time people felt it wasn't the role of the teacher to be ah, what will I say, to be supplying that information to children (Participant 14).'

However all the other participants were teaching Stay Safe and gave mixed reactions regarding the effectiveness of the programme:

'I think its brilliant now; I think it's very good. Excellent, because it kind of puts it in their own little world of language (Participant 4).'

'The Stay Safe programme, it's very like some of the religion programmes and it's a little but implicit rather than being explicit (Participant 5).'

'The programme needs updating (Participant 10).'

A number of the participants spoke about the importance of constantly reinforcing the messages of the Stay Safe programme outside of the formal teaching time:

'If you teach the Stay Safe programme into the everyday living of the school, it will work, but if you teach the six, eight week pack and move on, it's no good. They have to live this and it has to be constant reliving of what we are doing (Participant 11).'

There was however, some confusion expressed by the participants in relation to Stay Safe and other SPHE programmes:

'Well we implement Stay Safe and we implement, ah, what do you call that? The letters SPHE, all those we implement here, and circle time (Participant 7).'

'It is within the RSE and within the SPHE programme, yes it is (Participant 5).'

Teaching the Stay Safe programme requires addressing sensitive material and this, in the view of the participants is not always easy or comfortable territory for teachers:

'But then somebody you know touches you in a private part, that was the difficult one. That is still difficult for teachers to go into that area I think. I mean, it raises a lot of questions and I mean, honestly I don't know how many teachers do it (Participant 1)'.

Participant 8 felt teachers level of comfortableness varied depending on the individual teacher:

'Some teachers are very comfortable teaching it, other people aren't so comfortable'.

Participant 10 concluded that:

'It's a challenging subject to teach, there is no doubt about it, but what underpins it is the importance of it in a child's life and the importance of those child protection issues and safety issues'.

3.3.4 Superordinate Theme: Children Telling

The primary aim of teaching Stay Safe or a personal safety skills education to children is that they will tell if they are in a dangerous, upsetting or potentially abusive situation. While five of the sixteen participants have had the experience of dealing with disclosures of abuse, most of these disclosures have been of physical abuse with no participant having the experience of a direct disclosure of sexual abuse. This theme of children telling is described under the subordinate themes of (i) Experience of disclosures at school level and (ii) Enabling children to tell in the school context.

3.3.4.1 Subordinate Theme: Experience of disclosures at School Level

Including the five participants who had experiences of dealing with disclosures of abuse, analysis indicated that children find it hard to tell in their world of school if they are living through the experience of abuse, particularly if a family member is involved. Participants cited reasons for this to include children's loyalty to their family, the fact that they may not

know any different and assume abuse as normal behaviour and not being explicit enough in the school situation in relation to the messages we give children about telling. Children's loyalty to their family and the responsibility they feel towards them represented a salient feature of the participant's accounts and was illustrated by participant 12:

'I think children are reluctant enough to tell, even though they are very open. But I think they are very protective of their parents'.

That children protect their families is further supported by participant 3 who compares children telling about incidents that happen at school to those that may happen in the home:

'To come out of the house, I don't know, I don't know. If it was in school, they would, absolutely, no problem. They have done it on several occasions'.

Participant 3 felt that no more than children being protective of their families, adults have a power over children:

'I'd say there are a lot of secrets out there and there are a lot of secrets in our school... I think people are holding children to keeping secrets... that is the power adults have over children... and I don't know how you do that, but definitely if there was some way of cracking that'.

It is worthwhile to note that some participants observed that although children may not tell you directly it may become apparent in other ways particularly through their behaviour:

'You know the child is in a lot of cases, you know the child is acting out but you know that there is a root cause behind it and it is trying to get to the root of it that is difficult (Participant 8)'.

The fact that children may accept abuse as normal behaviour and know no different is further considered by some participants. Participant 2, working in a special school felt that:

'A lot of them (the children) don't know that they are living in an unsafe or vulnerable situation because they don't know any different. And they are living in this

dysfunction and it is creating a massive amount of discomfort for them and you know hurt and pain and they don't know any other way to be'.

Participant 8 reflected that he himself as a child believed that everybody else lived in the same circumstances as himself:

'You don't sometimes see that your circumstances are different to anybody else's and that's true for every single one of us. Like, until I started in a disadvantaged school I presumed that every child had a Mammy and Daddy, you know I presumed that every child got Santa at Christmas up until they were twelve and I presumed every child got a good breakfast'.

Participants also considered that the teaching of personal safety education to children was not direct enough and was something that was perhaps referenced to rather than directly taught. One principal described her experience of talking to classes in general about safety and how she would do this in the context of safety issues in order to respect the children's privacy:

'That is the thing, You are actually afraid to go into the classrooms and say (pause)... Well for instance I wouldn't go into a classroom and say as a general talk if anybody is worried about anything come to me. I wouldn't do that (Participant One)'.

Participant 11 also described that while you aim to give children skills and information to deal with potentially unsafe situations:

'You have to be careful, you can't probe'.

For the participants who had received disclosures of abuse, the common disclosure was physical abuse where through being questioned, children disclosed. In one disclosure of physical abuse, Participant 12 observed that:

'That situation had gotten quite dire before she actually told'.

Participant 9 who had experience of a disclosure of physical abuse believes that for children, sexual abuse is the most challenging form of abuse to report:

'You never know with that. You never know with that'.

While participant 16 concluded:

'Disclosures... they are not direct disclosure, children hint at something and that's the nature of a disclosure'.

3.3.4.2 Subordinate Theme: Enabling Children to tell in the School Context

The factors which enable children to disclose abuse in the school context were considered by participants. Trust, whether within a caring school ethos or a trusting relationship with a staff member was identified by the participants as a key factor in providing a context that would support children to disclose abuse in the school environment. Trust and a caring school community were also key factors reported in the survey questionnaire responses. The implementation of SPHE and ensuring it is prioritised was also identified by participants as significant in supporting children in being able to tell. The ethos created in a school is described most powerfully by participant 2:

'It's also you know a whole ethos of communication, of care, of nurturing so the children are aware there is a correct way to be or you know a more nourishing way to explore his life. And we always see the school as like a mirror of the family, so you know a child's experience in school should mirror a nurturing environment that they probably should get in the home'.

Participant 16 considers that you create an ethos:

'Not through the document that's up on the wall about the catholic school, but the ethos of the attitude of the children, the attitude of care towards the children'.

The trusting relationship a child has with a teacher was described by all participants and exemplified by participant 7:

'The best support any child has in school is the teacher, if a child trusts the teacher that is the main thing... the best, you know you can have policies until they come out your ears, the teacher is the bottom line'.

Participant 1 outlined the importance of teachers providing children with an opening and:

'Giving them opportunities to confide in us if they need to'.

While participant 16 cautioned that:

'We can fool ourselves in relation to our approachability in a thing like that'.

The importance of teaching the SPHE curriculum including Relationships and Sexuality education was highlighted by participants. It is significant to note that two of the sixteen participants did not feel that a half an hour per week was an adequate amount of time for SPHE:

'Life has changed and I think as a result of that children need that support... equally as they need to learn the academics... I think there should be an equally weighted amount of time nearly given to SPHE... I think that the way society has evolved and I think our schools should evolve in the same way, a mirror image of society (Participant 14)'.

3.3.5 Superordinate Theme: Guidelines and Training

In supporting DLPs in their role the Department of Health and Children's 'Children First' national guidelines for the protection and welfare of children and the DES Child Protection Guidelines are the principal documents that guide participants in their role as does training that has been offered to DLP's. The guidelines and training are discussed under the subordinate themes (i) Guidelines in Child Protection and (ii) Training offered in Child Protection

3.3.5.1 Subordinate Theme: Guidelines in Child Protection

The participants in this research considered the effectiveness and level of support offered to them from the 'Children First', national guidelines for child protection and the DES Child Protection guidelines. The 1999 'Children First' guidelines were the documents discussed during the course of the interviews, as the 2011 were not published at the time when the interviews took place. In conversation relating to child protection guidelines for schools each set of guidelines were not discussed separately, rather the conversation focused on guidelines in relation to child protection. In general participants reported an overall level of satisfaction with the guidelines:

'I think they (the guidelines) are pretty straightforward. There is good detail in a lot of them, am, yeah, so the document itself is quite good (Participant 9)'.

Participant 9 who represented the views of many participants in finding the guidelines comprehensive and supportive noted a cautionary warning however:

'But I always think getting from a document to practice is where people can trip up or where things don't happen as well'.

A small number of participants expressed concern over the general nature of the guidelines:

'They are very general you know, there are some things you are left wondering about (Participant 11)'.

One recently appointed principal was unsure of the guidelines in relation to child protection:

'Mags, just talk me through the first one and then I will come on board (Participant 1)'.

There were however specific issues participants raised concerns over to include dealing with newcomer children, maintaining confidentiality, parental awareness in relation to the guidelines and categories of abuse.

A number of participants, specifically those who had newcomer children enrolled in their school, expressed the challenges of dealing with particular issues such as the composition of the family unit, practices displayed by newcomers in relation to disciplining of children and children being left unattended and expressed a desire that the guidelines would offer more support and advice in relation to how to deal with issues:

The child protection guidelines, they need to be more explicit... particularly for newcomer (Participant 5)'.

The issue of confidentiality which is outlined in the DES Child Protection Guidelines and Procedures is a challenge for DLP's. The general consensus was that absolute confidentiality was hard to maintain and there is a need for some information to be shared with staff in order to protect children. A small number of participants believed very strongly that protecting the child is the absolute priority and one participant regarded confidentiality as serving to protect the abuser:

'It's very difficult because confidentiality is something really that exists with one person... Who is to say that they (the staff) are not going to go and speak to somebody on the staff about that? Did you notice anything last year? So confidentiality is very difficult to maintain (Participant 5)'.

'I think helping the child should be first and foremost (Participant 14)'.

In maintaining confidentiality this leaves the DLP in a position of making isolated decisions and carrying the burden of responsibility for individual cases. While participant 12 spoke about *'having a very confidential relationship with my deputy'*, participant 2 outlined the need for support for DLP's:

'It would be good to have better supports... I don't know yet where I am going with it, do you know what I mean, I just want to throw it around a little'.

There was also general agreement amongst participants that it would be beneficial to have more information in the guidelines around the signs and symptoms of abuse and in particular in relation to subtle signs to be aware of pertaining to the different categories of abuse:

'You have to be very mindful for the subtle signs and the subtle signs, I think you know you can see the subtle signs but you know you can never get any kind of disclosure or anything (Participant 12)'.

Participant 2 echoed the sentiments of others in concluding that the category of emotional abuse needed further attention in the guidelines:

'I think that's a very big area and there is a tiny amount dedicated really in any of the guidelines to emotional and I think we need to expand on that an awful lot'.

The need for legislation in the guidelines to be updated was considered by participant 10:

'The nature of the whole legislation around them is probably changing and possibly they need to be updated in that'.

Also the rights of children as having priority over the family were considered as a component of legislation that needed to be addressed.

There was varying opinions amongst the participants in relation to the advice in the departmental guidelines that parents are informed if a report is sent to the HSE unless doing so would endanger the child. The greater majority of participants agreed with this and felt ultimately it led to a better relationship between school and home. While some schools informed parents of their responsibilities in relation to child protection by letter or on enrolment, other DLP's felt this was something they had not addressed and would welcome information from the HSE to inform parents either in the form of a meeting or a letter:

'If there was like a five point procedure for parents to read, that could be handed out to parents at the beginning of the year, that if a child makes a disclosure that this is what happens no strings attached (Participant 14)'.

The argument presented by those participants who were not in agreement with informing was that this could compromise a child's safety and also it had the potential to jeopardise the home school relationship:

'They see the school as interfering you know, and it's not your business, yet you are made aware of something you can't ignore (Participant 11).'

'I don't think you should tell the parent because in a lot of cases if a parent is responsible they are going to cover their tracks (Participant 5).'

3.3.5.2 Subordinate Theme: Training offered in Child Protection

Different training opportunities have been available to DLP's in recent years, through the support service for teachers, and the managerial bodies of primary schools and also through the staff training in child protection provided by CAPP. All but one DLP have had the opportunity to attend training courses since being appointed DLP. In reflecting on training received participants spoke of their experience of training, further training needs they would like to see addressed and the importance of child protection training for all staff members.

While the participants were in general satisfied with training received to date in terms of up skilling them on the guidelines and procedures there was a number of suggestions given as to what would improve training in child protection for DLP's. Training requirements requested included; an input from the different agencies involved in dealing with child protection, most particularly the HSE, legal training and training on filling forms and dealing with families where a report has been made. A summary of training requirements which reflected the requests of many DLP's is articulated in the following passage by participant 2:

'All the different agencies involved, it would be great to have an input in terms of their role and how, maybe you know what we could do if this happens and where is your best place to look. Am, if you have concerns about a child and there may be

different levels. You may not be at the point where you want to make a formal report. But there are other supports out there and it is about seeking them, so a bit more information about where to find help. And professionals, maybe a little bit more. I'd like to see more training about how to speak to people involved in a case, particularly families'.

Participant 6 who has had the experience of attending training spoke of the importance of what you as principal prioritise at school:

'You see I think an awful lot if it Mags is to do with the ethos of the school and how you prioritise things yourself even more than training, even going around in your ordinary casual conversations with people'.

A number of participants, both those new to the role and with years served in the role spoke of the value of experience in the job, of life experience and of different influences in their teaching career:

'I know a fair but from life experience and from teaching for a long time (Participant One)'.

Participant 9 who worked in the United States again reiterated the influence of mandatory reporting:

'It was a big wake up and it really did form my attitudes toward that this is a really important part of any school and it should be very much to the fore'.

All of the participants agreed that training should be provided regularly for DLP's, with some participants feeling it was so important it should be on a yearly basis and it should be mandatory to attend rather than by invite only. Two participants drew an analysis between HSE training and First Aid training and agreed that you should have a certificate every other year in order to keep your training up to date.

What all participants were unanimous in agreeing was that staff training in the area of child protection was unsatisfactory and the importance of training for whole school staffs was outlined:

'The best way to do it in my opinion would be for a presenter or facilitator to come in, be it for a half day or a full day or whatever... and to present it to them (the staff), and to nail it down as in what to do in particular situations, that everybody is aware and everybody gets the training together at the same time (Participant 10)'.

Participants felt it was so important that staff members were aware of their duties as they are the people who are working with children every day:

'I think, everyone of the different types of abuse and all the different symptoms of it, everyone of those need to be taken individually and they need to be presented to the teachers by professionals who are dealing with it (Participant 13)'.

'More essential in many ways (that staff receive training) because you are dependant completely on your staff (Participant 2)'.

Participants also outlined the importance of training being available to the HSCL teachers and newly qualified members of staff and that most importantly training for both DLP's and staff should be ongoing and available to schools.

3.4 Conclusion

The five superordinate themes outlined above, together with their respective subordinate themes reflect the shared aspects of the participants experience of being the DLP in their schools. The findings from the survey questionnaires highlighted the issues arising from the questionnaire which warranted more focused and in depth discussion. The following chapter presents the analysis of this discussion supported by reference to the literature and based on the interpretations of the research.

4.1 Analysis Overview

This section provides an interpretation of the analysis which is discussed under the five superordinate themes outlined in the previous chapter.

4.1.1 Interpretation of Findings

The findings outline the experience of primary school principals and one primary school teacher who have assumed the role of DLP for child protection. Their perceptions of, and challenges in the role are discussed, and the analysis further focuses on children telling in the school context and the role of the school and school personnel in the area of child protection.

4.2 The DLP Role

4.2.1 Becoming and Being DLP

This research indicated that the role of the DLP is multifaceted and complex and also open to interpretation in relation to various circumstances. In this study, participants reported assuming the role of DLP on becoming principal of the school as a result of a personal awareness about the position, as opposed to being formally informed about and offered the role. Both the 'Children First' national guidelines and the DES guidelines highlight the responsibility of school management in this area. 'All Boards of Management must designate a senior member of staff to have specific responsibility for child protection (DES, 2001, p8)'. While a number of participants found the Board of Management, most notably the Chairperson, supported them in child protection decisions, participants' accounts indicated

that Boards of Management are in general unaware of the child protection procedures and practices, and of their responsibilities.

In comparing awareness of undertaking the DLP position within a school, those participants with five-ten years or more experience in the role would have hardly been aware of the name or purpose of the role on becoming principal, while those DLP's appointed in recent years would be much more enlightened about the role, and assume it is generally part of the principal's brief. Child abuse has risen dramatically in the public and professional consciousness in the past decade and most especially in the last 2-3 years in Ireland with investigations into and reports of clerical sex abuse. However, in beginning the role, DLP's of all levels of experience appear to be ill-informed in relation to what the role involves, which is captured most aptly by one participant who compares undertaking the role to taking 'on the bins', while outlining the numerous roles she took on, on being appointed principal. The review of the role of DLP carried out by the INTO (2008) recommended that a child protection component should be included in LDS Misneach training for newly appointed principals and the findings from this research would concur with this.

While the DES Child Protection Guidelines (2001) recommend that the principal of the school is appointed DLP, this research indicates mixed opinions from the participants in relation to such. Fifteen of the sixteen DLP's interviewed are principal teachers in their respective schools, but it is significant to note that the one DLP who is not the principal feels it could get lost in their multi faceted role. This is supported by another DLP, who especially empathises with the teaching principal, which is the situation for approximately two thirds of primary school principals in this country. Not alone are they DLP, but they have responsibility for teaching single or multiple classes, and as the school leader must organise and run the school. As is highlighted by one particular participant, it is understandable how it may not reach the top of the teaching principal's priority list. This research would further

indicate that in reality the DLP role is one that is not desired by anyone and is a role which is underpinned by fear and personal consequences of taking action. Walsh et al (2006) note that fear of legal consequences due to a false allegation, fear of reprisals against the child and parental disapproval and denial of reports are all factors which can inhibit reporting and also inhibit persons undertaking the DLP role.

The essence of 'being' DLP is described by the majority of participants in this research as a very responsible, though provoking and isolating role. This corresponds with the INTO review, where their members found their experience of carrying out the role to be 'time consuming and very isolating and solitary (INTO, 2008, P4)'. The isolation of the role is very apparent and is especially depicted by the theme 'supports and challenges in the role' where some of those participants interviewed felt the DLP had nobody to speak to in a confidential matter in the school, not even the Deputy DLP. In contrast however, for other participants, the Deputy DLP was somebody to talk through concerns with, and confide in and they regarded this as both necessary and healthy for a DLP. While the DES Child Protection Guidelines (2001) outline that each school should have a Deputy DLP, no guidance is offered in relation to information sharing with the Deputy, aside from the general guidance offered in relation to confidentiality. 'All information regarding concerns of possible child abuse should be shared on a need to know basis in the interests of the child. The test is whether or not the person has any legitimate involvement or role in dealing with the issue (DES, 2001, p5)'. This is really a judgement call and guidance which is open to interpretation by each DLP. Specific guidance on the role of the Deputy DLP and on the sharing of information between the DLP and Deputy DLP would seem appropriate and necessary given the various types of relationship described between DLP's and their Deputies in this research.

It is the view of the participants in this research that experience in the role makes the job easier over time. The value of experience was notably reported by DLP's who were all serving in schools designated as disadvantaged. The 'Children First' national guidelines outline that the neglect category of abuse 'is closely correlated with low socio-economic factors and corresponding physical deprivations (Department of Children and Youth Affairs, 2011, p70)'. DLP's in DEIS school spoke about having more incidents of abuse to deal with, and neglect and emotional abuse were the categories they dealt with most often. The findings from this research indicate that experience of reporting and dealing with different categories of abuse lessens the fear and enables one to have more confidence in the role. It was also these DLP's who acknowledged having built good relationships with personnel in the HSE which enabled seeking advice and reporting abuse to be a more trustworthy experience. Furthermore, DLP's in DEIS schools had more awareness of the guidelines, the categories of abuse, the reporting procedure and possible outcomes as a result of their experience. This begs the question as to whether greater knowledge and experience in the role enables these DLP's to be more alert to signs and symptoms of abuse at an earlier stage than those DLP's who have limited experience of dealing with the whole area? Gilligan (1995), in describing readiness to refer abuse on teachers' behalf, stresses the importance of all teachers being alert to signs of abuse.

4.2.2 Supports in the Role

Various supports were identified by the participants in helping them to carry out their duties and fulfil their role. The 'Children First' national guidelines outline the responsibilities of Boards of Management to include 'monitor(ing) the progress of children considered to be at risk' (Department of Children and Youth Affairs, 2011, p23)'. While references were made by participants about the importance of staff monitoring concerns, there was a notable lack of

information in relation to established monitoring systems across a school. For one participant who had such a system established, he found it his biggest support in making the judgement call as to whether or not a situation warranted referral. Gilligan (1995) also highlights the importance and the usefulness for teachers to make 'contemporaneous' notes about concerns they may have as this will enable patterns of events to become more obvious. The CAPP issued a booklet to all primary schools in 2008 offering a suggestion for monitoring and this information was also provided through the training for DLP's and Deputy DLP's. The findings from this research would indicate it is an area that warrants more time and attention and more specific advice and training needs to be offered. While Inspectors are now reporting on the adoption by schools of the 'Children First' guidelines and DES guidelines as is evident in the WSE reports published in the last twelve months, there is no appraisal of established monitoring systems in schools or indeed of the duties being carried out by the DLP.

The establishment of a care team was also noted as a support in the role by two DLP's. Considering the significance of this support as noted by one DLP, and the isolation and responsibility reported by participants in this research, having a care team within a school could help to alleviate some of the personal concerns of DLP's and help to sustain them in their role. However, no guidance is available to facilitate schools in establishing such a practice, particularly in relation to dealing with child protection concerns. Specific guidance from the DES would help to establish the protocols within which a care team would operate.

4.2.3 Challenges in the Role

A common challenge faced by those DLP's dealing with newcomer children was dealing with cultural practices at odds with the Irish system. Korbin, (1992, cited in Corby, 1993) notes that severe beatings, harsh initiation rules and deprivation of food and sleep are practices which are unacceptable in Ireland. The 'Children First' guidelines contain no

reference to newcomer children, and the revised 'Children First' currently does not address issues with newcomer children. Advice on dealing with newcomer children and different cultural practices would be very welcome in the guidelines to direct professionals in dealing with these challenging situations.

The greatest challenge faced by all DLP's participating in this research relates to knowing at what point one has enough evidence and information to report an incident to the HSE. The responsibility of making a decision as to whether or not certain situations and circumstances warrant further investigation is not an easy one for DLP's, particularly in situations where little evidence or factual information is available and more often it may be a hunch a teacher has on knowing a child so well and seeing changes in behaviour. Criticisms are evident in the literature relating to incidents of abuse going unreported by schools and teachers. Hawkins & McCallum (2001b, cited in Bunting et al, 2010) remind us of the mismatch between the level of evidence required to give teachers confidence to report and that required by law. Teachers must be willing to accept that changes in behaviour in a child or unusual or defiant behaviour can be evidence in itself that a child's safety is in jeopardy.

Given that solid and enduring home school relationships are central to school life, informing parents that a referral has been sent to the HSE is a requirement that is not welcomed by schools. The DES Child Protection guidelines (2001) advise that parents are informed if a report is submitted to the HSE unless doing so places a child at further risk. In this research it is claimed that experience of informing parents is indeed unpleasant and the reaction of the parents can be both unpredictable and unexpected. Participants described a variety of different responses from parents on hearing the news from aggression to anger to indifference and appreciation. It has been reported that school personnel are used to offering advice to parents on a range of issues concerning their children and parents trust that they can confide personal problems in order to receive help and understanding for their children at

stressful times in family life (Webb & Vulliamy, 2001). Schools in general support parents in whatever way they can and the tension exists between supporting parents and balancing this with reporting parents. Bearing in mind the systems approach to child protection outlined in the literature, families form a core part of communities and schools endeavour to provide a service to families and build relationships with them. This tension is indeed apparent in this research and highlights in particular how some parents found it very difficult to comprehend why the school took the step of reporting them to the HSE. That, as a result it takes time to rebuild a relationship with parents is evident also. This is consistent with the INTO (2008) research where DLP's highlighted that they felt there was no recognition of the fact that the potential for damage to the home/school relationship is great. Having guidance available in relation to informing families about schools' responsibilities in relation to the child protection guidelines, in the form of a leaflet or brochure was highlighted in this research as steps that would help DLP's address this topic with parents.

In recalling challenges faced in the role, it became very apparent in many of the participants' accounts that being DLP involves a level of personal fear and concern. Participants expressed personal concerns ranging from having to submit a report, to living and working locally and the personal ramifications of reporting for family and community life, to making a false report that would turn out to be unfounded. These concerns were reported by both participants who had sent reports to the HSE and those who have not had this experience in their role to date. None of those participants who live in the community in which they work have submitted a report to the HSE; that the thought of it was 'petrifying' displayed the level of personal anguish of being in this position. Some participants who expressed concern over reporting a claim which turned out to be false had experience of sending referrals to the HSE, however it was DLP's in non DEIS schools with less experience of referrals that reported higher levels of anxiety. The reality that there is a threat to a DLP's

personal safety was evidenced by one DLP working in a DEIS school who gave a harrowing account of threatening letters she received as a result of sending a report to the HSE. The participants' accounts would suggest that in relation to personal concerns and anxieties, it is difficult to offer a solution, however this research is in agreement with the INTO (2008) survey results which outlined that additional supports were required for DLP's, including DLP support groups.

4.2.4 Caring in School over Reporting

The legislative basis for dealing with children in need of care and protection provided by the Child Care Act of 1991 places a statutory duty on health boards to act on behalf of a child both in anticipation of and in response to adversity. As the DES Child Protection Guidelines (2001) outline, the role of DLP's is to 'report' abuse on behalf of the school. The tension that exists for DLP's and school personnel between providing school based supports versus the legalistic framework of reporting is evident in the theme 'taking action'. The evidence from this research suggests that DLP's want to be confident that there is a case that warrants reporting and that they have been right in their suspicions before taking the step of contacting the HSE, which is highlighted in the literature. The reports from the participant's suggest that they explore various different avenues within the resources available to them at school before reporting and knowledge of families is an influencing factor in certain cases. This was especially evident in an account by one participant who recalled children who are members of the Travelling community telling that they would be '*beaten*' by their father. This would suggest that different standards of action or inaction may be deemed appropriate depending on the particular family in question.

The theme of 'taking action' also drew attention to the fact that DLP's were making judgements as to whether signs and symptoms of abuse that they were observing in school

were 'major' or 'minor' and in order to consult the HSE, signs presenting to DLP's would need to be major. This is highlighted by one participant's account of a child she had concerns about over a number of years in relation to neglect issues, but classed these concerns as 'minor' as compared with sexual abuse, which she deemed to be far more serious. Walsh et al (2006) highlight that teachers are better at reporting certain types of abuse over others and the categories they are slowest to report are neglect and emotional abuse. This research highlights the importance of teachers being aware of the equally harmful consequences of all categories of abuse.

By comparison, one participant in this research began his teaching career in the United States of America, where mandatory reporting played a very influential part in forming his mindset in relation to child protection issues. He described how questions for him did not centre around whether a situation was 'major' or 'minor'; once there was a 'possibility' he knew he had to report. Although the literature has argued that there are positives and negatives associated with mandatory reporting, given the reluctance of teachers to report abuse, this research argues that the 'Children First' guidelines should be placed on a statutory footing.

4.3 Experience of Dealing with Outside Agencies in relation to Child Protection

4.3.1 Experience of Dealing with HSE Social Workers

In describing their experiences of dealing with outside agencies in relation to child protection, the focus of the discussion reflected on experience of dealing with members of HSE personnel. Experiences ranging from the most positive to very negative were highlighted by this research. Positive experiences related to good two way communication, feedback provided, and advice and support offered to the DLP indicating the situation was

taken seriously. Negative experiences on the other hand were described in terms of a reactionary response, personnel being unsupportive of the DLP reporting in particular concerns, slow response rates and lack of feedback. The literature argues that social work has become too defined by bureaucracy, which leaves social workers little time to engage in quality work with children and families (Ferguson, 2010). Furthermore, the Review of Adequacy of Services for Children and Families (2007, 2008) conducted and published by the HSE highlights that there are variations across the country in the correlation between the resources of social work departments and the needs of families and communities. Interestingly, for the participants who reported positive experiences of dealing with the HSE, they seemed almost surprised and emphasised points such as returned phone calls and good advice and feedback, and it was as if they were almost expecting the opposite. This would suggest that participants were prepared for a negative response and have pre conceived ideas of the HSE service to schools. It did emerge however throughout the course of the interviews that some DLP's who described their experiences with the HSE in a positive light were not content with the slow response rates and levels of feedback they received in relation to certain cases. This reflected the survey conducted by the INTO (2008) which highlighted unsatisfactory levels of feedback following referrals, in particular if a decision had been taken by the HSE not to pursue the matter. Other issues that emerged that were less than satisfactory for DLP's included; feeling under pressure from the HSE to name a child about whom they were seeking advice in relation to and it was also noted the level of pressure that social workers are under. The DES Child Protection Guidelines (2001) outline that a DLP may seek advice without naming a child but it would seem according to this research that personnel in the HSE may not be aware of this or willing to support it. Moreover, the participants in this study would appreciate a structured response system from the HSE incorporating feedback to guide them in their role as DLP and to support them in cases of

potential future referrals. Prioritising the position of school's within an overall child protection system in this country would also help to build relationships between schools and the HSE and ensure consistency of values across the system overall.

4.3.2 Experience of dealing with the Guards

In dealing with outside agencies in relation to child protection concerns, a limited number of participants had the experience of having to liaise with the Guards. For one participant it has been her referral route as a result of her experiences of repeated non intervention by the HSE. All participants reported very positive and timely responses by the Guards and the findings from this research would indicate that interagency communication between schools and the Guards in the area of child protection work is effective.

4.3.3. Interventions in Place for Families

Two of the biggest concerns voiced by the participants in relation to supporting children and families were (i) the adequacy of supports in place and (ii) the consistency in follow through with the supports. In this research a significant number of participants highlighted families in their school who are under stress and children who are suffering as a result. Overall, the participants were unaware of family support services in existence in their communities, either those provided by, or funded through the HSE and felt there was a dearth of supports available. This concurs with literature which highlights how family support is under resourced, receives less priority than direct child protection work, varies across the country and services need to be strengthened in order to address child welfare issues (Ferguson & Kenny, 1995, Buckley, 2002, Health Service Executive, 2007, Department of Health and Children, 2008c).

The second issues related to consistency issues, or lack of consistency and follow through with support by HSE personnel, as perceived by DLP's. Participants cited several examples where support services were put in place for a particular child or family and were critical of the staff within the HSE failing to show up, or not pursuing matters, or not being available to commit to the arrangements made. Criticisms were exacerbated by the fact that DLP's felt school staff were left with issues to deal with such as toilet training and caring for certain aspects of children's welfare. A further contributory factor in consistency issues overall in the HSE was the high turnover of staff, which is evidenced in the literature on the effectiveness of child protection work (Maher, 1987). The whole process when viewed in terms of outcomes for children is a matter of concern, as this research highlighted a sense of disillusionment that there is such a long process to go through with little success for children and their families, simply stated by one DLP; *'the family is destroyed'*.

4.3.4 Experience of Attendance at a Case Conference

The theme 'experience of attendance at a case conference' evoked the strongest level of disillusionment and lack of confidence in the HSE child protection structure. Particular criticisms of the case conference included the lack of concrete decisions made and the number of non contributing people in attendance, which concurs with literature on child protection conferences citing the number and diversity of agencies and professions involved to be a source of complication (Maher, 1987). DLP's also felt their opinions differed from those of social workers in relation to certain interventions for children which they deemed successful and by contrast DLP's felt children remained very vulnerable and at risk.

The perspective of one DLP, working in a DEIS school, with a number of years experience in the role provides an alternative viewpoint on the realities of case conferences which is worthy of note. It is his involvement over a number of years that has helped him to

appreciate how slow the process is, how it must be approached very carefully from the HSE perspective and the huge legal ramifications involved. This is evidenced in literature where Reder et al (1993) suggest there are mistaken assumptions about the worth of case conferences and while they are the objects of unrealistically high expectations, the process is by no means straightforward. This research served to illuminate the level of misunderstanding and lack of information that exists among the teaching profession in relation to case conferences. Even for DLP, very limited information is available to them apart from a brief outline in the national guidelines and departmental guidelines. The findings in this work suggest that additional information outlining the forum, structure and the prolonged time frames of case conferences would be beneficial in helping professions to understand the processes and time scales involved.

A further challenge for participants in this research relating to the child protection conference centred once more around the issue of dealing with families. Participants highlighted how difficult it was to meet parents in the child protection forum and be completely honest, while all the time considering the importance of the home school relationship. That said, the need for honesty and a forthrightness in speaking the truth was called for by participants, suggesting that it is difficult to do in a conference situation, but absolutely necessary to highlight the circumstances of each situation and ensure that necessary support mechanisms are put in place for children. Indeed, this research highlighted that the voice of the child is an absent one in the child protection forum and a number of participants highlighted the importance of children being involved in the case conference and listened to, corresponding to both the 'Children First' national guidelines, Ireland's Ratification of the UNCRC and literature which states that children should be consulted and involved in all matters and decisions which may affect their lives (Department of Health, 1999, Burns & Lynch, 2008, Logan, 2010).

4.3.5 Interagency Communication and Collaboration

This subordinate theme demonstrated that the majority of participants felt that interagency communication and cooperation was not as successful as it should be corresponding to the majority of literature published in the area, various reports on child abuse cases and the National Review of compliance with Children First (Buckley et al, 1997, Buckley 2002, OMCYA, 2008a). One participant however, did highlight an example of successful interagency coordination between the school, the Guards and the HSE and was very sure that it was the cohesion of all the agencies working together that led to successful outcomes in the end. Common difficulties that were raised included both the number of different social workers in contact with a school and the lack of information and feedback from the HSE. Participants felt as a result of different social workers responding to different cases and dealing with different personnel continuously, it was difficult to even begin to establish a level of communication and collaboration. Many of the participants spoke of having limited understanding of the internal structural organisation within the HSE or system operations. The level of feedback and contact with schools was highlighted by participants in general as poor, with one participant exclaiming her '*surprise*' at what little contact existed between the two organisations. Participants found it hard to comprehend that there was no contact made with them in relation to children on the HSE books and were finding out accidentally that children and families had social workers allocated to them. They also felt that feedback was almost operating on a one way system of information sharing with DLP's communicating with the HSE but not vice versa. Literature suggests that lack of feedback from social workers to other disciplines, particularly teachers, is cited as a major impediment to interagency cooperation (McNamara, 1995, cited in Buckley, 2002). Suggestions of a historical relationship of distrust between social workers and teachers also emerged from the

research, particularly from the point of view where teachers may have told HSE personnel information in confidence and this was reported back to families.

Reports of good inter-professional communication and collaboration were from DLP's in DEIS schools as a result of regular contact with HSE personnel where both got to know each other and built a relationship of trust and mutual respect. While this was not the case for all DLP's in DEIS schools, it was in many incidents, but it was a relationship that had taken time to build. One DLP highlighted his responsibilities in the process of building interagency communication and collaboration which included consistency, being present at meetings and good record keeping. This research suggests that the process must be facilitated by a relationship built on communication and respect and acceptance of these responsibilities on both sides. Literature highlights that multiagency training should be a component of the training process in child protection work (McKee & Dillenberger, 2009). What emerged most strongly in this research was the desire for the HSE to allocate a particular social worker to a school and to liaise with DLP's, including face to face meetings and this research would recommend this as it would serve as a key feature in helping to build bridges of two way communication and cooperation.

4.4 The school story

4.4.1 Care Practices in Place in Schools

Care practices in place in schools were considered under the theme 'The school story'. Both the White paper on education and circular 0061/2006 outline the role of schools in promoting the welfare of students and in providing students 'with high standards of care in order to promote their well being and protect them from harm (DES, Circular 0061/2006)'. The findings of this study support this and confirm the high standards of care shown to

students on a daily basis, and the vocational nature of teaching which encompasses a caring attitude. The elaboration on care practices that was described by participants working in DEIS schools highlights how schools are addressing significant aspects of children's welfare needs through the provision of food, after schools clubs and homework support. In describing the care needs of children in a special school, one participant illustrated not only the sensitivity towards the children's needs but how especially vulnerable they are. Some participants also described, in the overall ethos of care, the support extended to parents through school programmes and through advice and guidance in helping them to care for their children and meet their needs.

While the White paper on Education outlines an expectation from school staffs in relation to children's welfare and well being, the reality, particularly in DEIS schools is that staff go beyond the call of duty in endeavouring to make a child's experience at school as comfortable and as positive an experience as possible. Hargreaves (1994, cited in O Connor, 2006) outlines that a teacher's role in caring for students forms an essential part of his/her identity. The general perception from the participants is that HSE personnel are not at all aware of the practices established at school in relation to supporting care and welfare needs. Bearing in mind the thrust of interagency communication and collaboration, this study highlights the need for greater dialogue between school staff and the HSE around the care needs provided by each side in relation to establishing a picture of the overall support a family is receiving.

It was the opinion of a number of participants in this study that the care practices provided by schools were more successful and were having a greater impact than those provided by the HSE, which participants were aware of. In relation to one situation described by a participant he believed that the school was more sensitive to the needs of the family as a result of knowing them. Furthermore, some of the participants felt that the school and school

personnel had supported families as a result of non intervention or lack of family support from the HSE. This opinion by school participants that they are '*stepping in*' as a result of non intervention by the HSE is certainly not helping them to have faith and trust in the organisation.

This research suggests that in the first instance, there needs to be adequate communication mechanisms between schools and the HSE to ensure that there is an overall picture of support children and families are receiving. The argument for extending the teacher's role in child protection has been considered in the literature and the area of care practices is an avenue that could be explored in a meaningful way if correct supports were provided to schools. The Scandinavian university community services model of caring for children's long term needs via the education system could be a model of support worthy of exploration for development in this country. Bearing in mind that the school's role in the community has huge potential in the area of child protection work, exploring the issue of care practices from all perspectives, including involving schools and supporting them in this work, and providing care supports via the education system could be a very meaningful way to engage in the process.

4.4.2 The role of School Staff in relation to Child Protection

DLP's in this research considered the role of their school staff in the whole area of child protection. The perception of the participants were varied- with some believing staff were very open to and aware of child protection issues and others considering there were varying levels of awareness depending on their age and experience. One participant, working in a DEIS school felt it was very hard for teachers to comprehend or believe some of the extreme circumstances children go through as it is so removed from their own childhood and upbringing. Concurring with literature, this research suggests the importance of continued

awareness on teacher's parts, of signs and symptoms of abuse, but also of normal childhood behaviour (Walsh et al, 2006).

The reluctance of teaching staff to become involved in issues relating to child abuse was once more highlighted when DLP's spoke about the attitudes of their teaching staff. DLP's felt that staff may be reluctant to relay concerns to them, for reasons of fear, of not wanting to be involved and of possible consequences. These issues are similar to those which were highlighted by DLP's themselves when it reached the point of 'taking action' and have been endorsed by the literature (Gilligan, 1995). As one participant noted, this research would also question as to whether or not children are continuing to suffer as a result of the caution of teachers and their perceived reluctance to highlight their concerns?

Participants also outlined the responsibilities of their staff in the area of child protection, which included prioritising children's safety at all times, recording information in the event of concerns and keeping the DLP informed in relation to all issues. Once more there was a marked absence of expectation from DLP's that there was an established system of monitoring concerns. The participants also reflected on their own role of keeping awareness of child protection a live issue in school. Challenges for DLP's included the reality that schools are hugely busy organisations with little time available for staff meetings. A further consideration for young, newly qualified teachers was all that they had to take on board, and given all the priorities, child protection was just one among many. A recent survey by Buckley & McGarry (2010) highlights that newly qualified teachers found their training in the area of child protection while in college insufficient. This survey also indicated very strongly an overall lack of commitment to the issue of child protection on the part of school managers and principals. This current study would indicate varying levels of commitment in relation to the area, from participants who prioritise the area, to those who admit to finding it difficult to find the time, to one participant who admits her response is '*fire brigade*'. The

findings from previous research and this study would indicate the need to clearly outline the responsibilities of a DLP in relation to providing staff information and training, establishing monitoring systems and keeping the issue live in schools. Furthermore, some system must be established to ensure compliance, whether through the whole school evaluation conducted by the DES or in conjunction with the HSE.

4.4.3 Personal safety education for children

Within this theme, the issue of personal safety education for children was explored. All but one school were using the Stay Safe programme as their primary resource for personal safety. Although there have been calls to make the programme mandatory, to date this has not happened. The requirement remains for schools to teach personal safety within SPHE. One participant highlighted that they were not using the programme as the decision was taken that it is not the role of the teacher to teach this sensitive material to children.

The participants offered mixed reactions regarding the effectiveness of the programme. While some participants felt the programme was very effective, other participants felt it was hard to evaluate its effectiveness and felt that there were still children, who after completing the programme would still not be able to tell. The NCCA Primary Curriculum Review (2009) noted that 89% of respondents found the programme either 'helpful' or 'very helpful'. Concerns raised in this research highlighted that the programme was not perhaps explicit enough and in addition, it was considered that the programme needed to be updated. CAPP is currently liaising with the NCTE in relation to developing the area of personal safety to incorporate internet safety.

The importance of continually reinforcing the Stay Safe messages was highlighted by a number of participants, which would again reiterate the need to keep awareness of child protection as a high priority on the school agenda at all times. It did appear, however that

there was a certain level of confusion among some participants in relation to the subject area of SPHE and the different programmes within this subject. In particular, there was confusion between Relationships and Sexuality Education and Stay Safe, which is a matter of concern given the crucial importance of both elements of the SPHE Curriculum and the fact that they both address different aspects of the subject. The issue of teachers comfort levels in teaching the sensitive areas of Stay Safe was also considered and while the participants agreed it depended on the individual teacher, it was argued it did involve teachers addressing material they might not be comfortable with. Participants felt it was hard to judge how well addressed these areas were in individual classes. In the evaluation of Stay Safe all but one teacher out of twenty eight were willing to teach the programme (MacIntyre & Carr, 1999). However, as one participant concludes, no matter how challenging a teacher may find it to address the material, this had to be evaluated in the overall importance of children receiving the messages and practicing the skills inherent in the programme.

4.5 Experiences of Disclosures at School Level

4.5.1 Children Disclosing Abuse at School

Even though five of the participants in this study had experiences of disclosures of abuse, either directly or indirectly, this research indicated that children find it hard to tell a member of school personnel if they are being abused, particularly if the abuser is a family member. Literature highlights how families exert a very powerful and long lasting influence over children (Buckley et al, 2006). The findings from this study support this and participants felt that children are very protective of their families. They believed that what prevented children from telling was the power that adults have over them, which results in children keeping 'secrets' due to fear or guilt or uncertainty of how circumstances would unfold. The

Report of the Dublin Archdiocese Commission of Investigation (2009) supports this, as the vast majority of those abused as children complained as adults for reasons including that they would not be believed and also because the abuser had instructed them not to tell. A further observation made by some participants highlighted that children have no understanding that what is happening to them is not normal behaviour and children have the impression that their circumstances are similar to every other child. Children with special needs were particularly considered within this observation as it is particularly challenging for them to differentiate between normal and not normal circumstances. These observations highlight the need for schools to prioritise an ethos of care and consistency and a secure environment for children so it serves as a model of what their childhood and their circumstances should encompass.

While participants in this research have not had huge experiences of disclosures, as has been highlighted, a number outlined that while children may not tell you about abuse directly, their behaviour is often a clue that all is not well in their childhood world. However, as the findings from this research have highlighted, teachers find it very difficult to go forward and report abuse based on behaviour alone. This would suggest that teachers need greater awareness of the fact that this may be the telling mechanism in the environment of the classroom and the school. Teachers also need guidance on how to progress concerns based on behavioural indicators. The opinion of one of the participants was that children will perhaps provide you with hints, rather than making a direct disclosure, once more highlighting the need for teachers to provide opportunities to children to confide in them if necessary. It is claimed in the literature that due to timetabling commitments and lack of privacy, schools do not provide the optimum environment for teachers to listen to children who want to talk about abusive experiences (Blyth & Milner, cited in Webb & Vulliamy, 2001). However, in this research the general view of participants was that you have to be very careful how far you

probe into a child's life or a family's circumstances. Teachers saw their role as giving children information and skills to deal with potentially dangerous situations rather than trying to uncover information in relation to children's personal lives. One participant, who is the school principal spoke of her experience of addressing safety with children in each classroom but admitted she would not say generally to a class that they could speak to her if they were worried about anything. She admitted that she was '*afraid*' to do this. This does highlight the level of discomfort that exists among members of the teaching profession in addressing sensitive issues with children and furthermore suggests that receiving a disclosure of abuse from a child is something that participants would prefer would not happen to them. Moreover, as outlined in the discussion relating to personal safety, participants felt the most sensitive lessons of the Stay Safe programme were referenced to rather than directly taught. One of the clearest messages from the SAVI report which is supported by previous research is that while much sexual violence remains unknown, people may be willing to disclose abuse if asked (McGree et al, 2002). This behoves the need for schools to cultivate an environment and ethos that provides opportunities for children to have the space to talk and be listened to. Furthermore, this research highlights the need for teachers to feel prepared to act on indicators of abuse to include behaviour and to feel confident to listen to children and know what to do when they receive a disclosure.

4.5.2 Types of Disclosures Received

Interestingly, for the five participants who received disclosures of abuse, apart from one, they were all disclosures of physical abuse. In the case of one disclosure of sexual abuse, this was reported to the DLP by another pupil whom the abused child had told. This reflects the findings of the SAVI report, in that most people who disclosed sexual violence did so to friends (71%) (McGree et al, 2002). There are conflicting reports from the literature in

relation to children telling professionals about abuse. While the findings from the SAVI report (McGree et al, 2002) found that disclosure to professionals about sexual abuse was strikingly low, literature suggests that if children choose a trusted adult with whom to share their secret, it is most often teachers that abused children turn to for help, and for the reason that they anticipate teachers can maintain an influence over the pace of events (Maher, 1987, Gilligan, 1995; Webb & Vulliamy, 2001). The findings from this study would indicate that a good relationship with teachers certainly enables children to tell and children are more likely to tell when asked. However, sexual abuse is not being reported by children, and remains the 'secret' one, that participants realise is so hard to 'break'.

4.5.3 Factors which Enable Children to Tell in the School Environment.

In providing a context that would enable children to 'tell' in the school, trust, within a caring school ethos or with a particular staff member was identified as key in supporting children. Participants were united in describing an ethos and an attitude of care towards the children, corresponding to literature which emphasises the role of the teacher in striving to make the classroom a safe place for a child and creating an atmosphere within the school that promotes the self esteem, safety and welfare of children (Gilligan, 1995, Buckley & McGarry, 2010). One participant described very powerfully how school and home should be mirror environments for a child and if a child is in an unsafe environment at home, the contrast provided by the school environment should facilitate them in becoming aware of the difference.

Trust, with a particular staff member, was identified as a second factor in supporting children to tell in the school context. A child's class teacher was identified as the strongest support for any child and the importance of making the time to listen and provide opportunities for children to confide in teachers was highlighted by participants as key to

enabling children to tell. It was the opinion of one participant that teachers can fool themselves in relation to their approachability on an issue like children telling if they are subject to abuse. These observations by the participants establish the importance for teachers of being a person children can confide in and being aware of providing openings to children to speak to them about a confidential issue. Given the pressure on teachers' teaching time, within a school environment which is always busy and often sometimes frantic, combined with the often taken for granted approach that schools are caring places, the need for continued professional and personal development for teachers exploring such issues is evident from the findings in this study.

4.5.4 Social Personal and Health Education for Children

The central importance of the teaching of SPHE was identified by participants as extremely important in providing a context that would support children in being able to tell. That a half an hour per week on the timetable was not adequate time for the subject was noted by two participants. The Primary Curriculum Review Phase Two conducted by the NCCA identified time, in terms of curriculum overload as one of their greatest challenges in curriculum implementation. Specifically in relation to SPHE, one respondent noted 'It's very easy to put it aside and say it's done informally everyday (NCCA, Primary Curriculum Review, Phase 2, 2009, p151)'. Anecdotal evidence would suggest that this is in fact often the reality, and given time pressures, dealing with multiple classes and unforeseen interruptions on classroom life, SPHE is often the subject that suffers as a result. Its central importance within the curriculum in building and enhancing children's self esteem, in giving them skills and values and in equipping them with personal safety skills to prevent them from suffering from abuse is clearly evident. The reports from the DLP's in this study in relation to

the children to whom they have a duty of care are evidence of the need of allocating a central place to SPHE on the curriculum, worthy of additional teaching time.

4.6 Guidelines and Training

4.6.1 Guidelines on Child Protection

The Children First national guidelines (1999) and the DES Child Protection Guidelines (2001) were considered by the participants in this research in terms of the support they offered to DLP's. The two sets of guidelines were not discussed separately and in general terms there was an overall level of satisfaction in terms of detail and direction offered. In conversation relating to the guidelines many of the participants highlighted that getting the document into practice and implementing the guidelines remained their greatest challenge and some of the findings within this study indicate that implementation and adherence to the guidelines is not as straightforward as is written on paper. The general nature of the guidelines was a concern expressed by a small number of participants bearing in mind the fact that these guidelines have to cover two teacher schools, ten teacher schools, schools with DEIS status and special schools. This response would indicate that participants feel that different circumstances in different schools warrant an almost individual response and not all the issues that schools have to deal with can be covered comprehensively by guidelines, thereby indicating that the guidelines are open to interpretation. Once again this begs the question as to whether the intention of the Minister for Children in 2009 to implement legislation putting the guidelines on a statutory footing, and a further indication in the 2011 guidelines should not take high priority as a matter of urgency?

There were a number of specific issues within the guidelines which participants raised concerns over. The issue of dealing with newcomer children and families is a reality for many

of those involved in this research and is an area not addressed within the guidelines. The profile of Irish society has changed rapidly since the publication of the guidelines and although these guidelines have been republished, guidance on newcomers is not included. Specifically, in terms of newcomer, the participants felt guidance was needed around dealing with different cultural practices. DLP's would welcome advice in relation to how to deal with children being left unattended and responding to different practices that are odds with the Irish culture. As previously outlined, the need for clarification on the sharing of confidential information with a Deputy DLP and also with staff would be welcomed by participants as the findings from this research highlight that confidentiality is open to interpretation

The agreement amongst the participants in this study was that the signs and symptoms of abuse was another area that warranted further attention in the guidelines. Participants admitted that in particular subtle signs of abuse were an area they needed more support in, where behavioural signs or other may be presenting but without any disclosure. The category of emotional abuse was noted as the category that was given least attention in the guidelines and needed to be expanded upon. While the guidelines are for all organisations and agencies who deal with children, the findings from this study would suggest that exploration and expansion on the signs and symptoms of abuse that may display themselves in the school context would be particularly helpful for school staffs. That legislation would be updated and the rights of children addressed were further areas the participants wished to see the guidelines address.

Although the DES guidelines (2001) outline that the DLP should inform parents a report is being submitted to the HSE, as has been outlined, DLP's approached this in different ways. Some DLP's informed the parents at information evenings, others by way of letter, and many had not addressed the issue with parents. What emerged from this study was the need for a standardised protocol in relation to informing parents about the guidelines. Some DLP's

felt giving parents too much information would enable them to cover their tracks while others wanted to ensure parents did not see the school as interfering, so information in relation to informing parents about the guidelines and schools' responsibilities would be very welcome and would support DLP's in knowing the appropriate level of information to impart. Indeed, the issue of the DLP informing parents on reporting was much disputed with the majority of participants feeling it was the best decision for the home school relationship ultimately.

4.6.2 Training requirements for DLP's

While all but one of the participants who took part in this research, have had some opportunity for training and there was a general satisfaction expressed in relation to training received, there was a number of additional training requirements requested. A huge priority identified by many of the participants was a multi agency component to training, where all the different agencies involved in child protection would contribute, most especially the HSE, corresponding to the literature which advocates multiagency training (McKee & Dillenger, 2009). Other training needs that DLP's in this study requested was more legal training for themselves and also a list of support services in their community whereby there would be access and availability of help for families with welfare needs. Also DLP's expressed that they would like more training on how to deal with sitting down and speaking to people involved in a case, particularly family members. It is worthy of note that only one participant in this study spoke of the importance of the DLP prioritising the issue at school and keeping it at the top of the agenda, which she considered more important than training. The recent study by Buckley & McGarry (2010) of newly qualified teachers highlighted how 44% could identify the DLP, while 56% could not and the majority of participants (57%) indicated uncertainty and lack of confidence in their ability to identify if a child was being harmed or at risk of being harmed. These findings supports the view of the participants of the

significance of the priority a DLP allocates to keeping the issue raised in the school environment.

The participants in this study found that their own experience in the role, which necessitated 'learning on the ground' and life experience was very valuable to them and was in its own right something that had helped to train them for the role. The DLP who began his teaching career in the United States spoke of the influence of this life experience for him and how it formed within him an attitude of the absolute importance of child protection at school level. The findings from this study indicate that personal value systems, life experience and experience of the job also impact on a DLP's understanding of and attitude to their role.

The participants were in agreement that regular training was required by DLP's and that this training should be mandatory rather than by invitation which is currently the case. Of significance was the fact that two of the sixteen participants drew an analysis with First Aid training and suggested that child protection training could adopt this model where a certificate was required to ensure training was kept up to date. There were varying opinions as to the frequency of training required for DLP's with some agreeing it should be on a yearly basis and others agreeing that every second or third year was sufficient. Baginsky & MacPhearson (2005) consider that all designated teachers with responsibility for child protection should attend refresher courses every two years. What has emerged from this study is that training must be provided for DLP's on a regular basis but in addition to training outlining the requirements of the 'Children First' national guidelines and the Departmental guidelines, interagency training that involves the HSE, legal training, training on dealing with families and availability of supports need to complement the existing training profile.

What emerged very strongly from this study was the dearth of training that exists for staff members. Participants identified the need for training for staff members as these are the people a DLP relies on completely to raise awareness of children who may be in potentially

unsafe or vulnerable situations. DLP's identified that important training issues for staff included how to respond to particular situations that might arise and also in-depth exploration of the signs and symptoms of the different categories of abuse. This corresponds with literature which not alone highlights the importance of all teachers receiving training, but training that explores sufficiently the signs of abuse in children as well as how to respond to suspicions and disclosures (Baginsky, 2000, Bryant & Baldwin, 2010). Participants in this study also felt that whole staff training was the most comprehensive way to present messages to staff. This study has highlighted the unavailability of training for staff and the vital importance of training them in signs and symptoms of abuse and in dealing with situations that may occur in the school environment.

4.7 Conclusion

This chapter provided an analysis of the findings of the interview stage of the research and a brief overview of the findings from the survey questionnaire. The analysis was outlined according to the five superordinate themes from the previous chapter and some of the implications of this study have been presented through this chapter. The concluding chapter of this work will consider the educational implications for child protection work, and will also outline the strengths and limitations of the study and offer directions for future research.

5.1 Thesis Conclusion

This research was conducted in order to explore the role of the DLP for child protection in the primary school, with a particular focus on schools designated as disadvantaged. The role of schools in child protection work in Ireland has been relatively unexplored to date, and this study sought to uncover this area, through the role of the person designated with responsibility in the school. The study focused on the personal experience of the DLP role, experiences of dealing with outside agencies in relation to children telling and also the role of school in child protection and the factors which support children disclosing abuse in the school environment. The study chose a mainly qualitative approach, and an individual interview was conducted with sixteen DLP's, eight from DEIS schools and eight from non DEIS schools. Prior to this, a survey questionnaire was distributed to thirty two DLP's; outlining the nature to the study and the questionnaire also sought the participants initial responses to issues that were further explored through the interview process.

The review of the literature in chapter one outlined the development of child protection practices in Ireland. Recent developments in the child protection system in New Zealand were also outlined. A conceptual framework of the child protection system, initiated by UNICEF was also considered. The review of the literature on interagency communication and cooperation highlighted that while it is advocated strongly in child protection work, it is an area that is fraught with difficulties and challenges. The review also described the various categories of abuse and their short and long term effects on children, demonstrating the devastating consequences of abuse on children. The literature review demonstrated that teachers are ideally placed to play a key role in child protection work; however that said, teachers are reluctant to report concerns of abuse.

5.2 Educational Implications for Child Protection Work

At a fundamental level this research elucidates our understanding of the experiences of DLP's for child protection in primary schools in Ireland. Little work has been carried out in the Irish context on the role of teachers in child protection work and this study has attempted to address the imbalance of the paucity of research in this area by addressing the role of the person with specific responsibility in the school. By focusing on personal experiences of the role, this research serves to share a story of a key participant in child protection work. The experiences as told by the participants in this research portrayed the role as demanding, time consuming, isolating and fraught with decisions that are in reality not as simple as outlined in the guidelines. The core of a DLP's work involves making decisions that potentially may have far reaching implications for children's lives and that of their families and on a personal level it is a very challenging position for one person to undertake.

An emergent theme of this interpretative study highlighted that the role of the DLP is assumed on becoming principal of a school, and more often than not it is a principal's pre existing knowledge of the role, rather than formal information regarding the responsibility which ensures the role is undertaken within a school. Given that the DES Child Protection Guidelines (2001) outline that the responsibility for nominating a DLP rests with the Board of Management, it is vital that each board both recognises and fulfils this duty. Specific training on boards' responsibilities in child protection work should be mandatory and furthermore the leadership and development modules for both aspiring principals and newly appointed principals should include child protection training. Although this research illustrated mixed opinions as to whether or not the principal of the school should be the DLP, the bottom line remains that the principal is responsible for the day to day running of the school and therefore should be the DLP. However, this research highlighted the isolation and responsibility of the role serving to illuminate it is a difficult job to undertake, heightened by the sense of little to

no support available. Bolstering support for DLP's through the establishment of a care team within each school, or through establishing protocols for information sharing between a DLP and a Deputy DLP, or allocating a HSE social worker to each school that would support a DLP in their child protection work could prove effective in helping to minimise the often overwhelming sense of isolation and responsibility for DLP's, keeping in mind the confidential nature of the subject matter.

In addition, the findings suggest that although the responsibilities of the Board of Management include 'monitor(ing) the progress of children considered to be at risk (Department of Children and Youth Affairs, 2011, p23)', there is, in reality, a lack of established monitoring systems in schools. Further support needs to be made available to ensure that schools establish such systems, and that there is some evaluation of these monitoring systems, either by the Inspectorate or through the HSE. Monitoring notes are essential in noting patterns of events and would support DLP's in reaching the point of referral, particularly in cases of neglect.

In considering the challenges faced in the role, support is much needed for DLP's in dealing with international families, balancing dealing with cultural differences and respecting such but ensuring a child's safety is not jeopardised in doing so. Most importantly, acceptance of different cultural norms and different cultural practices must not be used to justify lower standards of care and inaction by professionals and DLP's must adhere to the guidelines similarly for all children. Furthermore, considering that the greatest challenge for DLP's as highlighted by this research, is knowing when there is sufficient evidence to refer the situation to the HSE, this highlights the need to put the 'Children First' national guidelines on a statutory footing. The review of literature has demonstrated that teachers are reluctant to report abuse and mandatory reporting could only ensure greater compliance in the area. The reports by DLP's in this research has highlighted that they do not always follow the

guidelines stringently and may be addressing situations themselves and indeed prioritising that some categories of abuse are more serious than others. Given the uncertainty that the findings highlighted in knowing what level of signs and symptoms need to present in order to be categorised as abuse, exploration of the effects of child abuse on children, awareness of childhood behaviour, deeper knowledge of the signs and symptoms of abuse and personal attitude to the role need to be explored with DLP's. Given that all but one of the participants in this research have had experience of training, it is evident that training on the signs and symptoms of abuse is not sufficient and needs to be expanded. Furthermore, given the level of personal worry and concern expressed by participants who have not as yet reported abuse to the HSE, DLP's must understand the significance of their role in safeguarding a child. Interagency training, training on legal issues and guidance for DLP's on how best to inform families a referral is pending with the HSE are also components of a training programme which would benefit DLP's hugely.

Mutually supportive relationships between the HSE and schools need to be established and could provide an opportunity for the school perspective to be considered in decision making relating to a child. The valuable insights that schools and school personnel have on children is a factor that seems to be often overlooked in child protection proceedings and has the potential to be very beneficial to overall child protection decisions. A more effective method of communication needs to be established between the HSE and schools, incorporating structured levels of feedback and adequate response rates to referrals being processed. Some of the findings highlight that there presently exist levels of frustration and distrust between school personnel and the HSE as a result of non intervention and unsuccessful intervention for children and in order for interagency communication and cooperation to achieve any level of success; these issues need to be addressed. Presently schools have little to no information in relation to how the HSE system operates in relation to

child protection and information and awareness is needed for DLP's in order to understand the constraints and realities they are operating under. Given the necessity of information sharing and cooperation required to progress cases, this could potentially be facilitated through relationship building between school and HSE personnel. Allocating a social worker to a school or group of schools with one key liaison person for each DLP, whom they have an opportunity to meet on a regular basis, could prove very effective in building bridges of communication and enabling greater levels of trust between HSE and school personnel. Levels of concern were also raised in relation to support services put in place for children and the level of follow through on such. As has been identified in the literature, the theoretical underpinnings of interagency work remain weak and considerable development needs to be made in the area of integrated services which can best support children and their families.

The findings from this research suggest that the case conference forum needs to be considered from a number of perspectives. The opinion of the participants in general in this research that decisions taken at conferences are not being implemented and follow through is not effective need to be addressed. Implementation must be a key outcome of child protection conference decisions and appropriate levels of feedback must be offered to those in attendance, persons who are invited because it is considered they have a valuable perspective to offer about a child. However the findings would indicate that certainly school staffs who attend conferences need a briefing on how conferences operate and the likely time scales involved given the level of legal considerations involved. A heightened awareness of the realities of how proceedings operate would ensure that the HSE are not criticised unduly for lack of outcomes when they are operating within a system where there are huge constraints. Participants also highlighted challenges of being completely honest in the case conference forum and considering this and the number of people present at any given conference it would seem appropriate to only invite those people who are deemed to offer a perspective

that is worthwhile to the overall case being considered in order to keep both the numbers to a minimum and create an environment that might allow itself to be more conducive to people sharing information. Given that school staffs are in the position to observe children on an almost daily basis it would seem sensible that regular contact would be kept, following the conference process, with a school to follow up on how children are progressing and the impact of interventions for them. The rights of children- the persons whom decisions at conferences affect most need to be considered and their voices heard given that theirs is often the absent chair in a conference when they should be involved in decisions that will affect them most. Support for parents also needs to be strengthened at conferences so that they are included in the process and listened to. In order to allow an environment where people can be forthright and honest in outlining what can be difficult truths, parents need to be brought on board and have somebody to work with them so ultimately the right decisions can be taken for a child.

‘The school story’ theme portrays the caring ethos that pervades in primary schools in general and demonstrates once more why interagency communication and cooperation is so essential between schools and the HSE. The care practices and programmes in place in schools, particularly in schools designated as disadvantaged contribute in very significant ways to a child’s overall care and protection and it is essential that this information is shared with personnel who are responsible for implementing supports and care plans for children in need. The perspective of many of the participants in this research is that programmes they have implemented have been successful, and at times more successful than those initiated by the HSE. Given the trusting relationships that schools build with children and their families, combined with reported successes of programme interventions it seems only logical that the HSE would form closer links with schools and school communities and seek their advice and support in implementing programmes for families. It seems the voice of the school and

school personnel is not given the significance or attention it should be and it is recommended stronger links are forged with schools, the place outside of the home where children spend the most time and that in return school staff work to support the HSE and see the significance of the role they play in child protection conferences and feel their presence is valued and necessary. Identifying the role of the school in the community, and addressing care practices via the education system could potentially contribute to real and successful interagency work. From an educational perspective alone, care practices are essential to ensure a child can succeed academically as highlighted by Gilligan: 'Concentration and trust, two key ingredients of readiness to learn are qualities which may be severely impaired by abusive experiences (Gilligan, 1995, p29)'.

The school story theme also outlined the varying levels of staff awareness to child protection issues based on age, experience levels and life experience. Different variables impact on a teachers ability to recognise child abuse and furthermore this research highlighted that teachers and school staff vary in their attitude towards the subject from being open to it to being reluctant to get involved for fear of bringing trouble upon themselves. It is necessary that teachers and also school staff are made aware of the consequences of abuse on children's lives and the importance of early detection and intervention. The question raised by one participant as to whether children are falling through the net as a result of the inaction of teachers should not have to be asked and school staff should not feel reluctant or fearful but must view it as their responsibility and their duty. Given the busyness of school life and the numerous priorities that have to be addressed, keeping child protection on the agenda and constantly reminding staff of the issue must also become established practice in schools.

In keeping child protection live on the school agenda the Stay Safe programme must be taught in its entirety. Outside of teaching the lessons in a block, the messages within the programme must constantly be reinforced with children. This research raised questions in

relation to the full implementation of the sensitive areas of the SPHE curriculum, namely Relationships and Sexuality Education and the Stay Safe programme. Despite being sensitive issues to approach with children, it is necessary to support teachers in teaching this material in school at an age appropriate and class appropriate level and both areas are underpinned by contributing to a child's welfare and safety. Furthermore, given the explosion of internet use by children, the Stay Safe programme which has not been updated in many years, needs to be reformed to address current safety issues that impact on a child's life. The opt-out clause for parents to exclude their child from Stay Safe should not persist as it is a child's right to receive this education. Appropriate training programmes and support need to be provided for teachers in both areas to ensure consistent implementation of these programmes and comfortableness on their behalf in imparting this information to children. Furthermore, this research has highlighted that a half hour per week for SPHE is not adequate at all, and it should be considered a core subject on the primary school curriculum.

While the aims of the Stay Safe programme include facilitating early disclosure of abuse, the findings from this study indicate that children find it hard to disclose that they are living through the experience of abuse especially if a family member is involved. While participants felt that the protective instincts children feel towards their families and the power adults have over children includes reasons for such, they further indicated that a child's behaviour may tell you a lot and they may also hint at something rather than directly disclose abuse. The subject of children telling is one that has been unexplored with school staff and warrants support, both in terms of teachers being able to identify behaviours that may be indicative of abuse taking place or hints and suggestions that need to be followed upon as this may be a child's telling mechanism. This area needs to be addressed with teachers to assist them in exploring their own feelings and anxieties about dealing with such sensitive information. It was further highlighted that Stay Safe is both not explicit enough and sensitive

lesson can often be referenced to rather than directly taught. Participants described being 'afraid' to encourage children to speak to them if they had a problem and felt it was not their business to 'probe' into children's personal circumstances. The space needs to be given to teachers working with children on a daily basis to explore what is an adequate and appropriate way to address the issue with children and let them know they will support a child while also respecting boundaries and the integrity of family life. Given that participants in this study were unanimous in their agreement that trust was the key ingredient in supporting children to disclose abuse in the school context, working with teachers to create a supportive climate and atmosphere in school where an ethos of care and of communication pervades would be hugely beneficial, both to the staff in becoming more at ease with the area, but also to the children for whom they care. Child protection concerns have to be a top priority at school level on an ongoing basis and this priority must ensure that teachers feel they are enabled to provide opportunities for children to confide in them if they need to and teachers are approachable and open to receiving such information.

The 'Children First' national guidelines and the DES Child Protection Guidelines are the two main documents which support DLP's and school staffs in child protection work. While the findings from this study indicate an overall level of satisfaction with the documents, considering that they have to cover every type and category of school, there were a number of issues that DLP's would welcome advice on to help them deal with challenges they face. Advice in the guidelines in relation to newcomer children, particularly around issues of discipline practices and children being left unattended would be most welcome in supporting schools in addressing such issues. The issue of informing parents in relation to the guidelines is currently the responsibility of schools and different schools have different approaches to doing so while other schools have not addressed the area at all. A standardised approach to informing parents across all schools would seem appropriate with support from

the HSE to schools, perhaps through providing a brochure to parents or other relevant sources of information. Greater clarity in relation to confidentiality would be welcomed in the guidelines, as would a more defined set of criteria in relation to the Deputy DLP role. Given the isolation felt by many DLP's, the need for support for them is a priority concern. The general consensus of the participants of this study was that the information in relation to signs and symptoms of the four categories of abuse was not detailed enough or sufficient to guide school personnel in their decision making on whether a child was suffering from a particular category of abuse or not. School staffs would appreciate more detailed information on the signs and symptoms of abuse, particularly the category of emotional abuse and also guidance on the more subtle signs of abuse and behavioural indicators would be very welcome to guide staff on how to respond to such situations. Updated legislation is also necessary reflecting the changes that have impacted on child protection work over the last decade.

The whole area of training in child protection, both for DLP's and school staffs is a priority issue as reflected both in this study and many of the literature findings. While training is available to DLP's and the participants expressed general satisfaction in terms of training received, further training modules would help those undertaking the role to feel more competent and prepared for the role. Given the necessity of interagency communication and cooperation for successful child protection work, an interagency component to training, between schools, the HSE and the Guards is a training requirement that needs to become a reality. This would also provide an opportunity for DLP's to become aware of supports available through the HSE and the avenues available to schools to access them. In addition to multi agency training, further training needs to be made available in relation to the legislation relating to child protection work and the impact of this legislation for school personnel. Given that child protection training is so important for DLP's it might be very worthwhile to consider adopting the practice used in First Aid where DLPs' would have to update their

training every three years in order to be certified to work in the area. Training should also allow the time and space for DLP's to consider their own personal attitude to the role, the fears and concerns they may have and the essential nature of the role for safeguarding and protecting vulnerable children. While training is available to DLP's and Deputy DLP's the issue of availability of training to staffs and newly qualified principals is something that needs to be considered as a matter of urgency. The time needs to be allocated to school staffs to sit and receive training together and be united in their approach to child protection work. Given all the in service that has been offered to staff since the introduction of the revised primary school curriculum in 1999 no full day of in service has been made available in child protection work and this undermines the value of the teacher's role in this area. As a child's class teacher is such an influential figure in his life it seems almost unthinkable that no national in service has been delivered in the area, but rather left to schools to prioritise themselves and apply for training through CAPP or the PDST (formerly the Primary Professional Development Service). Teachers must be up skilled on the different categories of abuse and understand the signs and symptoms associated with each category and how to proceed with concerns or suspicions. Many teachers in the Irish system may have little awareness of their responsibilities through lack of knowledge and information. Giving the space to schools to outline best practice in child protection would ensure greater safety for both children and teachers. Outside of addressing whole school training, annual training needs to be made available for newly qualified members of staff. HSCL teachers also need to be up skilled in terms of what to be vigilant for on home visits. Given that Ireland has identified failings in child protection over many decades, ensuring that the safety and welfare of children is a key priority in this country must enable those who work with children to be aware of their responsibilities and receive adequate training in this area.

5.3 Strengths and Limitations of the Study

Multiple strengths and weaknesses come to the fore in evaluating this research. Firstly, in terms of strengths, this study included DLP's who work in a variety of primary school settings in Ireland- with a specific focus on schools designated as disadvantaged, but including administrative and teaching principal, school under the Catholic Primary School Management Association, and multi denominational schools, Gaelscoil and special school. This helped to illuminate that the role of DLP in this country is subject to different experiences and challenges depending on the particular circumstances that apply in each case. Although the defined sample is considered a strength in this regard, it is also acknowledged that it may have limited generalisability of the research findings, however. In comparison to previous research carried out on the role, this interview focused on the experiences of carrying out the role from a personal perspective and highlighted the reality of how the job is happening on the ground. It furthermore focused on the care practices happening in schools and the trusting relationships between teachers and their students and highlighted the insights teachers and schools have on children and how they have the potential to offer a huge contribution in child protection work. In addition, this study offered a perspective from DLP's with varying levels of experience, from six months of undertaking the role to twenty years of experience of being DLP.

Rigour is a key term used to establish the adequacy of a qualitative research study, to ascertain if the research findings are justifiable and valuable (Watson & Girard, 2004). While there is much debate about what constitutes rigour (Dixon-Woods, Shaw, Agarwal & Smith, 2004), this study adopted the widely endorsed guide of Guba & Lincoln (1985) to support the trustworthiness of the findings. While the researcher acknowledges other explanations may have been possible from the data (Brocki & Wearden, 2006), in this investigation the comprehensive list of super and sub ordinate themes helped ensure the participants

experiences were adequately represented. However it is acknowledged member checking is a questionable pursuit and these research findings agree with some of the concerns surrounding the use of member checking. Indeed, Smith (1996) reported that participants were unlikely to question the researcher's interpretations and this concurs with the responses of the participants in the study.

In terms of limitations, given that eight of the sixteen participants worked in DEIS band one schools, the remaining sample comprise DLP's from a special school, a Gaelscoil, an Educate Together school, administrative and teaching principal, therefore every category has only one or a limited number of representatives. In particular, as over two thirds of primary school principals in Ireland are teaching principals, and the limited results from this study highlight they have little experience in the role and their sense of fear at 'taking action' or referring, a greater number of teaching principals participating in this study would have enhanced the findings.

The location and time for each interview was arranged to suit the interviewee. A number of administrative principals requested that the interview be conducted during the school day. There was a greater sense of time pressure in the school environment in comparison to interviews which were conducted outside of school hours and in one interview the principal was interrupted on two occasions. However, while these interviews may not have been as long in duration as others, the findings were indeed very rich and illuminating and contributed hugely to the study.

The perspective from this study in relation to child protection work is the voice of one member of the school community- the DLP. It would have been extremely worthwhile to investigate the perspective of HSE personnel in relation to how schools carry out their child protection duties and what the HSE's experience of interagency communication and cooperation has been, and as such the results of this study could have been viewed as one

sided. However, the purpose of this study was to explore the DLP's experience and perspectives as it was considered this voice in the child protection debate in Ireland has been relatively unheard.

Finally, due to time constraints the researcher conducted one interview with each participant. Multiple interviews may have produced richer accounts of the participants' experiences and may have provided an opportunity for improved rapport. Grafanki (1996) suggested the interviewer- interviewee relationship may influence the amount of information gleaned by the researcher. In saying this, the researcher contacted all the participants by telephone prior to the questionnaire being distributed and was again in contact to schedule dates and times for interviews and this may have contributed to a better rapport.

5.4 Directions for Future Research

In terms of future research, multiple possibilities emerge from this research. Although this research elucidated our understanding of the DLP role, it would be valuable to further explore the experience of the DLP and the situations they encounter over a certain timeframe in the workplace using longitudinal research.

While this research contributes to the dearth of literature on the experiences of the DLP role it must be acknowledged that this is a developing area and further research is recommended in the experiences of the role, particularly in the everyday work of the school principal. In consideration of the limitations of the current study, further research should focus specifically on the teaching principal who is DLP and the priority of this work in such a multi faceted role. The level of communication and relationship building with HSE personnel would be worthy of exploration in this study providing an insight into interagency communication and cooperation. A comparative study between DEIS and non DEIS schools

would be very worthwhile to ascertain are there varying experiences between both groups of DLP's and are the frequency and level of contact with the HSE in any way comparable.

The research adds to existing research as it suggest interagency communication and cooperation may not be happening as is envisaged and the current level of communication between schools and the HSE need to be strengthened in the best interests of children. In this regard it may be of value to explore the HSE perspective on communication with schools and how schools are meeting their responsibilities in an effort to hear both sides of the story and improve communication and cooperation based on results.

Finally, this research alluded to the fact that children do not disclose abuse to a great extent in the school environment, particularly sexual abuse. This could be further examined in the future by perhaps speaking to children who have experienced abuse in an effort to facilitate schools in creating an ethos and environment conducive to children disclosing abuse.

5.5 Conclusion

This study was an exploration of the role of the DLP in primary schools in Ireland. While DLP's were chosen to represent the various sizes and type of primary school, there was a specific focus on schools designated as disadvantaged and the experience of these DLP's contributed hugely in describing the lived experience of the role and the care practices provided for children in school. As such it expands on our understanding of the role and portrays the challenges, the isolation and the level of personal concern inherent in the role.

Little research is available in the Irish context that focuses on the role of the teacher in child protection work and apart from the INTO (2008) survey on the DLP role, the researcher was unable to locate any further literature focusing specifically on the Irish context. This study focuses directly on child protection work in the Irish context and in focusing on the

DLP also considers the wider school community including staff attitude to and awareness and children telling in the school context.

In this study the role of DLP as isolating and demanding and fraught with challenges in interagency communication and collaboration generally concurs with our existing knowledge base on the DLP role. The majority of participants reported that their experience in the role left them feeling extremely responsible for isolated decision making and dissatisfied with HSE responses and outcomes, and these findings generally concur with the existing research. However, in contrast to previous research this study investigated how DLP's reach the point of referring a concern to the HSE, in circumstances where no disclosure has been made and highlighted the reality of how this is happening on the ground. This study also focused specifically on staff attitude and awareness to child protection issues, with the elaboration on care practices highlighting the significant roles school play in contributing to children's welfare and protection. This has widened our understanding of the diversity of experience within the DLP role and portrayed the important and valuable contributions they have to offer on decisions been taken in relation to a child's safety and welfare.

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APPENDIX A

Ethical Approval from St Patrick's College Drumcondra

ST PATRICK'S COLLEGE

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Dr Liz McLaughlin
School of Nursing
Dublin City University



October 20, 2009

Dear Dr McLaughlin,

As acting director of the Ed.D. programme, I write to inform you that Margaret Nohilly's research entitled, *The challenges and responsibilities of the role of the Designated Liaison Person for child protection in a sample of primary schools*, has now been reviewed as part of the St Patrick's College ethical clearance process and approved by me. My decision was discussed at the meeting of the Research Ethics Committee on October 12, 2009.

Please note that if the proposal is significantly altered during the course of the study, or if instruments such as questionnaires etc. are adapted significantly, Ms Nohilly will be required to re-submit her proposal.

Should you have any queries, please do not hesitate to contact me.

Yours sincerely,

Dr. Michael O'Leary

APPENDIX B

Cover letter accompanying questionnaire outlining research project

36 Cluain Riocaird,

Headford Rd,

Galway

27-11-2009

087-2422976

Dear Sir/Madam

My name is Margaret Nohilly. I am currently carrying out research as a partial requirement of the taught doctorate programme in Education in St Patrick's College, Drumcondra.

The focus of this research is the experience and perceptions of the Designated Liaison Person for Child Protection in a sample of DEIS and Non DEIS schools.

The research is to be carried out through questionnaire and following on from this through single-individual interview with sixteen DLPs, eight from DEIS schools, and eight from Non DEIS schools. The enclosed questionnaire has been sent to thirty two DLPs, sixteen from DEIS schools and sixteen from non DEIS schools. I would be very grateful if you would complete the questionnaire and return it to me in the enclosed stamped addressed envelope at your earliest convenience. If you are willing to participate in an interview please indicate this on completion of the questionnaire. A random sample of those who are willing to be interviewed will be selected. It is hoped the interview will take approximately one hour which will be arranged to suit you. The interviews will be digitally recorded for transcription purposes. If you are in agreement to participate in the interview please provide me with a contact telephone number and I will telephone you after the Christmas break to schedule an interview.

I wish to assure you that all schools and participants will remain completely anonymous and you may view the transcripts of the interview before the findings are evaluated.

Your co-operation in this study will be so beneficial in reviewing the role of the Designated Liaison Person with a view to ensuring that vulnerable children are more adequately protected. Your contribution both in completing and returning the questionnaire and in agreeing to participate in an interview would be greatly appreciated.

Many thanks for your time and for your help

I remain,

Sincerely Yours,

Margaret Nohilly

APPENDIX C

Survey-Questionnaire sent to Participants

The experiences and perceptions of the role of the DLP

Q1a) School Type:

DEIS ☐

Non DEIS ☐

Q1b) School Category:

Co-educational School ☐

All Boys School ☐

All Girls School ☐

Special School ☐

Gaelscoil ☐

Q2a) Are you?

Male ☐

Female ☐

Q2b) Are you the Principal Teacher of your School?

Yes ☐

No ☐

Q2c) Is the Principal Teacher of your school?

Administrative ☐

Teaching ☐

Q3a) How long have you been a DLP? (This may include years of experience in another school/schools)

0-1 Years ☐

1-2 Years ☐

2-3 Years ☐

3-4 Years ☐

4-5 Years ☐

5-10 Years ☐

10-15 Years ☐

15-20 Years ☐

20+ Years ☐

Q3b) How did you come to take on the role of DLP in your school? (Please tick one box)

As Principal of the school

☐

As Post Holder in the school

☐

As someone who expressed an interest in taking on the role in the school

☐

Was asked to take on the role for the school

☐

The experiences and perceptions of the role of the DLP

Q4a) How important do you see the role of DLP? (Please tick one box)

Very important	Important	Neither	Not a priority	Insignificant

Q4b) How effective do you feel the current Child Protection school procedures are from a DLPs perspective? (Please tick one box)

Very effective	Effective	Neither	Ineffective	Very ineffective

Q5) How supportive to a DLP do you find the role of Deputy DLP? (Please tick one box)

Very supportive	Supportive	Neither	Unsupportive	Very unsupportive

Q6) Which of the four categories of abuse does your school deal with most frequently?
(Please tick one box)

Physical Abuse	Sexual Abuse	Emotional Abuse	Neglect

Q7) Identify any supports that facilitate you in carrying out your role as DLP.

The experiences and perceptions of the role of the DLP

Q8) Identify any challenges you encounter in carrying out your duties as DLP.

Q9) 'Teachers are particularly well placed to observe and monitor children for signs of abuse (Department of Health and Children, 1999, p50)'.

Do you agree or disagree with this statement? (Please tick one box)

Fully agree	Agree	Neither	Disagree	Fully disagree

Q10) How prepared do you feel the staff of your school are for dealing with a disclosure or suspected child abuse incident?

Fully prepared	Prepared	Neither	Unprepared	Very unprepared

Q11) Do you and your colleagues? (Please tick A or B)

A) Look out for the safety and welfare of vulnerable children at local level ☐

B) Report to the HSE? ☐

Q12) Please indicate the level of training you have received for your role as DLP. (Please tick one box)

Many opportunities for training	Some opportunity for training	Little opportunity for training	No training received for the role to date.

The experiences and perceptions of the role of the DLP

If you have received training, is there anything further you would like to see included in training sessions for DLPs?

If you had no training to date, what would you like to see covered in a training session for DLPs?

Q13) Which of the following would most closely describe your feelings about sending a report to the HSE? (Please tick one box)

I would be apprehensive about sending a report to the HSE

☐

I would have significant unease sending a report to the HSE

☐

I would have some level of unease sending a report to the HSE

☐

It is 'incumbent' on schools to report allegations or suspicions of abuse, and I feel it is my duty to implement this as DLP

☐

I may feel differently about it depending on the circumstances of the report and about who the allegation is against

☐

Q14) The following is a list of occasions a DLP may need to respond to possible situations. Please indicate your closest response by ticking either Yes or No beside each statement.

I feel I can ring the staff of my local HSE at anytime to support me in making decisions if I am unsure what to do

Yes

☐

No

☐

The experiences and perceptions of the role of the DLP

If a child made a disclosure of abuse, I would ring the HSE, even if I had reservations as to whether or not the disclosure was truthful

Yes ☐ No ☐

If I or a staff member had concerns about a child in our school, but no disclosure had been made, I would send a report to the HSE.

Yes ☐ No ☐

The relationship a school has built with a family can be jeopardised by reporting a family member and this has to be taken into consideration when reporting

Yes ☐ No ☐

If I felt a family were in need of support, I might try to access services for the family without sending a report to the HSE

Yes ☐ No ☐

Fear for my personal safety is a consideration when reporting to the HSE

Yes ☐ No ☐

Q15) How aware do you feel the parent body of your school are that the school has an obligation to follow the 'Children First' national guidelines and the Department of Education and Science Child Protection Guidelines? (Please tick one box)

The parent body have been informed of the schools position in relation to the guidelines ☐

The parents would have some level of awareness that the guidelines are in operation in the school ☐

Some parents would know the guidelines are in operation in the school ☐

Most parents are not aware that the guidelines are in operation in the school ☐

Q16) How supported do you feel the children in your school are in telling staff they are in an unsafe or vulnerable situation? (Please tick one box)

Very supported	Supported	Neither	Unsupported	Very unsupported
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The experiences and perceptions of the role of the DLP

Q17) What factors facilitates a child in the school context in 'telling' they are in an unsafe situation?

Q18) Having a DLP in every school ensures that vulnerable children are more adequately protected.

Do you agree with this statement? (Please tick one box)

Fully Agree	Agree	Neither	Disagree	Fully Disagree

Q19) Can you identify any key resource(s), as you see it, that if provided to schools would enhance the work that is being done in relation to Child Protection?

Q20) Are there any changes you would make to the current Child Protection procedures in schools to improve the situation for vulnerable children?

The experiences and perceptions of the role of the DLP

Thank you for taking the time to complete this questionnaire. I would very much appreciate the opportunity to interview a random sample of participants who have completed the questionnaire to further discuss some of the issues raised in the document. If you would be willing to take part in an interview please indicate below. Once again, the time you have taken to complete this and contribute to the safety and welfare of children is invaluable.

I would be willing to take part in an ☐ interview

I would not be willing to take part in an ☐ interview

If you are willing to take part in an interview please include your name and a contact telephone number and I will telephone you after the Christmas break to schedule an interview time that is convenient to you.

Name: _____

Telephone Number: _____

Is mise le meas,

Margaret Nohilly

APPENDIX D

Interview guide for qualitative interviews

Interview Schedule

Experience of the role of DLP

- ⊕ What the role of the DLP involves
- ⊕ Taking on the role-expectation to do so, feelings around this?
- ⊕ Elaboration on the supports and challenges as identified in the questionnaire.
Overcoming these.
- ⊕ Experience in the role-does it make it easier, changes in trends and patterns over time.
- ⊕ Importance of the role, and its role in ensuring that vulnerable children are more adequately protected.
- ⊕ Consequences of being a DLP
- ⊕ Role of the DLP-Preparation to take on the role of DLP

Child protection concerns and referrals

- ⊕ Course of action followed when there are concerns about a child
- ⊕ Provisions put in place for the child at school level
- ⊕ Reaching the point of referral-the amount of evidence that exists
- ⊕ Caring v referring-experience at school level
- ⊕ Experience of making a referral to the HSE
- ⊕ Number of referrals made to the HSE
- ⊕ Personal implication of sending a referral
- ⊕ Factors that enable/disable DLP to make a referral to the HSE
- ⊕ Support available around seeking advice
- ⊕ Outcomes of sending a report for the child and family
- ⊕ Efficiency of dealing with reports-relating to the categories of abuse
- ⊕ The influence of past experience on future referrals
- ⊕ DLP and HSE relationship-factors that enable a good relationship, linking to inter-agency communication and co-operation
- ⊕ Levels of communication, contact between HSE and schools,
- ⊕ Accessing services for a family in need
- ⊕ Awareness of services HSE provide
- ⊕ Experience of attendance at a case conference
- ⊕ Identification of DLP on referral form to HSE

Training for role of DLP

- ⊕ Opportunities for training
- ⊕ Quality of training
- ⊕ Elaboration on suggestions in questionnaire to enhance training
- ⊕ Frequency of training
- ⊕ Impact of training on the role
- ⊕ Opportunities to inform staff around child protection issues/ access training for staff

Role of the staff in Child protection work

- ⊕ Support provided by the staff to the DLP
- ⊕ Duties of staff in relation to child protection
- ⊕ Varying levels of awareness/expectation between staff and DLP
- ⊕ Levels of awareness amongst staff around child protection issues-openness to the possibility of the existence of child abuse
- ⊕ Concerns on teachers behalf's around referrals
- ⊕ Disclosure of abuse received by both staff and DLP
- ⊕ Factors that facilitate a child to 'tell', to make a disclosure
- ⊕ Best way to support children in giving them the message, it is not wrong to tell
- ⊕ Personal safety skills education in school
- ⊕ Effectiveness of programme in use
- ⊕ Signs and symptoms relating to categories of abuse, obvious or subtle, vigilance in relation to such
- ⊕ Support to avail of for staff

Children First National Guidelines and DES Child protection guidelines and procedures

- ⊕ Elaboration of effectiveness of the guidelines as indicated by the questionnaire
- ⊕ Implementation and adherence to the guidelines
- ⊕ Categories of abuse, definitions, signs and symptoms, adequacy for schools
- ⊕ Ways in which the categories of abuse display themselves in the school situation
- ⊕ Relevance of the guidelines in relation to the profile of the children in the school
- ⊕ Guidance in relation to confidentiality
- ⊕ 'Report not investigate child protection', Opinions around this.
- ⊕ Opinions about informing parents if a referral is made, experience of this
- ⊕ Implications for the family
- ⊕ Parental expectations around the guidelines, adequacy or otherwise, suggestions for improvement
- ⊕ Taking guidelines into account, judgement calls on behalf of the DLP
- ⊕ Others areas of child protection, staff, peer abuse, experience of DLP

Any closing comments/suggestions

Is there anything you would like to ask me?

Is there anything else I should have asked you?

APPENDIX E

Summary of Questionnaire Results

Q1a) School Type:

1= Non DEIS	2=DEIS
1=16	2=15

Q1b) School Category

1= Co-Educational	2= All Boys	3=All Girls	4=Special School	5=Gaelscoil
1=18	2=5	3=4	4=2	5=2

Non DEIS

1= Co-Educational	2= All Boys	3=All Girls	4=Special School	5=Gaelscoil
1=9	2=2	3=1	4=2	5=2

DEIS

1= Co-Educational	2= All Boys	3=All Girls	4=Special School	5=Gaelscoil
1=9	2=3	3=3	4=0	5=0

Q2a) Gender

1=Male	2=Female
1=11	2=20

Non DEIS

1=Male	2=Female
1=7	2=9

DEIS

1=Male	2=Female
1=4	2=11

Q2b) Are you the principal of the school?

1=Yes	2=No
1=29	2=2

Non DEIS

1=Yes	2=No
1=15	2=1

DEIS

1=Yes	2=No
1=14	2=1

Q2c) Teaching or Administrative principal

1=Administrative	2=Teaching
1=25	2=6

Non DEIS

1=Administrative	2=Teaching
1=10	2=6

DEIS

1=Administrative	2=Teaching
1=14	2=1

Q3a) Length of service as a DLP

1=0-1 Year	2=1-2 Years	3=2-3 Years	4=3-4 Years	5=4-5 Years	6=5-10 Years	7=10- 15 years	8=15- 20 years	9=20 + years
1=4	2=1	3=1	4=6	5=2	6=9	7=4	8=3	9=1

Non DEIS

1=0-1 Year	2=1-2 Years	3=2-3 Years	4=3-4 Years	5=4-5 Years	6=5-10 Years	7=10- 15 years	8=15- 20 years	9=20 + years
1=2	2=1	3=1	4=2	5=1	6=6	7=2	8=1	9=0

DEIS

1=0-1 Year	2=1-2 Years	3=2-3 Years	4=3-4 Years	5=4-5 Years	6=5-10 Years	7=10- 15 years	8=15- 20 years	9=20 + years
1=2	2=0	3=0	4=4	5=1	6=3	7=2	8=2	9=1

Q3b) How did you take on the DLP role in your school?

1=As Principal	2=As post holder	3=Expressed an interest in the role	4=Was asked to take on the role	5= Ticked more than one box
1=26	2=1	3=0	4=3	5=1

Non DEIS

1=As Principal	2=As post holder	3=Expressed an interest in the role	4=Was asked to take on the role	5= Ticked more than one box
1=13	2=1	3=0	4=2	5=0

DEIS

1=As Principal	2=As post holder	3=Expressed an interest in the role	4=Was asked to take on the role	5= Ticked more than one box
1=13	2=0	3=0	4=1	5=1

Q4a) Importance of the role of DLP

1=Very important	2= Important	3= Neither	4= Not a priority	5= Insignificant
1= 29	2=2	3=0	4=0	5=0

Non DEIS

1=Very important	2= Important	3= Neither	4= Not a priority	5= Insignificant
1= 14	2=2	3=0	4=0	5=0

DEIS

1=Very important	2= Important	3= Neither	4= Not a priority	5= Insignificant
1= 15	2=0	3=0	4=0	5=0

Q4b) The effectiveness of the current child protection guidelines from a DLP's perspective

1= Very effective	2= Effective	3= Neither	4= Ineffective	5= Very ineffective
1=5	2=24	3=2	1=1	1=0

Non DEIS

1= Very effective	2= Effective	3= Neither	4= Ineffective	5= Very ineffective
1=1	2=12	3=2	1=1	1=0

DEIS

1= Very effective	2= Effective	3= Neither	4= Ineffective	5= Very ineffective
1=4	2=11	3=0	1=0	1=0

Q5) Support of the role of Deputy DLP to DLP

1= Very supportive	2= Supportive	3= Neither	4= Unsupportive	5= Very unsupportive
1=20	2=4	3=5	4=2	5=0

Non DEIS

1= Very supportive	2= Supportive	3= Neither	4= Unsupportive	5= Very unsupportive
1=8	2=2	3=5	4=1	5=0

DEIS

1= Very supportive	2= Supportive	3= Neither	4= Unsupportive	5= Very unsupportive
1=12	2=2	3=0	4=1	5=0

Q6) Category of abuse school deals with most frequently

1=Physical	2=Sexual	3=Emotional	4=Neglect	5= Neglect and Emotional
1=4	2=0	3=2	4=23	5=1

None of the above =1 Thankfully we have had no occasion to deal with abuse of any nature to date.

Non DEIS

1=Physical	2=Sexual	3=Emotional	4=Neglect	5= Neglect and Emotional
1=2	2=0	3=2	4=10	5=1

None of the above=1

DEIS

1=Physical	2=Sexual	3=Emotional	4=Neglect	5= Neglect and Emotional
1=2	2=0	3=0	4=13	5=0

Q7) Supports that facilitate a DLP in their roleThemes:

Training

HSE Social Workers

Guards

Public Health Nurse

Board of Management

Staff

HSCL Teacher (Specific to DEIS)

Children First National Guidelines and DES Child Protection Guidelines

Other DLP's /IPPN/PPDS

Welfare and attendance officers from NEWB

Revising child protection policy

Psychologists

Community childcare workers

Q8) Challenges in carrying out duties as a DLP

Dealings with HSE/Lack of follow through, even when a report is made

Being sure of your own judgement

Making staff aware of procedures

Informing parents about referrals and dealing with referrals-Impact of referral on the family unit

Lack of support

Reporting and what to refer

Newcomers to the school

Balance in regard to confidentiality

Q9) Teachers are particularly well placed to observe and monitor children for signs of abuse (Department of Health and Children, 1999, p50)'. Do you agree with this statement?

1= Fully Agree	2= Agree	3= Neither	4 =Disagree	5= Fully Disagree
1=9	2=16	3=4	4=2	5=0

Non DEIS

1= Fully Agree	2= Agree	3= Neither	4 =Disagree	5= Fully Disagree
1=2	2=9	3=3	4=2	5=0

DEIS

1= Fully Agree	2= Agree	3= Neither	4 =Disagree	5= Fully Disagree
1=7	2=7	3=1	4=0	5=0

Q10) How prepared do you feel the staff of your school are for dealing with a disclosure or suspected child abuse incident?

1=Fully prepared	2= Prepared	3= Neither	4= Unprepared	5= Very Unprepared
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1= 6	2= 17	3=2	4=5	5=1
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Non DEIS

1=Fully prepared	2= Prepared	3= Neither	4= Unprepared	5= Very Unprepared
1= 2	2= 9	3=1	4=3	5=1

DEIS

1=Fully prepared	2= Prepared	3= Neither	4= Unprepared	5= Very Unprepared
1= 4	2= 8	3=1	4=2	5=1

Q11) Do you and your staff (Please tick one option)?

1= Look out for the safety and welfare of children at local level	2= Report to the HSE	3= Ticked both options
1=11	2=8	3=12

Non DEIS

1= Look out for the safety and welfare of children at local level	2= Report to the HSE	3= Ticked both options
1=8	2=3	3=5

DEIS

1= Look out for the safety and welfare of children at local level	2= Report to the HSE	3= Ticked both options
1=3	2=5	3=7

Q12) Indicate the level of training you have received for your role as DLP

1= Many opportunities for training	2= Some opportunities for training	3=Little opportunity for training	4= No training received for the role to date
1= 9	2=16	3=5	4=1

Non DEIS

1= Many opportunities for training	2= Some opportunities for training	3=Little opportunity for training	4= No training received for the role to date
1= 2	2=9	3=5	4=0

DEIS

1= Many opportunities for training	2= Some opportunities for training	3=Little opportunity for training	4= No training received for the role to date
1= 7	2=7	3=0	4=1

If you have received training is there anything further you would like to see included in training for DLP's?

Themes:

Meet with HSE personnel

Ongoing support, reassurance of procedures

Annual training, including staff

Dealing with allegations against staff members

Ideas on developing a care team in the school

Training on the more subtle signs of abuse

Dealing with the emotional fallout for all involved

If you have had no training to date in your role, what would you like to see included?

Guarantee of anonymity

Procedures outlined simply

Sample cases on how to react to different circumstances

Clarification and identification of different types of abuse

Social workers and teachers discuss child protection issues so retrospective issues can be heard.

Q13) Personal feelings about sending a report to the HSE

1= Apprehensive	2= Significant Unease	3 =Some level of unease	4= Incumbent duty on schools to report	5= I may feel differently depending on circumstances	6=3+4	7=4+5
1=4	2=0	3=3	4=16	5=5	6=2	7=1

Non DEIS

1= Apprehensive	2= Significant Unease	3 =Some level of unease	4= Incumbent duty on schools to report	5= I may feel differently depending on circumstances	6=3+4	7=4+5
1=2	2=0	3=1	4=7	5=3	6=2	7=1

DEIS

1= Apprehensive	2= Significant Unease	3 =Some level of unease	4= Incumbent duty on schools to report	5= I may feel differently depending on circumstances	6=3+4	7=4+5
1=2	2=0	3=2	4=9	5=2	6=0	7=0

Q14 Indicate your closest response by ticking Yes or No beside each statement

1= Yes 2= No 3= Unanswered

	1	2	3
I feel I can ring the staff of my local HSE at anytime to support me in making decisions if I am unsure what to do	1=15	2=15	3=1
If a child made a disclosure of abuse, I would ring the HSE, even if I had reservations as to whether or not the disclosure was truthful	1=27	2=1	3=3
If I or a staff member	1=10	2=15	3=6

had concerns about a child in our school, but no disclosure had been made, I would send a report to the HSE.			
The relationship a school has built with a family can be jeopardised by reporting a family member and this has to be taken into consideration when reporting	1=9	2=18	3=4
If I felt a family were in need of support, I might try to access services for the family without sending a report to the HSE	1=18	2=9	3=4
Fear for my personal safety is a consideration when reporting to the HSE	1=11	2=17	3=3

Non DEIS

	1	2	3
I feel I can ring the staff of my local HSE at anytime to support me in making decisions if I am unsure what to do	1=11	2=4	3=1
If a child made a disclosure of abuse, I would ring the HSE, even if I had reservations as to whether or not the disclosure was truthful	1=15	2=0	3=1
If I or a staff member had concerns about a child in our school,	1=2	2=11	3=3

but no disclosure had been made, I would send a report to the HSE.			
The relationship a school has built with a family can be jeopardised by reporting a family member and this has to be taken into consideration when reporting	1=6	2=8	3=2
If I felt a family were in need of support, I might try to access services for the family without sending a report to the HSE	1=11	2=3	3=2
Fear for my personal safety is a consideration when reporting to the HSE	1=6	2=8	3=2

DEIS

	1	2	3
I feel I can ring the staff of my local HSE at anytime to support me in making decisions if I am unsure what to do	1=4	2=11	3=0
If a child made a disclosure of abuse, I would ring the HSE, even if I had reservations as to whether or not the disclosure was truthful	1=12	2=1	3=2
If I or a staff member had concerns about a child in our school,	1=7	2=5	3=3

but no disclosure had been made, I would send a report to the HSE.			
The relationship a school has built with a family can be jeopardised by reporting a family member and this has to be taken into consideration when reporting	1=2	2=11	3=2
If I felt a family were in need of support, I might try to access services for the family without sending a report to the HSE	1=7	2=6	3=2
Fear for my personal safety is a consideration when reporting to the HSE	1=5	2=9	3=1

Q15) Awareness of the parent body of the school's obligations in relation to the guidelines

1=Parents have been informed about the guidelines	2= The Parents have some level of awareness about the guidelines	3=Some parents would know the guidelines are in operation	4=Parents are not aware the guidelines are in operation	5=Tickd more than one box
1=13	2=5	3=5	4=4	5=2

Non DEIS

1=Parents have been informed about the guidelines	2= The Parents have some level of awareness about the guidelines	3=Some parents would know the guidelines are in operation	4=Parents are not aware the guidelines are in operation	5=Tickd more than one box
1=6	2=3	3=3	4=1	5=1

DEIS

1=Parents have been informed about the guidelines	2= The Parents have some level of awareness about the guidelines	3=Some parents would know the guidelines are in operation	4=Parents are not aware the guidelines are in operation	5=Ticked more than one box
1=7	2=2	3=2	4=3	5=1

Q16) How supported do you feel the children in your school are in telling staff they are in an unsafe or vulnerable situation?

1=Very Supported	2= Supported	3= Neither	4= Unsupported	5= Very Unsupported	6=Don't know
1=15	2=12	3=2	4=0	5=1	6=1

NON DEIS

1=Very Supported	2= Supported	3= Neither	4= Unsupported	5= Very Unsupported	6=Don't know
1=7	2=6	3=2	4=0	5=1	6=0

DEIS

1=Very Supported	2= Supported	3= Neither	4= Unsupported	5= Very Unsupported	6=Don't know
1=8	2=6	3=0	4=0	5=0	6=1

Q17) What factors facilitates a child in the school context in 'telling' they are in an unsafe situation?

Themes

Reduced class size

Staff support-Relationships with teacher

Stay Safe-SPHE-RSE-Circle Time- Exploration of Stay Safe issues

Trust/relationships built with staff members over time

A caring school community

Stay Safe training

HSCL Teacher (Specific to DEIS)

Providing opportunities to children to disclose

Q18) Having a DLP in every school ensures that vulnerable children are more adequately protected.

Do you agree with this statement?

1= Fully Agree	2= Agree	3= Neither	4=Disagree	5=Fully Disagree
1=13	2=10	3=5	4=3	5=0

Non DEIS

1= Fully Agree	2= Agree	3= Neither	4=Disagree	5=Fully Disagree
1=6	2=7	3=2	4=1	5=0

DEIS

1= Fully Agree	2= Agree	3= Neither	4=Disagree	5=Fully Disagree
1=7	2=3	3=3	4=2	5=0

Q19) Can you identify any key resource(s), as you see it, that if provided to schools would enhance the work that is being done in relation to Child Protection?

Themes:

Staff Training

Contact with facilitators

More contact with social workers face to face-Build relationships-One worker per school

Copy of guidelines for all staff members

Guaranteed anonymity

Access to a Counsellor

Termly item on the Parent's Association Agenda

More information on the signs of abuse, even without a disclosure

Q20) Are there any changes you would make to the current Child Protection procedures in schools to improve the situation for vulnerable children?

Themes:

More contact with parents prior to a report being sent

Family centres that support families- less threatening

More liaisons with HSE personnel-visits by them to schools to see children in this context

An 'at risk' register in schools

More efficiency in HSE-Easier access to social workers-Face to face contact

Guaranteed anonymity

Child protection training in colleges of education

Designated HSE Social Worker

Schools not to engage with parents

Guidelines should become legislation; All new principals should get training in child protection before commencing their role.