

Priorities for Children, Young People and Families in Rural Clare

REPORT ON NEEDS ANALYSIS & DEVELOPMENT PLAN

A COLLABORATIVE STUDY BETWEEN
CLARE LOCAL DEVELOPMENT COMPANY (CLDC),
CLARE CHILDREN & YOUNG PEOPLE'S SERVICES COMMITTEE (CYPSC),
AND TUSLA CHILD & FAMILY AGENCY

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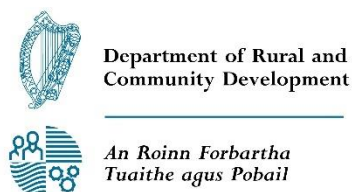
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‘The European Agricultural Fund for Rural Development; Europe investing in Rural Areas’.

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1. Executive Summary

A collaborative study funded by the LEADER Rural Development Programme 2014 – 2020 and undertaken by Clare Local Development Company (CLDC), Clare Children and Young People's Services Committee (CYPSC) and TUSLA Child and Family Agency between November 2017 and March 2018 is presented in this report. The project was instigated by Clare Local Development Company and is based on the published tender, *'Youth Needs Analysis and Development Plan for Young People and Rural Families in Co. Clare'*. The purpose of the study is to prepare for a three-year action plan for young people and rural families under the CLDC Local Development Strategy taking into account "Better Outcomes, Brighter Futures", Ireland's National Policy Framework for Children and Young People.

Through a fully inclusive process of engagement and consultation with relevant agencies and community groups in County Clare the report reviews current levels of service provision and identifies emerging themes from a needs analysis. A mixed methods approach was utilised and all components of the study were formulated in line with Better Outcomes Brighter Futures and in particular the five national outcomes and six transformational goals. Literature was reviewed since the inception of Better Outcomes Brighter Futures in 2014 to contextualise the background of this study at national, regional and local levels. Consultations with children, young people, parents and service providers were coordinated, designed and conducted by CYPSC Clare. A combination of online surveys and focus groups were used to consult with young people, parents and service providers. A consultation with school aged children was an adaptation of the National Consultation by the Department of Children and Youth Affairs, *Life as a Child and Young Person in Ireland'* (2012). Details of existing provision and perceived gaps in provision were captured during initial consultations and an additional request for information from service providers about specific services. The data collected was analysed systematically in line with criterion designed to capture the needs of children and young people in terms of intended outcomes nationally, their age and geographical area of residence.

There are five core sections in this report that detail the review of relevant literature; review and mapping of current levels of service provision; emerging themes from needs analysis; proposals to enhance rural youth capacity building and participation; and recommendations to inform service and development planning. The final section provides evidence-based recommendations intended to inform service and development planning targeting children, young people and rural families in County Clare.

2. Introduction

This report outlines a collaborative study funded by the LEADER Rural Development Programme 2014 – 2020 and undertaken by Clare Local Development Company (CLDC), Clare Children and Young People's Services Committee (CYPSC) and TUSLA Child and Family Agency between November 2017 and March 2018. The project was instigated by Clare Local Development Company and is based on the published tender, *'Youth Needs Analysis and Development Plan for Young People and Rural Families in Co. Clare'*. The purpose of the study is to prepare for a three-year action plan for young people and rural families under the CLDC Local Development Strategy taking into account "Better Outcomes, Brighter Futures", Ireland's National Policy Framework for Children and Young People. Through a fully inclusive process of engagement and consultation with relevant agencies and community groups in County Clare the report reviews current levels of service provision and identifies emerging themes from a needs analysis. This provides an evidence base to make recommendations intended to inform service and development planning targeting children, young people and rural families in County Clare.

The study aims to;

1. Review recent (2014-2017) and relevant literature for children, young people and families to contextualise the background to the study.
2. Gather information to identify the current level of service provision for children and young people in Co. Clare and map in a draft directory of services.
3. Engage and consult with relevant agencies, groups and individuals, to analyse the needs and identify emerging themes for children, young people and families in Co. Clare.
4. Develop a set of proposals to enhance rural capacity building actions in order to enhance participatory practices for children and youth.
5. Make broad recommendations to inform service and development plans over a three-year period for children, young people and families in Co. Clare.

There are five core sections in this report that detail the review of relevant literature; review and mapping of current levels of service provision; emerging themes from needs analysis; proposals to enhance rural youth capacity building and participation; and recommendations to inform service and development planning.

3. Methodology

A mixed methods approach was used to review literature, consult with stakeholders, review service provision, analyse need and identify recommendations. It was a collaborative piece of work and various stakeholders contributed to parts of the study.

Literature was reviewed since the inception of Better Outcomes Brighter Futures in 2014. The purpose of the literature review was to contextualise the background of this study at national, regional and local levels. It was also utilised to inform the review of services and analysis of need. Consultations with children, young people, parents and service providers were coordinated, designed and conducted by CYPSC Clare. Design began in 2016 and the majority of data was collected and analysed in 2017. A mixture of online surveys and focus groups were used to consult with young people, parents and service providers. A consultation with school aged children was an adaptation of the National Consultation by the Department of Children and Youth Affairs, *Life as a Child and Young Person in Ireland*, (2012). A number of agencies working with children, young people and families provided information, reports, evaluations and comments relevant to the study to be included in the needs

analysis. At the time that this study was being conducted the All-Island Research Observatory (AIRO) were also preparing an evidence baseline report to document and visualise the most up-to-date datasets relating to Children and Young Persons in Clare. Preliminary findings are included in the needs analysis.

Details of existing provision and perceived gaps in provision were captured during initial consultations and an additional request for information from service providers about specific services. Services were reviewed under the recommended headings in the Children and Young People's Service Committee (CYPSC) national guidelines (health & social services; education; policing and youth justice; local authority services; social welfare; sports, recreation, arts and culture; youth and other services) and the Hardiker model identifying different levels of need. A summary of observations is documented in this report and a mapping of existing services is recorded in an additional document aimed to serve as a resource for professionals working with children, young people and families.

Data was analysed systematically in line with criterion designed to capture the needs of children and young people in terms of intended outcomes nationally, their age and geographical area of residence. Finally, recommendations to inform service and development planning are formulated combining findings from all sources and sections of this report.

3.1. Ethical Considerations

Due consideration was given to planning and engaging participants in stakeholder consultations. Children and young people who participated in surveys and focus groups were recruited through existing school groups and youth groups. Survey questions for school aged children were designed based on a National Study and survey questions for youth were designed using established tools. Personal details were not collected and individual identities have not been disclosed during the study.

3.2. Limitations of the Study

This study was conducted over an 18-month period with various stakeholders more intensively involved at different stages. Due to the collaborative nature of the study some of the limitations of the study observed are as follows;

- The broad scope of the project to satisfy the needs of various stakeholders and to be inclusive of all national outcomes and transformational goals restricted the depth of review and analysis in respective areas.
- The volume of data collected during the CYPSC consultations strengthened findings but also caused repetition and possible duplication during the analysis.
- No direct consultation with children aged 0-4 years and limited consultation and data collected with 19-24-year olds may have limited the findings and analysis.
- The mapping of services exercise was an open invitation for agencies or organisations to respond with information and details of service provision. The extent to which all agencies or organisations working with children, young people and families in Clare are represented in the draft directory is unclear.
- Reduction in time allocated for compiling this report and associated tasks from 9 months to 5 months limited timeframes for review and feedback.

4. Review of Relevant Literature

4.1. Introduction

To inform the review of services, needs analysis and identifying thematic areas to be considered when developing a three-year development plan, a review of relevant literature identifying the policies, strategies and documents was conducted.

In recent years, Better Outcomes Brighter Futures – the national policy framework for children and young people 2014 – 2020 has been influential in all developments for children, young people and families in Ireland. This policy framework was informed by learning from the implementation of the National Children's Strategy – Our Children, Their Lives 2000 – 2010, wide consultation and identification of needs throughout the country. Subsequent developments have taken a whole of government and whole of society approach which has enhanced the interconnectedness and complimentary nature of many policies, frameworks, strategies and action plans (DCYA, 2014).

Throughout this review the transformative goals and five national outcomes detailed in Better Outcomes, Brighter Futures were considered and priority was given to developments in literature since the inception of the policy framework in 2014. An overview is presented in three sections; National, Regional and Local Contexts.

4.2. National Context

The Better Outcomes, Brighter Futures annual report on the third year of implementation April 2016 – 2017 indicates that implementation is progressing well across Government to achieve the collective vision 'for Ireland to be one of the best small countries in the world in which to grow up and raise a family, and where the rights of all children and young people are respected, protected and fulfilled; where their voices are heard and where they are supported to realise their maximum potential now and in the future', (DCYA, 2014 pg. vi). However, there is a need for increased ownership across government for issues that require whole of government responses as well as more consistent use of the implementation infrastructure. Furthermore, the implementation of constituent strategies, in particular the National Strategy on Children and Young People's Participation in Decision-Making, 2015–2020, the National Youth Strategy 2015 – 2020 and the Early Years Strategy will contribute significantly to the success of Better Outcomes, Brighter Futures (DCYA, 2017).

The National Strategy on Children and Young People's Participation in Decision-Making 2015 – 2020 is progressing well and has reported positive results in its annual reports. 'Listening to and involving children and young people' is a transformational goal in Better Outcomes, Brighter Futures and it builds on the achievements and challenges of the National Children's Strategy in further embedding effective, meaningful and systematic participation by children and young people in decision-making on issues that affect them in all aspects of their lives. The strategy is underpinned by Lundy's Model of Participation, which is grounded in the UNCRC and focused on a rights-based approach to involving children in decision-making. This model provides a way of conceptualising article 12 under four headings. Firstly, Space, children must be given safe, inclusive opportunities to form and express their view. Secondly, Voice, children must be facilitated to express their view. Thirdly, Audience, the view must be listened to and finally, Influence, the view must be acted upon, as appropriate (DCYA, 2015)

The purpose of the National Youth Strategy 2015 – 2020 is to coordinate policy and services across Government and other stakeholders, so as to enable all young people aged 10-24 years to realise their maximum potential with regard to the five national outcomes identified in the National Policy Framework. While it is a universal strategy for all young people, it provides for the needs of young people experiencing, or at risk of experiencing, poorer outcomes (DCYA, 2015). The National Youth

Strategy Lead Team was established in July 2016 and significant progress highlighted in the Better Outcomes Brighter Futures annual report are in relation to establishment of the Value for Money and Policy Review (VFMPR) Subgroup, the Youth Employability Initiative, the Irish Aid Development Education Strategy, Young Carers and Carers Forum (DCYA, 2017).

The National Early Years Strategy, which is expected to be published this year will be a first in Ireland. It will focus on the lives of children from birth to six years, their health and well-being, parenting and family support, learning and development, and play and recreation. The strategy is taking account of Right from the Start: Report of the Expert Advisory Group on the Early Years Strategy which stated that 'If Ireland gets it 'right from the start, by adopting a comprehensive Early Years Strategy for our children, with a serious commitment to implementation, we will end up with a generation of children, and successive generations, who are happier, healthier, safer, learning more, developing better and coping better with the adversity that life throws up' (DCYA, 2013, pg. 1). It is also guided by the reports of two interdepartmental groups established and chaired by DCYA 2015, specifically the Report of Inter-Departmental Working Group: Future Investment in Childcare in Ireland and the Supporting Access to the Early Childhood Care and Education (ECCE) Programme for Children with a Disability: Report of the Inter-Departmental Group (DCYA, 2017).

To ensure more children and young people achieve the outcomes set out in the strategies mentioned above, six transformational goals that apply to all strategies were named in Better Outcomes, Brighter Futures. These goals have been identified as key areas that, with focused and collective effort, have the potential to transform the effectiveness of existing policies, services and resources. These goals aim to support parents, earlier intervention and prevention, listen to and involve children and young people, ensure quality services, strengthen transitions and cross-government and interagency collaboration (DCYA, 2014, pg. 7). The five national outcomes that we want for all our children and young people are that they are active and healthy, with positive physical and mental wellbeing; are achieving their full potential in all areas of learning and development; are safe and protected from harm; have economic security and opportunity; and are connected, respected and contributing to their world (DCYA, 2014). A recent development that is useful for implementing these strategies and developing local plans is the indicator set for Better Outcomes Brighter Futures. This will serve as a barometer of progress on the five national outcomes and will inform future policy development.

Other reports and studies such as the State of Our Nations Children (2016) report and Growing Up in Ireland provide valuable insight into the needs of children and young people and issues that affect them. The State of Our Nations Children report provides a comprehensive picture of our children's lives by presenting key information in areas such as health and education as well as social, emotional, behavioural and self-reported happiness outcomes. It also presents data on supports and services available to children and their families, along with children's relationships with their parents and peers. Two key findings from the 2016 report is that the child population of Ireland increased by an estimated 17.8% between 2006 and 2016 (Population and Migration Estimates, Central Statistics Office, 2016) and that 11% of our children continue to live in consistent poverty (DCYA, 2016 Pg. 3).

Growing Up in Ireland is a Government-funded study of children being carried out jointly by the ESRI and Trinity College Dublin. The study started in 2006 and follows the progress of two groups of children: 8,000 9-year-olds (Child Cohort) and 10,000 9-month-olds (Infant Cohort). The members of the Child Cohort are now aged 19 years and those of the Infant Cohort are 9 years old. This study led to an interesting publication by the ESRI in 2016, Cherishing all children equally? Ireland 100 years on from the Easter Rising (2016). This book finds that despite many improvements in education, health and socio-emotional outcomes in the last century, children's wellbeing in contemporary Ireland is largely shaped by parental circumstances and social position, resulting in persistent inequalities. The

findings in the book point to implications for public policy that could support families most in need and help children to reach their potential regardless of circumstances. The book concludes that much of the variation in child outcomes may be associated with a family's economic, educational and social resources, with migrant status, with a child's SEN or a disability (ESRI, 2016, pg. 295).

More specifically in relation to the five national outcomes, a number of new policy and strategy developments have been launched recently. In some instances, these do not replace but rather complement existing documents. For example, any additions to health policy will compliment Healthy Ireland – A Framework for improved health and wellbeing 2013-2025. Connecting for Life – Ireland's National Strategy to Reduce Suicide 2015-2020 is founded on the suicide prevention work that has taken place in Ireland over the past ten years as part of Reach Out, the Government's previous strategy to reduce suicide. A Healthy Weight for Ireland: Obesity Policy and Action Plan 2016– 2025 overall aim is to increase the number of people with a healthy weight and set us on a path where healthy weight becomes the norm (HSE, 2016, pg. 3). Overweight and obesity are largely preventable, however, in the past two decades levels of overweight and obesity in Ireland have doubled.

The Action Plan for Education 2016 - 2019 summarised five high level goals to prioritise. The action plan aims to improve the learning experience and the success of learners; improve the progress of learners at risk of educational disadvantage or learners with special educational needs; Help those delivering education services to continuously improve; Build stronger bridges between education and wider community; Improve national planning and support services. These connect well with a number of the national outcomes. The National Traveller and Roma Inclusion Strategy 2017 – 2021 is also a cross-Departmental initiative to improve the lives of the Traveller and Roma communities in Ireland as they are identified as some of the most marginalised and disadvantaged in Ireland.

In terms of keeping children safe and protected from harm two important documents were launched in 2017. Firstly, the Children First National Guidance on the Welfare and Protection of Children (2017) is based on a legal framework provided primarily by the Child Care Act 1991 and the Children First Act 2015. The enactment of the Children First Act 2015 called for this revision of the guidelines as the Act places a number of statutory obligations on specific groups of professionals and on particular organisations providing services to children (DCYA, 2017). Secondly, Tusla's Child Protection and Welfare Strategy 2017 -2022 represents a fundamental shift in the provision of family support, child protection, educational welfare and alternative care services. Also, a central purpose of the Strategy is Tusla's renewed commitment to meet their statutory obligations and embed the revised best practice principles of Children First in practice. In addition, the Tackling Youth Crime – Youth Justice Action Plan, 2014-2018, focuses on young people who require targeted, strategic attention because their behaviour has led to their involvement in the youth justice system.

The Realising Our Potential Action Plan for Rural Development emphasised economic security and sustainability. The action plan states that rural Ireland has been faced with many challenges over recent decades, notably through the decline of traditional industries and associated job losses; through the emigration of many of our educated young people; and through poor connectivity in terms of transport and telecommunications infrastructure. However, the plan hopes to create sustainable rural communities by implementing strategies which will support and empower citizens in local towns, villages and their environs to build on their strengths. Again, there are close connections between the goals in this action plan and the national outcomes (DRCD, 2016).

To assist children and young people feel connected, The Making Great Art Work, Arts Council Strategy (2016–2025) sets out five priority areas, each with a distinct goal. There are two policy areas that they identify as priorities: 'The Artist' and 'Public Engagement'. In addition, they designate three areas of

our planning and decision-making as priorities. These are: 'Investment Strategy', 'Spatial and Demographic Planning', and 'Developing Capacity' (Arts Council, 2016, pg. 14). Arts and Cultural Participation among Children and Young People: Insights from the Growing Up in Ireland Study (2016) was commissioned as part of this strategy. In the study, barriers to engagement are identified. These include household income, with most structured cultural activities outside of school requiring payment. Language emerges as a barrier for immigrant families with young children. There are currently low levels of participation by young people with special educational needs in structured cultural activities. All of these have policy implications for the Arts Council and for their partners (Smyth 2016).

4.3. Regional Context

In the Mid – West Context there are some additional developments to the National commitments that are applicable throughout the country. One particular development is in relation to health and suicide prevention. The Connecting for Life Mid-West Suicide Prevention Action Plan 2017 -2020 reflects the national vision for suicide prevention and identifies region specific and local actions that will be implemented to achieve the vision and the expected outcomes during the four years. 'In 2014 there were 48 deaths from suicide in the Mid-West, accounting for 1.7% of all deaths in the region (11). The actual numbers of suicides were highest in Limerick City and Clare; however, this should also be considered in relation to the numbers of people living in these areas', (HSE, 2017, pg. 10). This document also provides localised information on services available and statistical figures that can inform needs analysis and service mapping in Clare.

The Report on Speak-Up Café DSGV Service User Consultations to the Mid-West Regional Advisory Committee on Violence Against Women (2014) highlighted a number of issues for all organisations who provide services to people affected by domestic, sexual and gender- based violence (DSGV). This led to recommendations for increased audits and reviews, awareness raising training, inter-agency working, information, facilities and complaints and feedback mechanisms in the region which are relevant across other sectors also.

The Limerick Youth Housing Evaluation Report Focus Ireland Report provides detailed information on Limerick which is relevant to Co. Clare as the service expanded to Clare and North Tipperary in 2016. In December 2012, Focus Ireland, Limerick City and County Council and Tusla established a working group to identify the needs and issues facing young people who were homeless or at risk of becoming homeless in the Midwest region. As a result, a modified Housing First approach was adopted to support young people who were identified as having a housing need in Limerick city and the wider region (Lawlor et al., 2017). 'In the whole of the Midwest region during December 2016, there were 43 18–24-year-olds in emergency accommodation and it is likely that most of these were based in the city', (ibid 2017, pg. 2). 'By the end of 2017, the initiative will have 35 units (started with 10 in 2013) in the Midwest region', (ibid, 2017 pg. 4). The report identifies the need for earlier interventions, especially with those under 18 years who are at risk of homelessness. It also states the need for clarity in relation to the identification of need and how this relates to level of risk.

4.4. Local Context

In response to National policies, frameworks, strategies and action plans, government departments and organisations within County Clare have developed documents that will inform the development of a plan for children, young people and families throughout the county.

County Clare Local Economic & Community Plan (LECP) 2016 – 2021 has a vision for ‘a county that, for all its people: nurtures an ethos of wellbeing, social inclusion and creativity; cherishes and sustains, for future generations, its environmental inheritance; fosters entrepreneurship and provides quality employment; offers cutting-edge research and development challenges, while providing education and training opportunities that are inspirational and accessible’ (Clare County Council, 2016). The purpose of the plan is to promote economic development and local and community development in the functional area of the Local Authority. The achievement of EU 2020 and related national targets set the context for many of the benchmarks and targets that are developed for the various objectives in the Plan. Section five outlines the consultation process and its outcomes, while section six presents an in depth socio-economic profile of the county covering demographics, education, employment, poverty, research and development and climate change. Section seven sets out the Plan’s Vision and the Themes to be addressed as a result of both the consultation and the socio-economic profile. The High-Level Goals to be achieved under each Theme are also set out. The main themes are Economic Development, Employment and Enterprise; Quality of Life, Health & Wellbeing; Education & Training; Research & Development; and Climate Change and Energy (Clare County Council 2016).

The Clare Rural Development Forum was specifically established to give rural communities the opportunity to work with the various public agencies, in shaping a roadmap for the development of rural Clare in the years ahead. The Forum consists of community and voluntary groups, local development bodies, public representatives, and key state agencies. The Clare Rural Development Strategy 2026 sets out how rural Clare will develop in the coming years by all stakeholders working in a spirit of co-operation. This strategy will run parallel to the Economic Development Strategy and will emphasise social enterprise development. This strategy identifies five key pillars rather than themes that will guide implementation. The five pillars are Supporting Sustainable Communities; Supporting Enterprise and Employment; Maximising our Rural Tourism and Recreation Potential; Fostering Culture & Creativity in Rural Communities; and Improving Infrastructure & Connectivity

Clare County Development Plan 2017 – 2023 outlines twenty goals which encompass themes that overlap with the five National Outcomes for children and young people in Better Outcomes, Brighter Futures. The Clare County Development Plan 2017-2023 also has regard to other relevant local policy documents. The objectives contained in the County Development Plan complement the goals and aims of the Clare Local Economic and Community Plan 2015-2021 and the Clare County Council Corporate Plan (Clare County Council, 2017, pg. 10).

Clare Local Development Company’s (CLDC) vision for the Leader Local Development Strategy (LDS) is that through the LEADER approach, Clare will be a county where businesses and communities are supported to grow and create quality job opportunities, enhanced eco-tourism offerings, devise innovative solutions to local issues and to build strong, resilient communities identifying and meeting the needs of the most vulnerable in an economically, socially, culturally and environmentally sustainable manner (CLDC 2014, pg. 68). This Local Development Strategy identifies the opportunities that have the most potential to benefit from LEADER 2014 - 2020 and provides supports that will maximise the ability of communities to make those opportunities flourish. In addition, this strategy focuses on supports to community groups in meeting the needs of those people in their community who are struggling with challenging life situations and rural isolation. Themes and associated actions

are presented in the strategy under the following headings; Tourism Destinations; Tourism Products; Enterprise; Market Towns; Rural Broadband; Community Development; Rural Youth; Biodiversity; and Renewables.

4.5. Conclusion

This literature review was conducted to inform needs analysis, mapping of services and identifying thematic areas to be considered when developing a three -year plan for children, young people and families in Co. Clare.

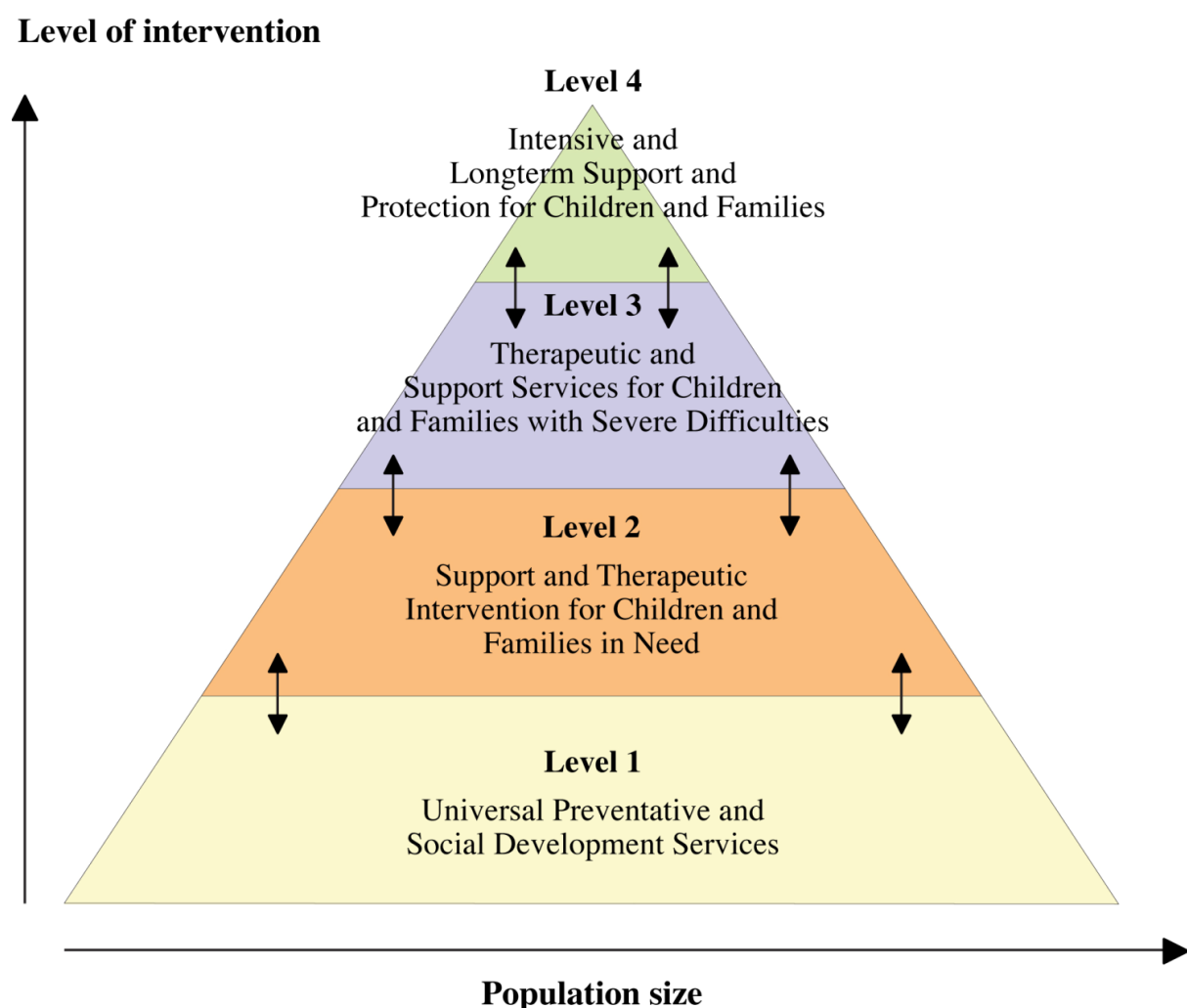
Better Outcomes Brighter Futures – the national policy framework for children and young people 2014 – 2020 is a core document that is referenced throughout the literature review. In many of the policies and strategies mentioned, the strategic goals, themes or pillars may be formatted differently but similarities and cross-cutting themes are evident. This reinforces an ambition for a whole of government and whole of society approach which has enhanced the interconnectedness and complimentary nature of many policies, frameworks, strategies and action plans to date.

Based on the literature available, there is huge potential for county Clare to build on existing national, regional and local documents to formulate and implement a comprehensive and transformative development plan for children, young people and families throughout the county.

5. Review & Mapping of Current Levels of Service Provision

5.1. The Hardiker Model for Reviewing Levels of Service Provision

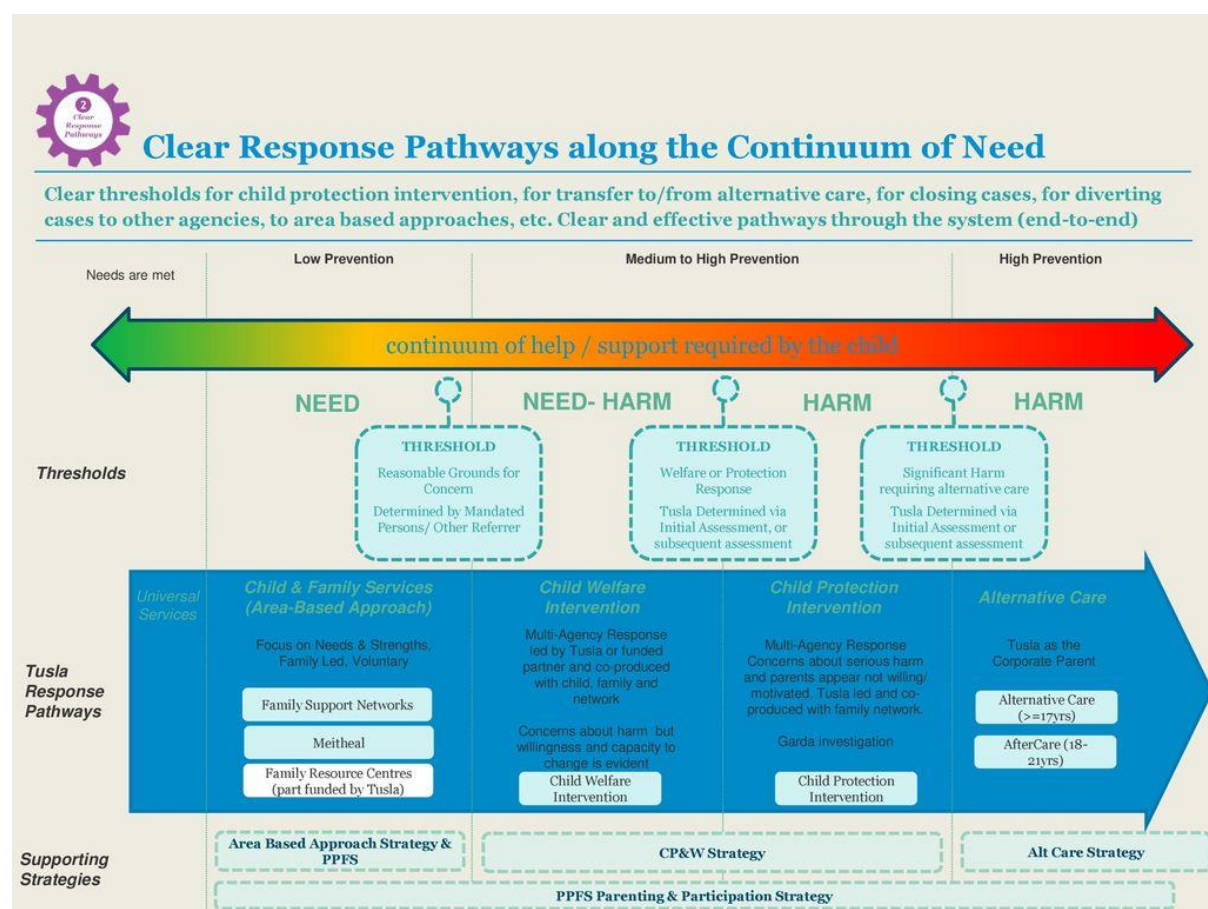
Services for children, young people and families were reviewed throughout this study during CYPSC consultations with stakeholders, requests for information about specific services from service providers and observations of information available publicly. The Hardiker Model (1991) presented in the diagram below is used to identify and understand different levels of need and type of support required for individuals and families. There are four levels inclusive of level 1: universal preventative and social development services; level 2: support and therapeutic intervention for children and families in need; level 3: therapeutic and support services for children and families with severe difficulties; and level 4: intensive and long-term support and protection for children and families.



Source: Hardiker et al, 1991

The CYPSC template and guidance for presenting an overview of services categorises services provided to children, young people and families in the local area, according to the different levels in the Hardiker model i.e. Levels 1, 2, 3 and 4 (recognising that some services cross several levels). This was the chosen model for categorisation in this study. However, it was evident that some services use this identification method on a daily basis, while others can relate to it but do not use it to the same extent for assessment or planning interventions.

Some agencies are moving away from this model of assessment or have expanded on it to meet the needs of children and families who may need help and support at any level of need. For example, Tusla's Prevention, Partnership and Family Support Programme (PPFS) is promoting an integrated approach using a common framework to help achieve common goals. The diagram below outlines clear response pathways along a continuum of need on the basis of low, medium or high prevention. This is intended to enhance working in partnership and the quality of services families' access.



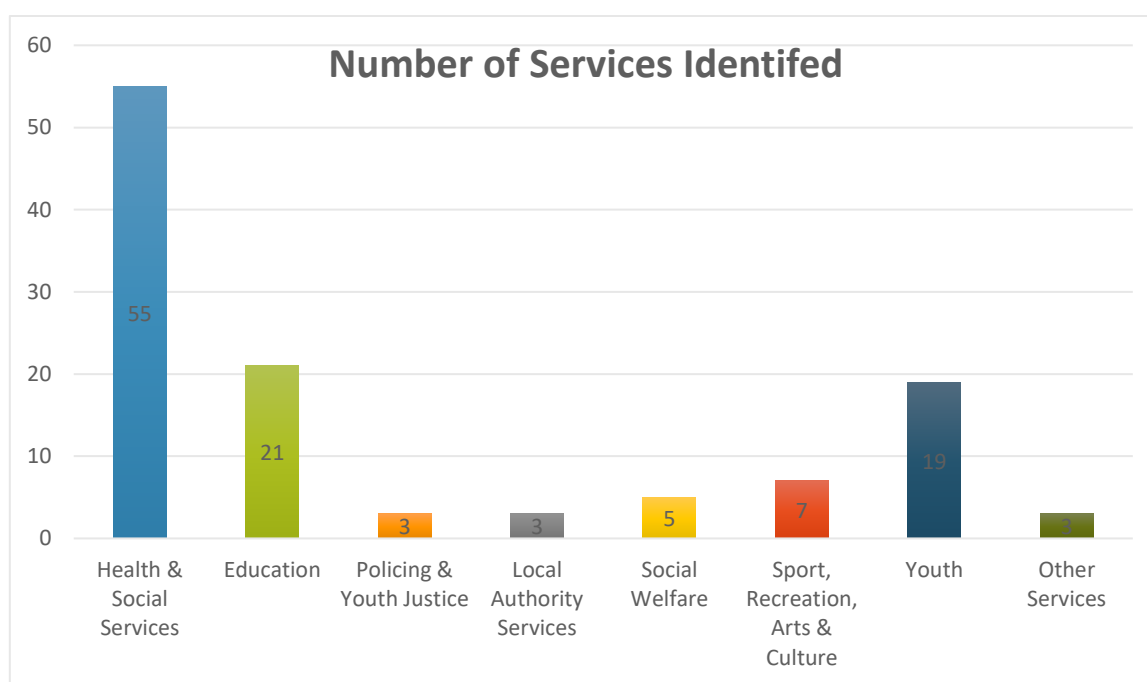
Source: Tusla Child and Family Agency, 2017

5.2. Observations from Mapping of Services

To an extent there are services relevant to each of the national outcome areas available in County Clare that were observed during this study. CYPSC guidance suggests presenting an overview under the headings of Health and Social Services; Education; Policing and Youth Justice; Local Authority Services; Social Welfare; Sports, recreation, arts and culture; Youth; and Other Services.

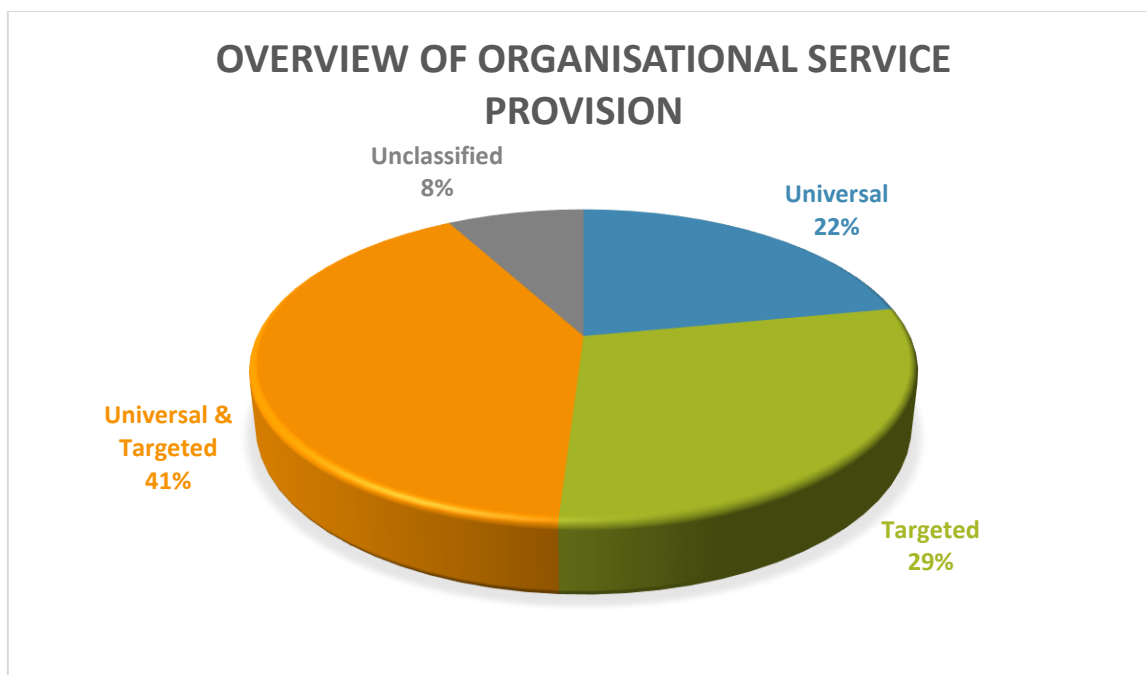
In the accompanying draft services directory (excel document), services are recorded under these eight headings and an additional sheet with links to other service directories that are already established. The draft directory records information about 116 services provided by 49 agencies/organisations. This is not a conclusive listing but forms a baseline for a process that requires further development. Suggestions made during this study indicate that there is potential for the directory to be formatted to be utilised by different audiences. In its current format it is an excel document targeting service providers. In other parts of the country CYPSC's have developed their service directories as an online resource. An example is the Sligo Leitrim CYPSC who launched their online service directory in 2016 (www.sligoleitrimdirectory.ie).

An overview of the number of services identified under each heading is presented in the table below:

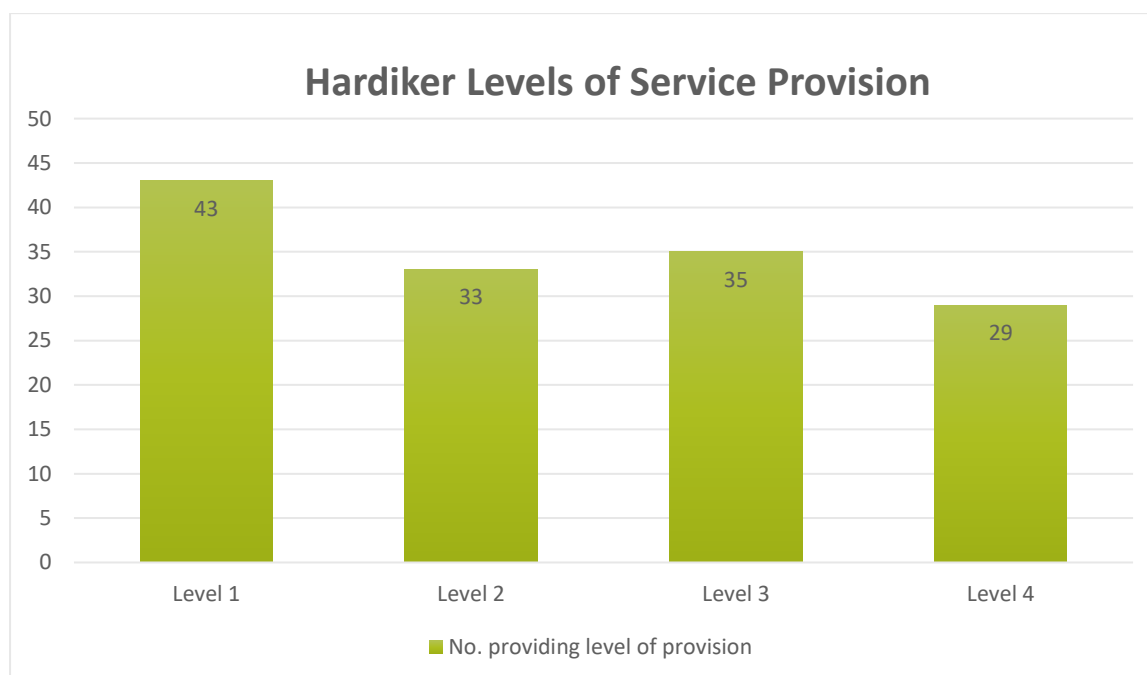


Therefore, the highest number of services (55) are recorded under the Health and Social Services section, followed by Education (21), Youth (19), Sports, Recreation, Arts & Culture (7), Social Welfare (5), Policing and Social Justice (3), Local Authority Services (3) and Other Services (3).

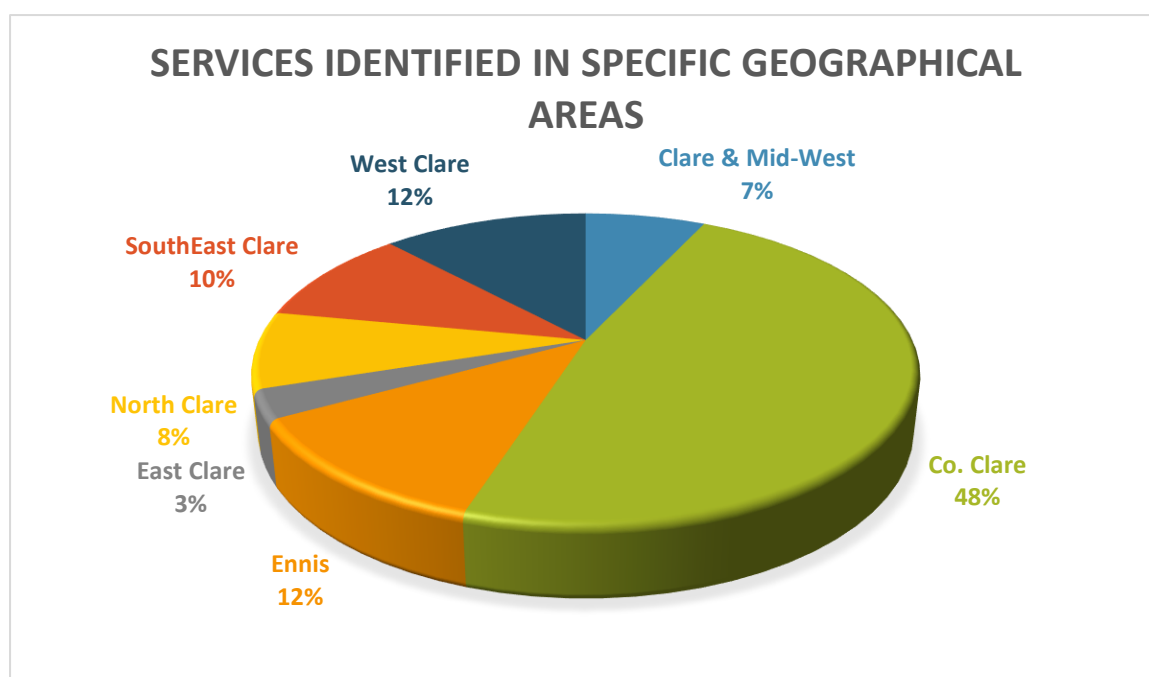
The service mapping exercise invited organisations to share details of services and rank in line with Hardiker levels. 28 agencies/organisations responded identifying 85 services. Of the 85 services 22% identified as catering for universal service provision, 29% identified as targeted service provision, 41% identified as both universal and targeted service provision and 8% did not classify.



An additional 21 agencies/organisations and 31 services were identified through CYPSC consultations and information available publicly. These are included in the draft directory but excluded from the Hardiker classification due to limited information. The sample of 28 agencies/organisations who did self-rank in line with Hardiker levels indicated 43 providing level 1 services, 33 level 2, 35 level 3, and 29 level 4 as shown in the diagram below:



In terms of the geographical remit of the 85 services, an overview is presented in the diagram below:



The highest proportion of services identified as having county wide remit (48%) and an additional (7%) with county and regional remit. The lowest proportion of services identified for a specific area was in East Clare (3%) and in particular in the areas of Education and Youth where it was the only area in the county where no specific services were identified. North Clare (8%) also had a low proportion, while South East Clare (10%), Ennis (12%) and West Clare were higher.

The needs of specific age groups are explored in more detail in the needs analysis section. However, service providers identified waiting lists, lack of outreach clinics, rural isolation and difficulties accessing services due to transport issues as cross-cutting challenges of service provision for all age groups.

5.3. Observations from CYPSC Consultations

Similar to comments during the mapping exercise, service providers describe large caseloads and waiting lists; wide geographical base; lack of space for services or groups to meet; limited funding; staff shortages, conditions and pay; rural isolation and transport affecting access to services as the main quality issues for service provision. Service providers also highlight the need for more coordination between services as sometimes lack of communication can lead to delays in individuals and/or families accessing services. Parents are primarily concerned about lack of affordable/accessible childcare, afterschool and recreational facilities and activities. Children and young people also emphasised a lack of space, activities and facilities to meet indoors and outdoors, and transport as challenging. Issues of concern that require additional services such as mental health and drug and alcohol education and prevention are expanded on in the needs analysis section.

5.4. Recommendations to Enhance Service Provision

- Review and establish if the Hardiker model is the most suitable and relevant model of assessing need and service provision when working collaboratively in Co. Clare.
- Further development of mapping of services via Child and Family Networks (when established) throughout the county.
- Conduct a more detailed assessment of service provision in East and North Clare as those who participated in the mapping exercise identified the least amount of services in these areas.
- Further development of the draft service directory to strengthen content, explore formatting options and target a wider audience than service providers.
- Identify actions to overcome access to services challenges due to waiting lists, rural isolation and transport.

6. Emerging Themes from Needs Analysis

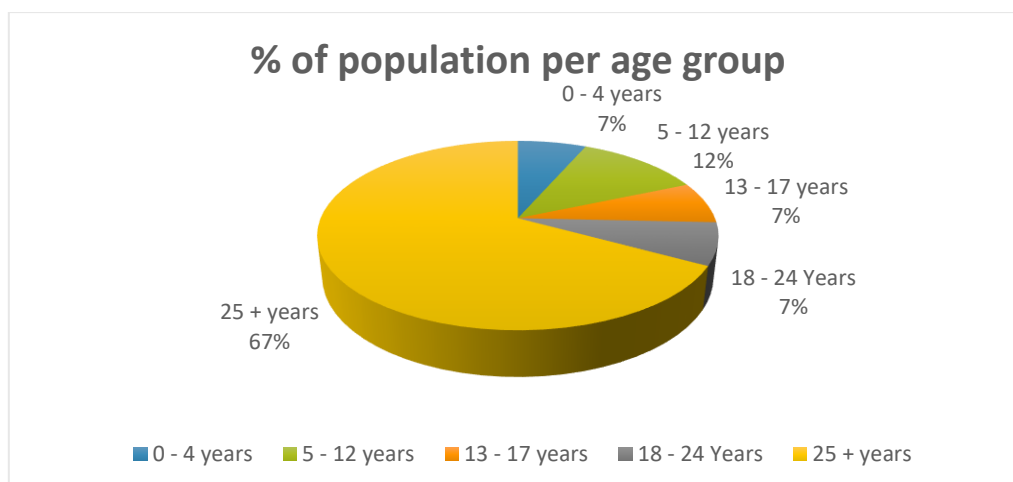
The contextual literature review and review of current levels of service provision formed a basis for approaching and assessing the needs of children and young people aged 0-24 years in County Clare. The analysis aims to identify emerging themes and areas for service and development planning. Needs have been assessed reflecting on the national outcomes and transformational goals of Better Outcomes, Brighter Futures and have been analysed in terms of four age categories (0-4; 5-12; 13-18; 19-24) and five geographical areas (Ennis & Surrounds; East Clare; North Clare; South East Clare; West Clare).

The first part of this section will present broad findings and analysis relevant to all age groups. Then a further four parts will present specific findings and analysis for each of the four age groups. Within each age group part, a brief synopsis of specific findings from the literature, AIRO report, CYPSC consultations, suggestions for service development, specific needs of target groups and summary of findings will be presented. For all parts within this needs analysis section, background information, concerns for children, young people and families, accessibility and quality of services and suggestions for service development will be considered.

6.1. Needs Analysis Relevant to All Groups (0 – 24 Years)

The All-Island Research Observatory (AIRO) at Maynooth University were collating and analysing sources of information to provide a detailed report on the socio-economic characteristics of the Clare CYPSC area at the same time that this study was being conducted. Preliminary findings are included in this needs analysis and findings support emerging themes from the literature and CYPSC consultations. An overview of findings across the 0 to 24 age group is presenting in this introductory section and a summary of specific findings for an age group is presented in the relevant sections.

According to Census 2016, there were 118,817 people residing in Clare in April 2016. This demonstrates a population change and increase of 1.4% between 2011 and 2016. Clare had the second highest population growth in the Mid-West region. Shannon (3.1%) had the highest population growth in Clare. The most relevant to this study is that a total of 39, 235 (33%) of the population in Clare were aged 0-24 years in 2016. An overview of the breakdown per age group is presented in the diagram below. The 5 – 12-years old group have the highest proportion at 12%. This supports the projected growth in youth and young adults from 2016 to 2031 (AIRO, 2017).



Findings in relation to specific groups without a breakdown of figures between age groups show that 83.5% of the population identified as 'White Irish'. For ethnic groups 1% can be identified as 'Black or Black Irish' which is higher than the Mid-West Regional average and 1.5% as 'White Irish Travellers' which is slightly higher than the State and Mid-West Regional averages. Ennis had the highest proportion of travellers, half of the total travellers in Clare. Shannon and West Clare have also considerably higher numbers than other areas in the County. In relation to Asylum seekers, there were 71 children and young people aged 24 years and under resident in direct provision centres in the Clare area in 2016. This figure represented a rate of 18.1 per 10,000 children and young people in the Clare area and was above state average of 9.1 (AIRO, 2017).

In terms of people with disabilities, a total of 12.7% of the male and 13.1% of the female populations in Clare had a disability in 2016. There were 515 children and young people registered with an intellectual disability in the Mid-West region and 64 children and young people registered with a physical disability in Clare. The breakdown below demonstrates that the percentage of children and young people identifying with an intellectual or physical disability increases with age.

	0 -4 Years	5 – 9 Years	10 – 14 Years	15 -19 Years
Intellectual	0%	25.4%	30.5%	43.5%
Physical	0%	15.6%	39.1%	45.3%

Broad findings in relation to the national outcome areas show that in educational attainment, a total of 11.3% of the population in Clare had no formal or primary only education, yet a total of 31.6% of the population in Clare had third level education in 2016. West Clare had the lowest proportion of the population with third level education. In terms of being safe and protected from harm, there were 197 applications granted for domestic violence barring orders in Clare in 2015. This figure equates to a rate of 64.8 applications granted per 10,000 families. It is lower than state average of 69.6 per 10,000 families. However, there was a significant increase in Clare from 44.4 per 10,000 families in 2011 to 64.8 in 2015. In 2016, there were 1,865 referrals to Tusla Child and Family Agency in the Mid-West ISA. As of March 2017, there were 593 children and young people in the care of Tusla in the Mid-West ISA. This figure equates to a rate of 6.2 per 1,000 children and young people under the age of 18 years. This rate is higher than the state rate of 5.5 and was the fifth highest in the country. In relation to economic security approximately 16.1% of children living in the Mid-West in Ireland are at risk of poverty. Based on Pobal HP Deprivation Index, 2016, there is a population of 15,572 (12.3%) residing in areas classed as being 'disadvantaged' or 'very disadvantaged' in Clare. Of those residing in these areas, 4,428 (30.4%) were aged under 24 years. A total of 17.6% of families in Clare were lone parents in 2016 with Ennis having the highest proportion (18.8%). According to Pobal, the average weekly cost of full-time childcare in Clare is €155. This figure is €12 less than the average cost at a state level and €5 more than the Regional Mid-West average (AIRO, 2017).

Therefore, needs identified show that West Clare has lowest educational attainment level. There has been a significant increase in the numbers of domestic violence barring orders between 2011 and 2015 in Clare. The rate of children and young people in care in the Mid-West is higher than State rates. 30.4% of 0 to 24-year olds are living in disadvantaged or very disadvantaged areas of Clare. Specific needs of age groups are expanded on in the relevant sections to follow.

The Clare Rural Development Strategy (2016) recognises that there has been a reduction in public services (health services, including GP's, Post Offices, Schools, Garda Stations, transport services, enterprise development, welfare support services, etc) and a protracted wait for physical and service infrastructure (e.g. schools, broadband, water and transport), (DRCD, 2016 pg7). The Clare Rural

Development Strategy is supported by the Clare Digital Strategy that focuses on ensuring that communities have the skills and competencies to prosper in the broadband enabled digital economy. It intends to diversify the range of publicly provided infrastructure and innovate rural transport initiatives such as ‘rural uber’, ‘community car-pooling’, befriending transport’ and community bus services, (DRCD, 2016 pg8). In the County Clare Local Economic and Community Plan (2016), ‘a number of disadvantaged groups communities of shared characteristics were also identified such as jobless households with one child (most concentrated in rural areas, especially in North, South-West and North-East Clare, where they were often living in open countryside); unemployed people who generally live in towns and villages; lone parent families who generally lived in towns and villages; members of the Traveller Community who by and large lived in the towns of Ennis and Environs, Shannon and Ennistymon’, (CCC, 2016, pg26).

The primary data analysed during this study was data collected by the CYPSC Coordinator in 2016 and 2017. The data was gathered through consultations with children, young people, parents and service providers. A total of 3168 (22%) of children aged 5-12 years, 309 (4%) of young people 12 -18 years, 667 parents and 109 services providers were consulted. An overview of participants is presented in the table below;

Consultation	Participants	Gender	Nationality	Sector	Geographical Areas
Children’s Survey in Primary Schools	3168 Children (5 – 12 Age Group)	Mixed	Mixed	Primary Schools (53)	Ennis & Surrounds x 9 East Clare x 8 North Clare x 12 South East Clare x 9 West Clare x 15
Youth Focus Groups	11 Focus Groups 110 Young People	Mixed	Mixed	N/A	Ennis X 5 East Clare x 2 (Scariff) North Clare x1 (Ennistymon) South East Clare x 4 (Shannon, Newmarket-on-Fergus, Tulla) West Clare x 1 (Miltown Malby)
Youth Online Survey	199 Young People (under 18 years)	112 Female 87 Male	179 Born in Ireland 19 (10%) Born outside of Ireland	N/A	Ennis & Surrounds: 60 East Clare: 8 North Clare: 29 South East Clare: 73 West Clare: 29

Parent Focus Groups	6 Focus Groups 40 Parents	Mixed	Mixed	N/A	Ennis X 2 East Clare – North Clare x 1 (Ennistymon) South East Clare x 2 (Shannon, Sixmilebridge) West Clare x 1 (Kilrush)
Parent Online Survey	627 Parents	581 Female 41 Male	529 Born in Ireland 90 (15%) Born outside of Ireland	N/A	Ennis: 199 East Clare: 98 North Clare: 104 South East Clare: 125 West Clare: 88 N/R: 13
Service Provider Survey	109 Service Providers			5% (59) Community sector 45% (48) Statutory sector Discipline: Childcare setting: 21 Education service: 20 Health service: 18 Youth work: 15 Social work: 12 Family Support: 7 Mental health: 5 CD/Disability /Student supports: 1	Co. Clare: 30 Ennis town: 27 East Clare: 11 North Clare: 6 South East Clare: 9 West Clare: 5

6.2. Needs Analysis for 0-4 Age Group (A)

This part specifically focuses on the 0-4 age group and presents an overview of findings and analysis of the data collected and priority themes emerging. It is presented under the following sub-headings: relevant literature; AIRO report; CYPSC consultations; and summary of findings and recommendations for 0-4 age group.

6.2.1. Relevant Literature

As the National Early Years Strategy had not been launched at the time of this study, the information available specifically for children of this age group is somewhat limited. However, the Right from the Start: Report of Expert Advisory Group on the Early Years Strategy (DCYA, 2013) is still relevant as are the reports of the Inter-Departmental Working Group: Future Investment in Childcare in Ireland (DCYA, 2015) and the Supporting Access to the Early Childhood Care and Education (ECCE) Programme for Children with a Disability (DCYA, 2015).

Themes that emerged from Inter-Departmental consultations are availability of accessible quality childcare and services and inclusive provision which are similar to those identified in the CYPSC consultations in Clare. The IDG proposes that future investment supports two high-level primary goals of supporting children's outcomes and supporting families in raising their children to reach their full potential could address these needs. The group states that 'supporting children's outcomes in early years care and education and after-school care is about having the right kind of care options and services which are good for children, available when and where children need them and delivered to a quality standard', (DCYA, 2015, pg9). It also recognises that 'parents' own economic security, education level and approach to parenting all have a potentially significant impact on a child's development. Parents need to be supported to make choices which are good for children, such as being able to take on the role of primary caregiver when that it is best (under the age of 1); and having the possibility of flexible patterns of work when their children are young', (DCYA, 2015, pg9).

The development of the Siolta Quality Framework, the Aistear Curriculum and universal provision of the ECCE programme to children of pre-school age have been important developments in Ireland that have enhanced education and care of children in this age group. The IDG also recommends that ECCE settings build their capacity to support children with complex needs. The proposed model focuses on the developmental level of children with disabilities, their functional ability and their needs. It does not focus on diagnosis, and in any event, it recognises that many children may not have a formal diagnosis at the time of presenting to pre-school (DCYA, 2015, pg5). Since June 2016, the AIM (Access and Inclusion Model) of supports commenced for Preschool children. This model of supports is designed to ensure that children with disabilities can access the Early Childhood Care and Education (ECCE) programme. Its goal is to empower service providers to deliver an inclusive pre-school experience, ensuring that every eligible child can fully participate in the ECCE programme and reap the benefits of quality early years care and education.

The Early Years Sector Profile 2016/2017 Report by Pobal presents an overview of the early years sector in Ireland for the academic year 2016/2017. It outlines the findings and analysis of the data captured through two sources: The Early Years' Service Profile survey, completed by 84% of early years services in Ireland in May 2017, and the Programmes Implementation Platform (PIP). It details consultations with numerous stakeholders and the key issues of importance identified such as: programme enrolment and childcare services; inclusion and disability; space capacity and waiting lists, childcare fees, staff wages, staff qualifications, staff turnover and capacity; and child protection.

6.2.2. AIRO Report

A summary of findings specific to 0 – 4 Years in the AIRO Report are presented in the table below:

Population	<p>6.6% (7,901) of the population in Clare were aged 0-4 years in 2016 and 1.2% (1,483) were aged under 1 year.</p> <p>Clare had the lowest proportion of 0-4-year olds in the Mid-West Region.</p> <p>At 7.3%, the LEA of Ennis had the highest proportion of 0-4-year olds.</p>
Active and Healthy	<p>Attending antenatal care 86.2% of expectant mothers residing in Clare attended antenatal care in the first trimester. This is lower than state average of 88%. However, it has increased from 64.7% in 2010.</p> <p>Infant mortality rates In 2016, 7 infant deaths occurred in Clare, this represents an infant mortality rate of 4.7 per 1,000 births. This rate is higher than the State average of 3.3 and the Mid-West Regional average of 3.6.</p> <p>Low birth weight In 2015, there were 81 infants born in Clare weighting less than 2,500 grams. This figure represented 5.5% of the total births in 2015. This proportion was slightly lower than the state average of 5.9%.</p> <p>Public Health Nurse Visits In 2015, 96.9% of babies in Clare were visited within 72 hours of being discharged from hospital.</p> <p>Breastfeeding In 2015, there were 584 mothers from Clare who exclusively breastfed on discharge from hospital. This figure equates to 40.1% of all discharged mothers in that year. This is lower than the state average of 47.7% In June 2017, 46.7% in the Clare LHO of mothers visited by the public health nurse for the first time were reported to be breastfeeding exclusively and 33.2% of mothers at their three-month visit.</p> <p>Immunisation Rates In 2015, 93% of the children in the Clare LHO had received their 12-month vaccinations at 12 months. This proportion was above the state (91%) and HSE Mid-West (90%) regional average. 95% had received their vaccinations at 24 months. This proportion is slightly lower than the State average of 96% and above the Mid-West Regional average of 35%. However, Clare meets the national target of 95%.</p> <p>Indications of need: promote attendance at antenatal care to continue an increase in rates.</p>

Learning & Development	<p>Childcare Places</p> <p>In the year 2015/16, there were 4,357 childcare places in Clare. This figure includes enrolled and vacant spaces and equates to a rate of 181.3 spaces per 1,000 children aged 0 -4 years residing in Clare. Relative to other local authorities, this was the fifth lowest rate in the State.</p> <p>In the year 2015/16, there were 2,011 children registered in Clare for the Free Pre-School Year in Early Childhood Care and Education (ECCE). 32% in community services and 68% private services. Less private spaces than national average of 75%.</p> <p><i>Indication of need: At the fifth lowest rate in the state, Clare may increase the number of childcare places available.</i></p>
Safe & Protected	<p>Direct Provision</p> <p>4 children (5.6% of asylum seekers) aged 0 – 4 years are residing in a direct provision centre.</p>

6.2.3. CYPSC Consultations

Data relevant to the 0-4 age group was gathered during focus groups with parents and responses to parent and service providers online surveys. During consultations parents and service providers shared information on family background and structure; challenges of parenting; issues of concern for children and families; specific needs of targeted groups; and suggestions for services development.

Family background and structure

Of the parents surveyed online and identifying as having children of this age group (177 parents, 29% of all surveyed), 87% were born in Ireland and 13% were born outside Ireland. In terms of number of parents in the household it was identified that 69% have two married parents, 21% have two cohabiting parents and 10% have a single parent. There was a significantly higher number of female parent respondents at 29%. The highest percentage of single parents recorded in West Clare, 17% compared to an average of 10% throughout the county. 32% report that they have two children, 26% have one child or three children, 12% have four children and 3% have more than four children.

Challenges of parenting

Parents who have children aged 0-4 years are of the opinion that the most challenging age group to parent and where additional support may be required are eighteen months to three years, then young people thirteen to eighteen years and then children under eighteen months. Parental concerns about supporting children are prioritised as being able to financially support children; lack of affordable or accessible childcare; access to afterschool activities; and access to recreational activities in the community.

Issues of concern for children and families

There is consistency from parents throughout the county that the issue of drugs is a main concern for their children. Abuse, depression, peer pressure and violence are also priority issues.

Specific needs of targeted groups

Parents breastfeeding identified the need for more support and service providers highlighted a need to enhance early intervention services for children with disabilities. Eight parents from Syria in one focus group identified English language skills, employment opportunities and psychological support for their children who may have suffered trauma as specific needs.

Suggestions for Service Development

Linked to concerns about being able to support children and families, parents and stakeholders identified the need for additional family support services and in particular parental support for those struggling financially, experiencing mental health difficulties or domestic violence in the home. They also suggested more options for childcare facilities that are accessible and affordable.

Examples of quotations from the consultations that demonstrate these findings are as follows;

“more informal supports for parents with babies, it can be overwhelming and isolating” (Parent)

“I think there should be accessible parent and toddler group in most areas and should be promoted when leaving the maternity hospital and encouraged early on as people power can help parents deal with most child/parenting problems” (Parent)

“More community creches with proper opening hours so I could go back to work as currently it’s 9-5pm” (Parent)

“More information and access for parents to help with financial costs of childcare” (Parent)

“Play therapy for children of families affected by domestic violence and more well-structured afterschool services and facilities offering stimulating activities and physical activity” (Service Provider)

“Lack of quality creches and too many unregistered low-quality childminders” (Service Provider)

6.2.4. Summary of Findings and Recommendations for 0-4 Age Group

Ref	BOBF	Priority Needs/Service Provision	Geographic Area	Recommendations
A1	Outcome 1: Active & Healthy	More Breastfeeding Support Groups (1.1)	Emphasised in North Clare	Link with Public Health Nurse and Family Resource Centre in North Clare and monitor if need is as relevant in other areas.
		Parents and services providers highlight the need for parent support including informal networks (1.1)	County wide	Establish more parental supports and perhaps review with the establishment of Child and Family Support Networks (CFSN throughout county).
		Parents and children highlight the lack of A&E	County wide	Advocate for this issue to be addressed at county planning level.

		and hospital services for children locally (1.1) Limited community activities for age group (1.1)	Countywide	Promote and support the establishment groups such as Parent and Toddler Groups.
A2	Outcome 2: Achieving in Learning & Development	Limited choice in Childcare Facilities (2.1)	Countywide but emphasised in rural areas.	Promote the establishment of private and community facilities. Review childcare places in the county.
A3	Outcome 3: Safe and Protected from Harm	Family Support Services and in particular parental support for those struggling financially, experiencing mental health difficulties or domestic violence in the home (3.1)	Countywide	Promote and resource the expansion of family support services throughout the county.
A4	Outcome 4: Economic Security and Opportunity	Financial security a large concern for parents, especially for childcare costs and limited choice of childcare services (4.1)	Countywide	Identify supports and information that can be provided to parents in relation to managing finances and accessing childcare services.
A5	Outcome 5: Connected, respected and contributing	Limited spaces outside of playgrounds for this age group to connect with community (5.2)	Countywide	Identify and support the establishment of alternative play spaces in the community.
A6	Goal 1: Support Parents	Mental Health – Postnatal Depression Parenting courses and information about parenting 0-4-year olds Support for single parents	Countywide Countywide AIRO data shows Ennis with high rates and consultations show west Clare with high rates	Support provision of and access to mental health care, creative therapies and informal social supports to meet other parents. Support provision of courses and dissemination of information. Explore specific needs of single parents in these areas.

A7	Goal 2: Earlier intervention and prevention	Family and parental support pre and post-natal	Countywide	Encourage parents to access antenatal and breastfeeding supports.
A8	Goal 3: Listen to and involve children and young people	Some services provided positive examples of children's participation in childcare facilities that may need to be promoted widely.	Countywide	Promote children's participation in curriculum planning in childcare facilities.
A9	Goal 4: Ensure quality services	Limited resources, facilities and options.	Countywide	Prioritise funding to provide registered childcare options, especially in rural areas.
A10	Goal 5: Strengthen Transitions	Parents describe two to four-year olds as a difficult age to parent.	Countywide	Support parents in managing the transition from preschool to primary school.
A11	Goal 6: Cross Government and interagency collaboration and coordination	Service providers highlight the need for more coordination between services and that lack of communication can lead to delays in accessing services.	Countywide	Establish interagency group to improve coordination of services between partners.

6.3. Needs Analysis for 5-12 Age Group (B)

This part specifically focuses on the 5-12 age group and presents an overview of findings and analysis of the data collected and priority themes emerging. It is presented under the following sub-headings: relevant literature; AIRO report; CYPSC consultations; and summary of findings and recommendations for 5-12 age group.

6.3.1. Relevant Literature

In reviewing relevant literature some relevant documents indicate particular areas of need for children of this age group that are reiterated in other parts of the needs analysis. In the Healthy Lifestyles Have Your Say: A Consultation with Children and Young People (DCYA, 2016) the views of children and young people on factors that help and hinder them in having a healthy lifestyle are outlined. The main themes that emerged from children aged 8–12 years include their recognition of the importance of eating more healthy foods and less “junk food”, getting enough sleep and physical exercise, playing outdoors and using “your imagination to make up active games”. In the State of the Nation’s Children Report (2014) it states that the percentage of children aged 7 classified as being in the ‘normal’ weight category has increased by 3 percentage points over the period 2010-2012 (WHO European Childhood Obesity Surveillance Initiative, 2012). In relation to mental health, the Connecting for Life literature review identified that very little research on self-harm prevention in children and adolescents (HSE, 2015, pg19)

In the report by the Inter-Departmental Working Group: Future Investment in Childcare in Ireland (DCYA, 2015) it states that ‘school-age childcare is not currently regulated in Ireland; there are no specified learning outcomes and staff are not required to have any qualifications. There is no clear vision or strategy for afterschool services covering their purpose (for example childcare or social and academic enrichment), content (for example, sports, art and music, free time), staff qualifications (for example, childcare, youth work, education) or physical environment’, (DCYA, 2015, pg55). It also states that, ‘if the State is to invest further in after-school, proposals need to include a commitment to devise an appropriate model of service delivery to meet the needs of children (appropriate content and flexibility allowing for a child-led approach) and their parents (flexible and responsive in terms of location/working arrangements)’, (DCYA, 2015, pg58).

6.3.2. AIRO Report

A summary of findings specific to 5-12 Years in the AIRO Report are presented in the table below:

Population	12% (14, 255) of the population in Clare were aged 5-12 years in 2016. Clare had the highest proportion of 5-12-year olds in the Mid-West Region. At 17.3%, the LEA of Sixmilebridge has the highest proportion of 5 to 12-year olds.
Learning & Development	Primary School Absenteeism In 2014/15, 9.3% of the students in mainstream primary schools in Clare were absent for 20 or more days. Below state average of 10.4%.
Safe & Protected	Direct Provision 27 children (39.4% of asylum seekers) aged 5 – 12 years are residing in a direct provision centre.

	Indication of need: highest proportion across the age groups is in this category and therefore may require additional services.
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6.3.3. CYPSC Consultations

Data relevant to the 5-12 age group was gathered during a primary school survey, focus groups with parents and responses to parent and service providers online surveys. During consultations parents and service providers shared information on family background and structure; challenges of parenting; issues of concern for children and families; specific needs of targeted groups; and suggestions for services development.

The children surveyed (3168 participants) in 53 schools throughout Clare shared their opinions on what it is like to live in County Clare and provided information relevant to the five national outcome areas. During analysis it was observed if children described living in Clare positively or negatively. A summary of observations is presented in this table:

Active & Healthy	<p>Responses were primarily positive in this area. East Clare commented the most while North Clare commented the least. Ennis had the most negative comments although a small percentage.</p> <p>Feelings about the environment and living in the countryside with peace, quiet, parks, beaches and scenery were commented on a lot. However, the weather was mentioned significantly as negatively impacting life in Clare. Children also highlighted a need for additional spaces, activities and facilities for play and recreation.</p> <p>Some examples are as follows;</p> <p><i>“Being by the beach and waking up in such a natural habitat of such wonderful nature and I love waking up in such a green area”</i> (Girl, 9).</p> <p><i>“More indoor playgrounds for bad weather days, more sports camps at low prices, more places for people to be more confident about themselves and maybe if they are shy to sign in front of people”</i> (Girl, 8)</p> <p><i>“get some more outdoor, sporting, government funded facilities in Clare to satisfy boys and girls, young and old or improve them not change them and also anytime when you are on the road there a tractor there, so make an extra land for tractors, lorries and cyclists”</i> (Boy, 12)</p>
Learning & Development	<p>Comments in this area were limited but primarily positive. Ennis most positive and West Clare the least positive. North Clare had the greatest amount of negative comments but a small percentage.</p> <p>Many children comment positively about enjoying school. Some suggestions for school improvements were in relation to shorter school days, no homework, no uniforms and happier teachers.</p> <p>Some examples are as follows;</p> <p><i>“School is the best thing that can happen to you”</i> (Girl, 10)</p>

	<p><i>"Our rich heritage, landscape and history. We have the cliffs of Moher, the burren, bunratty etc. Being a child, its brings the things we learn in school to come alive and there are examples of things we learn around every corner"</i> (Girl, 12)</p> <p><i>"we get so much homework my mum and dad can barely lift my school bag, my nan can't lift it at all"</i> (Boy, 11)</p> <p><i>"you spend most of your time in school and not with your family"</i> (Girl, 11)</p>
Safe and Protected	<p>Comments were more negative than positive about safety and protection. West and North Clare more positive than negative. Ennis, South East and East more negative than positive.</p> <p>A large proportion of negative comments were in relation to bullying in the home, school, community and online. The positive responses were primarily in relation to feeling safe and secure in a stable home environment.</p> <p>Some examples are as follows:</p> <p><i>"A few people bully me and they are not in my school"</i> (Boy, 8)</p> <p><i>"Bullying on the internet and schools too, bullying has to stop"</i> (Unknown)</p> <p><i>"I would like to change bullying as it is a big disaster today. I would also like to make every child equal"</i> (Girl, 12)</p>
Economic Security	<p>This area had the highest percentage of responses of all outcome areas. Comments were predominantly negative. East Clare and West Clare the most negative. Ennis, followed by North Clare and South East Clare the least negative.</p> <p>Priority concerns for children are in relation to transport services and distance to access services. Lack of indoor and outdoor facilities for children is highlighted in all areas. Awareness of financial concerns and lack of employment opportunities are also mentioned.</p> <p><i>"I would put in a place where children of all ages could just hang out and have fun"</i> (Girl, 12)</p> <p><i>"Children don't have to pay for schoolbooks or going to school as some families are poor so that every child can go to school and have a good job so that they can be fit and healthy"</i> (Girl, 11)</p> <p><i>"There is no way to earn money"</i> (Boy, 10)</p> <p><i>"There isn't enough room in houses, not enough shops, not enough work place for parents to make money"</i> (Girl, 11)</p> <p><i>"I would like if I didn't have to move away from here to get a job like a scientist"</i> (Boy, 10)</p>

Connected and Respected	<p>Responses were primarily positive. Ennis and West Clare most positive. South West and North Clare least positive. East Clare made the most negative comments.</p> <p>Positive responses were in relation to networks of family, friends and community. Negative responses in relation to living far away from relatives or friends. The main civic concerns for children are litter and pollution; road safety, conditions, street lights and cycle paths; housing and homelessness.</p> <p>Some examples are as follows;</p> <p><i>"I would never change my county because I like it the way it is a very lovely place. I love Clare"</i> (Girl, 9)</p> <p><i>"the close-knit community and proximity to everyone and everything, I really enjoy the great atmosphere and great range of activities"</i> (Girl, 12)</p> <p><i>"The worst thing is if you don't like sport it is hard to fit it. I would change the community not to be so sporty"</i> (Boy 10)</p> <p><i>"That all my cousins and aunts and uncles all live far away like England or Dublin because they couldn't find a job in Clare"</i> (Girl 9)</p> <p><i>"I would make free WIFI for the whole of Co. Clare called Clare Internet"</i> (Boy, 10)</p> <p><i>"I would put in cycle lanes on the roads, people would then be able to cycle to work, to school or a friend's house. It would also reduce pollution"</i> (Girl, 12)</p>
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Challenges of parenting

Parental concerns about supporting children are prioritised as being able to financially support children; lack of affordable or accessible childcare; access to afterschool activities; and access to recreational activities in the community. Service providers also emphasis lack of childcare and afterschool activities, restricting parents working.

Issues of concern for children and families

There is consistency from parents throughout the county that the issue of drugs is a main concern for their children. Abuse, depression, peer pressure and violence are also priority issues. The transition from primary to secondary school is a concern and challenge for children in this age category.

Specific needs of targeted groups

It is highlighted by parents and service providers that there are limited services for children with special needs outside of Ennis.

Suggestions for Service Development

The establishment of afterschool activities and youth friendly spaces is a priority for this age group. Cyber safety and anti-bullying initiatives as well as early intervention in drug and alcohol education, prevention and support are required.

Linked to concerns about being able to support children and families, parents identified the need for additional family support services and in particular parental support for those struggling financially, experiencing mental health difficulties or domestic violence in the home.

Examples of quotations from the consultations that demonstrate these findings are as follows;

“Affordable after school facilities homework clubs etc” (Parent)

“Afterschool services for primary school children because I have to close an office that I work in, in order to collect my daughter from school. I would love if she could go to after school activities until 5pm” (Parent)

“Youth clubs for under 12’s apart from sports” (Parent)

“Major gap in provision for afterschool care and children who are too old to attend crèches but too young to stay at home. Parents are in a dilemma as to what to do for them. No grants available for afterschool. All money aimed towards preschool. There needs to be more activities for 5-10yr olds” (Service Provider)

“it is not possible for us to offer a service in all parts of Clare, so we require all children to be brought to Ennis to be seen. That causes issues with transport/cost/ more time lost from school to attend etc. This appears to be more of an issue in West Clare” (Service Provider)

“Difficult to access home support for children with behavioural difficulties who do not have a diagnosed condition” (Service Provider)

“More services around mental health, such as access to affordable counselling or play therapy” (Parent)

“More transport within Clare to allow access to current available services would be great. Even a better/safer road access for children to walk and cycle on would help. It’s just not safe to let children teenagers or ourselves to walk or cycle the roads” (Parent)

“Moving from primary to secondary is a big worry for parents, how to talk to teenagers about things such as sexual health and dangers of sexual health and drugs etc. Some parents find that age the hardest to talk with” (Parent)

6.3.4. Summary of Findings and Recommendations for 5 – 12 Age Group

Ref	BOBF	Priority Needs/Service Provision	Geographic Area	Recommendations
B1	Outcome 1: Active & Healthy	Mental health and the need for more psychology and play therapy services (1.2).	County wide	Develop mental health services and resource provision.
		Information about sexual health and drugs (1.3)	Countywide	Invest in sexual health and drug and alcohol education and prevention.

		<p>Afterschool Activities and Youth Clubs for children under 12 years (1.4).</p> <p>More diverse indoor and outdoor activities and facilities (1.4)</p>	<p>Countywide</p> <p>Countywide</p>	<p>Support the establishment of afterschool groups and clubs for under 12's.</p> <p>Develop actions to increase provision of indoor and outdoor activities and facilities.</p>
B2	Outcome 2: Achieving in Learning & Development	<p>Support children during transition from primary to secondary school (2.2 linked to 1.2).</p> <p>Limited special needs services outside Ennis (2.3)</p> <p>Limited non-denominational schools (2.3)</p> <p>Children suggest improving school by shorter days, no uniforms and no homework (2.3)</p>	<p>Countywide</p> <p>Outside Ennis</p> <p>Countywide</p> <p>Countywide</p>	<p>Prioritise supporting the transition from primary to secondary in schools and support services.</p> <p>Review the provision of special needs services outside Ennis.</p> <p>Further research required to assess demand for these schools.</p> <p>Advocate for children with education services and review feasibility of such changes.</p>
B3	Outcome 3: Safe and Protected from Harm	<p>Family support for those struggling financially, experiencing mental health difficulties or domestic violence in the home (3.1)</p> <p>Road safety and being unable to walk or cycle for fear of safety is a concern for children (3.1)</p> <p>Bullying a priority concern for children in school, the community and online (3.3)</p>	<p>Countywide</p> <p>Countywide</p> <p>Countywide</p>	<p>Promote and resource the expansion of family support services throughout the county.</p> <p>Allocate capital funds and planning provision to develop safe cycleways in the county.</p> <p>Support and establish anti bullying and cyber safety initiatives.</p>

B4	Outcome 4: Economic Security and Opportunity	Financial security and being able to afford services and extracurricular activities is a concern for parents and children (4.1)	Countywide	Identify supports and information that can be provided to parents in relation to managing finances. Support the running costs of activities or programmes.
		A lack of facilities and activities for this age group, especially after school. Children feel that the weather is very restrictive and would like more indoor facilities and activities other than sport (4.2 & 4.3)	Countywide	Diversify options available to children and expand on indoor and outdoor activities available. Advocate for adjusted work conditions for parents working who struggle with afterschool care.
B5	Outcome 5: Connected, respected and contributing to their world	Children describe not having a voice and feeling very restricted because they are not in charge or don't get time to themselves (5.1)	Countywide	Take steps to create space for children to be heard.
		Children primarily speak positively about networks of friends, family and community. Children from Ennis and West Clare speak most positively, followed by South East and North Clare. Children East satisfied feeling they are very far from family and friends (5.2)	Countywide but children in East Clare least satisfied.	Promote the establishment of groups in East Clare.
		Better Internet and WIFI (5.2)	Countywide (particularly North and East Clare)	Support the implementation of the local development and digital strategies.
B6	Goal 1: Support Parents	Information and training about communicating with children about mental health, sexual health,	Countywide	Develop and run information and training programmes for parents on mental health, sexual

		drugs and alcohol and social media. Support parent with afterschool childcare Support parents and families experiencing parental separation	Countywide Countywide	health, drugs and alcohol and social media. Explore options for afterschool childcare Develop and support services for parents and families experiencing separation.
B7	Goal 2: Earlier intervention and prevention	Sexual health and drug and alcohol education and prevention. Bullying and Cybersafe Programmes	Countywide Countywide	Prioritise programmes on sexual health, drug and alcohol education and prevention, bullying and cyber safety.
B8	Goal 3: Listen to and involve children and young people	Children describe not having a voice or being heard.	Countywide	Explore the Lundy Model and implement participation proposals.
B9	Goal 4: Ensure quality services	Afterschool Services	Countywide	Develop quality and afterschool services.
B10	Goal 5: Strengthen Transitions	Transition from Primary to Secondary School	Countywide	Prioritise supporting the transition from primary to secondary in schools and support services.
B11	Goal 6: Cross – Government and interagency collaboration and coordination	More coordination and communication between services.	Countywide	Develop communication strategies that improve quality and pace at which children access services.

6.4. Needs Analysis for 13-18 Age Group (C)

This part specifically focuses on the 13-18 age group and presents an overview of findings and analysis of the data collected and priority themes emerging. It is presented under the following sub-headings: relevant literature; AIRO report; CYPSC consultations; and summary of findings and recommendations for 13-18 age group.

6.4.1. Relevant Literature

During review of relevant literature there was significantly more information available for this age group than the other three age categories. In particular young people of this age group have been considered and referenced in local documentation and strategies. County Clare Local Economic Community Plan (2016) states that community development work is inadequately supported and there is poor involvement of younger generations in such work. There is an over-reliance on volunteers to provide essential supports in most rural areas and this is becoming a greater challenge as the population ages. Family and community support services are lacking in some major urban and rural areas. Services that are meant to specifically address the needs of deprived spatial communities and communities of interest are inadequately targeted', (CCC, 2016, pg26). Clare Rural Development Strategy (2016) notes that 'only 26% of the county's young people (<15 Yrs.) live in rural areas', (DRCD, 2016, pg16) and that some negative dynamics of rural decline are 'the lack of suitable social, cultural and artistic opportunities, especially for young people, whose formative years have, by and large, been spent in more urban settings, that have made rural Clare unattractive', (DRCD, 2016, pg25).

The Leader Local Development Strategy (CLDC, 2016) prioritises rural youth and recognises that 'there is a lack of outdoor and indoor facilities, where young people can socialise or just hang out, resulting in poor quality opportunities for social interaction with other young people, leading to isolation. With very little to do outside of traditional music, dance and the GAA, coupled with underemployment issues, most rural communities are not meeting the needs of their youth. In addition, community groups are generally not inclusive when it comes to involving young people in 'mainstream' community activities', (CLDC, 2016, pg104). During the development of the strategy, CLDC, identified the following needs; supports for youth i.e. availability of activities and encourage volunteerism; dedicated indoor and outdoor space for young people i.e. youth quarter /, skate park, youth café, scout facilities, ball alleys, astro turf; supports for community and voluntary groups dealing with youth drug and alcohol misuse issues; encourage entrepreneurship to address underemployment of rural youth in order to keep young people in rural communities; explore cross generational collaboration initiatives and environmental projects e.g. upcycle project worked on by men's shed and youth group; support for the development of lifestyle projects for young people in rural areas such as recreational/activities (CLDC, 2016).

In particular, the local development plan prioritises youth under the Social Inclusion Action and goal seven, to build capacity for community participation and entrepreneurship. A number of the National Youth Strategy 2015-2020 objectives are relevant locally such as ensuring that young people's autonomy is supported, their active citizenship fostered and their voice strengthened through political, social and civic engagement; Young people benefit from involvement in recreational and cultural opportunities, including youth work, arts and sports; Young people are better able to participate in the labour market through enhanced employability skills that complement formal learning and training qualifications and entrepreneurship opportunities. (CLDC, 2016, pg109).

The Connecting for Life Mid-West Suicide Prevention Action Plan (2017 – 2020) highlights relevant details for young people in Clare. In Ireland the suicide rates among young males and females are

relatively high in comparison to international rates for young people. Taking males and females aged 15-19 together, the national rate in 2013 was 7.6 per 100,000 of the population, the 6th highest suicide rate across the 29 countries studied. In Ireland, in 2014, 486 suicide deaths occurred. This was almost identical to 2013 figures of 487. The number of suicides in men was 399. The greatest decrease occurred in men aged 55 to 64 and the greatest increase was among men aged 15 to 24. The average rate of suicide per 100,000 in Clare from 2012 -2014 was 15.3 and estimated for 2013 – 2015 as 15.6 in this report. This is above the national figures for 2012-2014 as 11.5 and 2013-2015 10.3. The Connecting for Life literature review identified that very little research on self-harm prevention in children and adolescents. However, presentations by age and gender in the Mid-West associated with self-harm in 2015 are <20 Male 13, Female 32. In 2015 17% of repeat presentations to hospitals were for acts of self-harm (HSE, 2017, pg19).

The action plan supports a whole school approach to mental health promotion and mentions dual diagnosis in relation to suicide prevention. Connecting for Life states that, “the use of alcohol and drugs can contribute to a person’s problems if they already have a pre-existing mental health issue, and on-going misuse can lead to the development of mental health issues. Alcohol exacerbates feelings of hopelessness and depression and can affect people’s ability to cope, manage and overcome everyday stresses and significant life events e.g. unemployment or bereavement. It can also reduce inhibitions enough for an individual to act on suicidal thoughts. There is a clear correlation between hazardous levels of alcohol consumption and psychological distress in young people, and 93% of suicides in people under 30 years of age have featured alcohol as a factor”, (HSE, 2017, pg19).

Of the seven strategic goals nationally, a number of regional actions have been identified that agencies in Clare are already involved in. For example, specific to Clare and youth such as goals two and three. Goal two aims to support local communities’ capacity to prevent and respond to suicidal behaviour and action 2.3.3.8 is specific to young people in Clare. The Dept. of Education and Skills and LCETB have committed to promote physical and mental health and wellbeing through education programmes and wellbeing initiatives, (HSE, 2017, pg42). Goal three is target approached to reduce suicidal behaviour and improve mental health among priority groups and action 3.1.6.2 is specific to young people in Clare. Clare Youth Service have committed to leading a ‘five a day’ mental wellbeing and ‘Cyber Safety’ Programme, (HSE, 2017, pg57).

At a national level the Health Lifestyles Consultation (2016) body image and media influences were identified as the main barriers to a healthy lifestyle among teenagers aged 13–17 years. These issues included the pressure to conform to a particular body image. Young people felt that the stigma attached to eating disorders made it difficult for them to discuss this problem. Exam stress and heavy study workloads were identified as contributing to sedentary and unhealthy lifestyles. Other school-related issues identified by young people include their criticisms of the teaching of social, personal and health education (SPHE) and the lack of choice in physical education, with the few alternatives to team sports it offers and its failure to cater for different interests. The How Was School Today Report (2017) also highlighted that exams are the biggest source of stress with 78% of leaving cert students and 81% of junior cert students reporting that exams make them feel stressed. This Lesbian Gay Bisexual Transgender Intersex+ (LGBTI+) National Youth Strategy report of the consultations with YOUNG PEOPLE in Ireland (2017) highlighted isolation and exclusion, where young people described difficulties in relation to coming out or living as an LGBTI+ young person. The National Youth Strategy identifies LGBT young people as a ‘specific group to be considered in the context of focused provision for young people. Specifically, the Strategy draws attention to the issue of homophobic bullying in schools and other settings, and this, together with family rejection, has been identified in research as leading to poor mental health outcomes in later life’, (DCYA, 2017, pg1).

6.4.2. AIRO Report

Population	<p>7.1% (8469) of the population in Clare were aged 13 -17 years in 2016.</p> <p>Clare had the highest proportion of 13 to 17-year olds in the Mid-West Region.</p> <p>At 6%, the LEA of Killaloe had the highest proportion of 13 to 17-year olds.</p>
Active and Healthy	<p>Young Parents Four mothers aged 10 to 17 registered in Clare in 2016. Relative to other areas Clare and Kerry had the lowest rates.</p> <p>Treatment for Substance Misuse In 2015, 12 young people were recorded as seeking treatment for substance misuse in Clare. This figure represented a rate of 4.4 per 10,000 young people aged under 18 years. This rate was below the state average of 6.8 but higher than the CHO Area 3 average of 3.1.</p> <p>Referrals to CAMHS In 2016, there were 2,081 children and young people referred to Child and Adolescent Mental Health Services (CAMHS) in CHO3. 140 were not admitted into the service in CHO 3 due to not meeting service criteria.</p> <p>Indication of needs: <i>Numbers seeking treatment for substance misuse in Clare is highest in region.</i></p> <p><i>Alternative services required for children who are referred to CAMHS but do not meet the criteria.</i></p>
Learning & Development	<p>Post Primary School Absenteeism In 2014/15, 13.6% of the students in mainstream post primary schools in Clare were absent for more than 20 days. This is below state average of 17.3% and second lowest in state.</p> <p>Progression to Third Level In 2016, the total students that sat the Leaving Certificate examination in Clare was 1,199. Of this figure, 82.5% or 989 of the students progressed to third level.</p>
Safe & Protected	<p>Garda Youth Diversion Referrals In 2015, 353 young people aged under 18 were referred to the Garda Youth Diversion scheme in Clare. This figure equates to a rate of 12.4 per 1,000 young people aged under 18. Relative to other divisions this was the third highest rate in 2016.</p> <p>Children in Care In March 2017, 26 young people aged 16 and 17 in the Mid-West ISA had a preparation for leaving care and an aftercare plan. This is only 27.4% of all in care.</p>

	<p>Direct Provision</p> <p>13 young people aged 13 – 17 years (18.3% of asylum seekers) are residing in a direct provision centre.</p> <p><i>Indication of need: All children leaving care need preparation and an aftercare plan.</i></p>
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6.4.3. CYPSC Consultations

Data relevant to the 13-18 age group was collected from focus groups with youth and parents and responses to youth, parent and service providers online surveys. During consultations youth, parents and service providers shared information on challenges for young people; issues of concern for youth and families; specific needs of targeted groups; and suggestions for services development.

During the online youth survey young people were consulted in relation to their feelings about living in County Clare in line with the five national outcome areas. An overview of findings is presented in the table below:

Active & Healthy	<p>Statement: “I feel active and healthy”</p> <p>From a county perspective, more young people responded positively (109) than negatively (63) to this statement. Shannon was the only area responding more negatively than positively.</p> <p>Overview of responses from particular areas:</p> <table> <tr> <td>Ennis</td><td>(17 Positive, 9 Negative)</td></tr> <tr> <td>Shannon</td><td>(17 Positive, 18 Negative)</td></tr> <tr> <td>West Clare</td><td>(17 Positive, 8 Negative)</td></tr> <tr> <td>North Clare</td><td>(18 Positive, 10 Negative)</td></tr> <tr> <td>South East Clare</td><td>(24 Positive, 9 Negative)</td></tr> <tr> <td>Outside Ennis</td><td>(10 Positive, 7 Negative)</td></tr> <tr> <td>East Clare</td><td>(6 Positive, 2 Negative)</td></tr> </table>	Ennis	(17 Positive, 9 Negative)	Shannon	(17 Positive, 18 Negative)	West Clare	(17 Positive, 8 Negative)	North Clare	(18 Positive, 10 Negative)	South East Clare	(24 Positive, 9 Negative)	Outside Ennis	(10 Positive, 7 Negative)	East Clare	(6 Positive, 2 Negative)
Ennis	(17 Positive, 9 Negative)														
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South East Clare	(24 Positive, 9 Negative)														
Outside Ennis	(10 Positive, 7 Negative)														
East Clare	(6 Positive, 2 Negative)														
Learning & Development	<p>Statement: “I am achieving in my learning”</p> <p>From a county perspective, more young people responded positively (116) than negatively (54) to this statement.</p> <p>Overview of responses from particular areas:</p> <table> <tr> <td>Ennis</td><td>(14 Positive, 8 Negative)</td></tr> <tr> <td>Shannon</td><td>(21 Positive, 14 Negative)</td></tr> <tr> <td>West Clare</td><td>(20 Positive, 7 Negative)</td></tr> <tr> <td>North Clare</td><td>(21 Positive, 7 Negative)</td></tr> <tr> <td>South East Clare</td><td>(23 Positive, 10 Negative)</td></tr> <tr> <td>Outside Ennis</td><td>(11 Positive, 6 Negative)</td></tr> <tr> <td>East Clare</td><td>(6 Positive, 2 Negative)</td></tr> </table>	Ennis	(14 Positive, 8 Negative)	Shannon	(21 Positive, 14 Negative)	West Clare	(20 Positive, 7 Negative)	North Clare	(21 Positive, 7 Negative)	South East Clare	(23 Positive, 10 Negative)	Outside Ennis	(11 Positive, 6 Negative)	East Clare	(6 Positive, 2 Negative)
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North Clare	(21 Positive, 7 Negative)														
South East Clare	(23 Positive, 10 Negative)														
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East Clare	(6 Positive, 2 Negative)														

Safe and Protected	<p>Statement: “I feel safe and protected from harm”</p> <p>From a county perspective, more young people responded positively (91) than negatively (83) to this statement. However, Shannon and West Clare responded more negatively than positively.</p> <p>Overview of responses from particular areas:</p> <table> <tr><td>Ennis</td><td>(14 Positive, 12 Negative)</td></tr> <tr><td>Shannon</td><td>(16 Positive, 19 Negative)</td></tr> <tr><td>West Clare</td><td>(13 Positive, 14 Negative)</td></tr> <tr><td>North Clare</td><td>(16 Positive, 12 Negative)</td></tr> <tr><td>South East Clare</td><td>(20 Positive, 13 Negative)</td></tr> <tr><td>Outside Ennis</td><td>(7 Positive, 10 Negative)</td></tr> <tr><td>East Clare</td><td>(5 Positive, 3 Negative)</td></tr> </table>	Ennis	(14 Positive, 12 Negative)	Shannon	(16 Positive, 19 Negative)	West Clare	(13 Positive, 14 Negative)	North Clare	(16 Positive, 12 Negative)	South East Clare	(20 Positive, 13 Negative)	Outside Ennis	(7 Positive, 10 Negative)	East Clare	(5 Positive, 3 Negative)
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South East Clare	(20 Positive, 13 Negative)														
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Economic Security	<p>Statement: “I feel financially secure and there are opportunities for me”</p> <p>From a county perspective, more young people responded positively (103) than negatively (69) to this statement. Outside Ennis only area that responded more negatively than positively.</p> <p>Overview of responses from particular areas:</p> <table> <tr><td>Ennis</td><td>(16 Positive, 10 Negative)</td></tr> <tr><td>Shannon</td><td>(19 Positive, 14 Negative)</td></tr> <tr><td>West Clare</td><td>(19 Positive, 8 Negative)</td></tr> <tr><td>North Clare</td><td>(15 Positive, 13 Negative)</td></tr> <tr><td>South East Clare</td><td>(22 Positive, 11 Negative)</td></tr> <tr><td>Outside Ennis</td><td>(6 Positive, 11 Negative)</td></tr> <tr><td>East Clare</td><td>(6 Positive, 2 Negative)</td></tr> </table>	Ennis	(16 Positive, 10 Negative)	Shannon	(19 Positive, 14 Negative)	West Clare	(19 Positive, 8 Negative)	North Clare	(15 Positive, 13 Negative)	South East Clare	(22 Positive, 11 Negative)	Outside Ennis	(6 Positive, 11 Negative)	East Clare	(6 Positive, 2 Negative)
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Connected and Respected	<p>Statement: “I feel connected and respected in my community”</p> <p>From a county perspective, more young people responded positively (111) than negatively (65) to this statement. East Clare responses were equally positive and negative.</p> <p>Overview of responses from particular areas:</p> <table> <tr><td>Ennis</td><td>(17 Positive, 9 Negative)</td></tr> <tr><td>Shannon</td><td>(22 Positive, 13 Negative)</td></tr> <tr><td>West Clare</td><td>(20 Positive, 8 Negative)</td></tr> <tr><td>North Clare</td><td>(17 Positive, 12 Negative)</td></tr> <tr><td>South East Clare</td><td>(23 Positive, 10 Negative)</td></tr> <tr><td>Outside Ennis</td><td>(8 Positive, 9 Negative)</td></tr> <tr><td>East Clare</td><td>(4 Positive, 4 Negative)</td></tr> </table>	Ennis	(17 Positive, 9 Negative)	Shannon	(22 Positive, 13 Negative)	West Clare	(20 Positive, 8 Negative)	North Clare	(17 Positive, 12 Negative)	South East Clare	(23 Positive, 10 Negative)	Outside Ennis	(8 Positive, 9 Negative)	East Clare	(4 Positive, 4 Negative)
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Therefore, the majority of responses to self-rating statements indicate that young people feel positive about living in County Clare.

Challenges for young people

In identifying challenges for young people in County Clare there is consistency in the feedback from young people, parents and services providers and common themes emerge. All stakeholders highlight concerns about lack of mental health services, service waiting lists and limited youth spaces and/or projects as challenging.

Issues of concern for youth and families

There is consistency from parents throughout the county that the issue of drugs is a main concern for their children. Abuse, depression, peer pressure and violence are also priority issues. The transitions from primary to secondary school and then secondary school to further education or training are a concern and challenge for young people in this age category. Young people prioritise mental health, drug and alcohol use, social media obsession/addiction, school pressures, lack of facilities and transport as key issues.

Specific needs of targeted groups

The Ennis Schools Completion Programme End of Year Review 2014/2015 highlighted areas of difficulties for youth. In particular, the retention of traveller students beyond junior cycle and the retention of male traveller students in Junior cycle. Parents also described school placements in secondary school as a particular challenge. A number of service providers highlighted the needs of Children in Care in particular those 16-18 who may be coming into or leaving care and options available.

Suggestions for Service Development

The priority suggestions for service development for young people are in the areas of mental health; drugs and alcohol education, prevention and support; sexual health; and youth friendly spaces and activities.

Examples of quotations from the consultations that demonstrate these findings are as follows;

“Provide youth cafes or youth clubs, areas where young people can hang out and meet new people without use of alcohol, only way to meet people is to go out” (Youth)

“There should be more support for young people with mental health problems and addictions” (Youth)

“More free support for people having difficulties. I also think school doesn’t focus enough on the mental health of young people” (Youth)

“There could be more after school clubs and classes to educate parents on how to communicate with their children properly rather than shout at their children when they talk about their problems” (Youth)

“I think that there is a lack of centres or clubs for 16-18-year-old as the youth clubs are more for younger years and between these years you are too young to go out etc.” (Youth)

“Much more transport needed for youth living in rural towns” (Youth)

“They can modernise facilities for 14 to 18 there is very little where young people can go socially, a swimming pool and sport park even for those that are not competitive” (Youth)

“School placements in particular secondary school: either parents don’t understand the application process or it is seen that certain schools in the town have a bias against accepting Traveller children” (Parent)

"I live in a small village outside Ennis but apart from GAA there is no outlet for teenagers. A youth club in the parish for teenagers to meet and socialise" (Parent)

"Services where teenagers can talk to professional people about further education and life in general" (Parent)

"More youth workers and places for young people to hang out. More workers needed to provide services for example to TY students re sexual education and addiction" (Service Provider)

"There is none or very little support for young people from ages 13 to 17yrs. Whether it be summer camps, youth clubs etc." (Service Provider)

"Mental health care for teenagers and especially dual diagnosis i.e. mental health and drug addiction. Teenagers then fall between two providers and are not being cared for" (Service Provider)

"Inadequate mental health and drugs rehabilitation support for young people aged 16 to 18 years" (Service Provider)

"Additional investment in alcohol and drugs education and prevention for under 21's would be of real value especially in more rural areas" (Service Provider)

"A growing Drug and Alcohol culture has negative implications for the communities and the services in the area will need further funding to target most affected" (Service Provider)

"More youth clubs for the teenagers or some meeting point with activities" (Service Provider)

"Children in care with no allocated Social Worker. No alternative placements for teenagers 16 years and over coming into care - they do not want to go into foster families" (Service Provider)

6.4.4. Summary of Findings and Recommendations for 13 – 18 Age Group

Ref	BOBF	Priority Needs/Service Provision	Geographic Area	Recommendations
C1	Outcome 1: Active & Healthy	Drug and Alcohol Education, Prevention and Support (1.1)	Countywide	Develop services and invest resources in drug and alcohol education, prevention and support.
		Youth Mental Health priority concern for all stakeholders.	Countywide	Address access to assessment and treatment and long waiting lists. Support suicide prevention, social media
		Indoor and outdoor spaces and places to meet friends.	Countywide	obsession/addiction interventions. Create youth friendly spaces and youth clubs for 16-18-year olds.

C2	Outcome 2: Achieving in Learning & Development	School pressure in relation to exams, subjects, relationships with teachers and peers and lack of mental health support (2.2). Challenges finding school placements (2.4)	Countywide Countywide	Support social and emotional wellbeing initiatives in schools. Review of Secondary School provision as school placement issues are expected to rise due to large population of 5-12-year olds.
C3	Outcome 3: Safe and Protected from Harm	Youth Homelessness (3.1) Bullying in school, community and online.	Countrywide No female hostel in Ennis Countywide	Allocate resources to support services for homeless youth. Support and establish anti bullying and cyber safety initiatives.
C4	Outcome 4: Economic Security and Opportunity	Transport and lack of buses, footpaths and cycle lanes limit young people's ability to access opportunities (4.1/4.3). Lack of affordable and suitable spaces/places for young people to meet, socialise and hang out (4.2) Lack of opportunity to gain work experience (4.3/4.4)	Countywide Countywide Countywide	Create innovative solutions to address rural transport issues in line with the County Development Plan. Explore alternative options for making affordable and suitable spaces available to young people. Develop initiative that support young people to gain work experience.
C5	Outcome 5: Connected, respected and contributing to their world	Negative misperceptions of young people by adults in the community (5.1) Young people from urban areas speak more negatively about their community than those from more rural areas (5.2).	Countywide Countywide	Involve young people in community initiatives that challenge misperceptions and promote positive experiences for young people.
C6	Goal 1: Support Parents	Lack of Information and training for parents communicating with young people about mental health, sexual health, drugs and	Countywide	Develop information and training supports for parents communicating with young people about mental health, sexual health, drugs and alcohol and social media.

		alcohol and social media.		
C7	Goal 2: Earlier intervention and prevention	Mental Health Drugs and Alcohol Education and Prevention	Countywide	Earlier intervention for mental health, drugs and alcohol education and prevention.
C8	Goal 3: Listen to and involve children and young people	Lack of youth space and misperceptions	Countywide	Explore the Lundy Model and implement participation proposals.
C9	Goal 4: Ensure quality services	Space for young people to meet friends, socialise and participate in activities	Countywide Especially rural areas	Create youth friendly spaces and services.
C10	Goal 5: Strengthen Transitions	Transition from Secondary School to further education/training and/or employment	Countywide	Develop services to support the transition from Secondary School to further education/training and/or employment
C11	Goal 6: Cross – Government and interagency collaboration and coordination	Collaboration for young people with dual diagnosis e.g. mental health and drugs and alcohol misuse.	Countywide	Establish a way to support young people with dual diagnosis e.g. mental health and drugs and alcohol misuse so that they are not unable to access any service.

6.5. Needs Analysis for 19-24 Age Group (D)

This part specifically focuses on the 19-24 age group and presents an overview of findings and analysis of the data collected and priority themes emerging. It is presented under the following sub-headings: relevant literature; AIRO report; CYPSC consultations; and summary of findings and recommendations for 19-24 age group.

6.5.1. Relevant Literature

There are some literature relating to youth mentioned in the last section that may also be relevant to young people of this age group. Overall, specific literature for this age group is limited. However, locally young people of this age group are prioritised in terms of supporting further education and employment. The Local Economic and Community Plan (2016) highlight that while Mid and South Clare populations have grown, there has been a particular out – migrations of young people (15 -34 years) from other areas such as North, Mid-West and South-West Clare and parts of North-East Clare. ‘There was a distinct employment imbalance in the county. Jobs were heavily concentrated in Mid and South Clare. Outside these parts of the county, local resources, both natural and built as well as locally-relevant social capital, provided potential for small-scale enterprise and employment, especially in North, Mid-West, South-West and North-East Clare, where at the moment there were only small clusters of non-agricultural employment in towns and villages’, (DRCD, 2016 pg28)

County Clare LECP (2016) ‘The increasing retention within education means that rural young people move to major urban centres and seldom return in the same numbers that leave. This net out-migration is due to poor employment opportunities and poor quality of life experiences. In addition to advancing educational standards across the county for those in second and third level, there was a specific need to extend further and higher education to the entire population in a creative and accessible manner’, (DRCD, 2016, pg29)

Clare Rural Development Strategy (2016) states that, ‘our young people often lack employment opportunities that are compatible with their education and aspirations and when combined with long commutes to work, the attractiveness of rural living is diminished’, (CCC, 2016 pg7) and the ‘lack of family supports resulting in the out-migration pressures on the working age population’, (CCC, 2016 pg22)

As mentioned in the youth section, Connecting for Life Suicide Prevention Action Plan highlights dual diagnosis and that “there is a clear correlation between hazardous levels of alcohol consumption and psychological distress in young people, and 93% of suicides in people under 30 years of age have featured alcohol as a factor”, (HSE, 2017 pg19).

6.5.2. AIRO Report

Population	7.2% (8,610) of the population in Clare were aged 18 to 24 years in 2016. Clare had the lowest proportion of 18 to 24-year olds in the Mid-West Region. At 8.4%, the LEA of Shannon had the highest proportion of 18 to 24-year olds.
Active and Healthy	Mental Health Self- Harm figures for males (79.5) and females (162.3) under 24 years are well below the State averages of males (161.6) and females (253.2).

Safe & Protected	<p>Aftercare As of March 2017, there were 72 young adults aged 18 to 20 years in the Tusla aftercare service in the Mid-West ISA availing of full time education.</p> <p>Direct Provision 25 young adults aged 18 – 24 years (36.6% of asylum seekers) are residing in a direct provision centre.</p> <p><i>Indication of need: high proportion of asylum seekers of this age group living in direct provision and may require additional supports.</i></p>
Economic Security	<p>Housing In 2016, there were 179 young people under the age of 25 on the social housing waiting list in Clare. This figure represented a rate of 20.8 per 1,000 young people under the age of 25. It was the eight highest in the state.</p> <p>Youth Unemployment Lower proportion of younger working age cohort (20-29) in Clare compared to the state.</p> <p>As of July 2017, there were 697 young people (under 25 years) on the Live Register in Clare. This figure represents approximately 6.2% of the total live register recipients in the area. The majority of these young people are recipients at Ennis (20.5%) SWO and Tulla (11.2%) SWO with a lower number in Ennistymon (8.2%) SWO and Kilrush (4.9%) SWO.</p> <p><i>Indication of need: develop employment opportunities in Ennis and Tulla.</i></p>

6.5.3. CYPSC Consultations

Data relevant to the 19-24 age group was collected from responses to youth, parent and service providers online surveys. During consultations youth, parents and service providers shared information on challenges for young adults; specific needs of targeted groups; and suggestions for services development.

Challenges and Issues for Young Adults

Similar to other age groups there is consistency in feedback from various stakeholders highlighting common issues for young adults. Service providers shared the most detail about the needs of young people in this age category. The main challenges are transitioning from secondary school to further education and employment and housing and homelessness. Key issues are mental health, drug and alcohol use and transport.

Specific Needs of Targeted Groups

A service provider highlighted that there is no dedicated service for children with disabilities once they turn 18 and that primary care may not be able to provide all services required.

Suggestions for Service Development

Service providers were able to identify the most gaps in services or areas in need of further development.

Examples of quotations from the consultations that demonstrate these findings are as follows;

“Our organisation are actively involved in a range of initiatives supporting mental well-being for 12 to 25 years olds however there are insufficient resources to roll this out across the county” (Service Provider)

“Mental health service provision is sub-standard. Young people with mental health issues, combined with drugs issues are being put at risk as the mental health services will not deal with them while they use. This is despite them often relying on drugs to cope as they have not got the mental capacity to really help themselves, i.e. they are not mentally capable of making the decision to participate in rehab programmes, and so are left to literally ramble the streets, at times ending up homeless as their families cannot manage them, as professionals can” (Service Provider)

“Additional investment in alcohol and drugs education and prevention for under 21's would be of real value especially in more rural areas” (Service Provider)

“A growing Drug and Alcohol culture has negative implications for the communities and the services in the area will need further funding to target most affected” (Service Provider)

“Affordable transport for 14-20+ year olds” (Service Provider)

“A lack of a transport network many young adults are left with no option but to go on social welfare” (Service Provider)

“18-21-year olds very few local/rural training or education opportunities” (Service Provider)

“For the 18-21-year-old there is a distinct lack of housing” (Service Provider)

“lack of a female homeless centre/house in Ennis is a disgrace” (Service Provider)

6.5.4. Summary of Findings and Recommendations for 19 -24 Age Group

Ref	BOBF	Priority Needs/Service Provision	Geographic Area	Recommendations
D1	Outcome 1: Active & Healthy	Drug and Alcohol Education, Prevention and Support (1.1)	Countywide	Develop services and invest resources in drug and alcohol education, prevention and support.
		Disability Services 18+ (1.1)	Countywide	Review provision of disability services for those over 18 years.
		Mental Health Services. Access, assessment and treatment (1.2)	Countywide	Address access to assessment and treatment and long waiting lists in Mental Health Services.

				Support suicide prevention, social media obsession/addiction interventions.
D2	Outcome 2: Achieving in Learning & Development	Lack of educational and training opportunities after school (2.4)	Countywide	Expand third level educational and training opportunities.
D3	Outcome 3: Safe and Protected from Harm	Housing and homelessness (3.1)	Countywide	Identify and support housing supports for young adults and review emergency accommodation provision in the county.
D4	Outcome 4: Economic Security and Opportunity	Lack of employment opportunities (4.4)	Countywide	Support the provision of employment opportunities and promote entrepreneurship with Young Adults.
D5	Outcome 5: Connected, respected and contributing to their world	Out-migration from rural to urban areas	Countywide	Promote employment and entrepreneurship to attract young adults back to rural areas.
D6	Goal 1: Support Parents			
D7	Goal 2: Earlier intervention and prevention	Further education and training.	Countywide	Prioritise supporting young adults leaving school to access further education and training opportunities
D8	Goal 3: Listen to and involve children and young people	Limited data		Limited data
D9	Goal 4: Ensure quality services	Access to services	Rural Areas	Improve transport options
D10	Goal 5: Strengthen Transitions	Secondary School to further education or training	Countywide	Prioritise supporting those who do not migrate to go straight to college
D11	Goal 6: Cross – Government and interagency collaboration and coordination	Collaboration for young people with dual diagnosis e.g. mental health and drugs and alcohol misuse.	Countywide	Establish a way to support young adults with dual diagnosis e.g. mental health and drugs and alcohol misuse so that they are not unable to access any service.

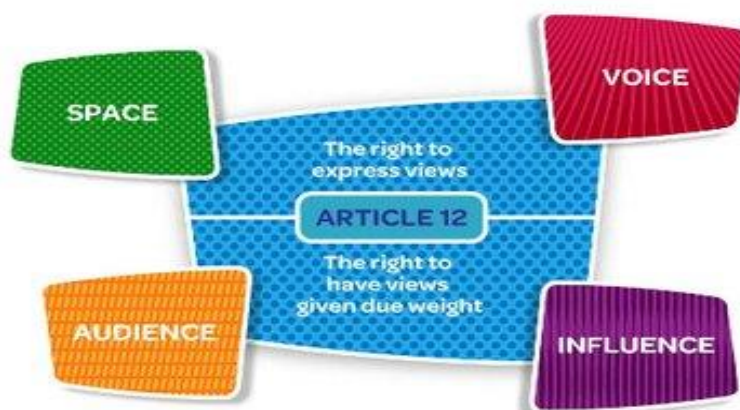
7. Proposals to Enhance Rural Youth Capacity Building & Participation

7.1. Strategic Background to Participation

Children and young people have a right to participate in decisions that affect their lives as is stated in Article 12 of the UN Convention on the Rights of the Child (UNCRC). This article highlights a commitment to ensuring that the voices of children and young people are heard and that their opinions are given due weight in matters that affect them. In support of this, listening to and involving children and young people is a transformational goal of Better Outcomes, Brighter Futures.

At a National level, the Department of Children and Youth Affairs is driving the child and youth participation agenda that is being adopted across all sectors. In the first National Strategy on Children and Young People's Participation in Decision Making (2015-2020), the DCYA committed to the establishment of a national Hub to support implementation of the Strategy. The hub aims to be a national centre of excellence through the provision of information, training and advice for Government departments and agencies and the non-statutory sector. The hub has also established a database with a comprehensive collection of national and international good practice, policy, legal and academic publications, reports and resources on children and young people's participation in decision-making. This is a valuable resource for implementation of the strategy.

While there are numerous models of participation, the National Strategy in Ireland is underpinned by Lundy's Model of Participation which emphasises elements of space, voice, audience and influence as being important to support children and young people to participate in meaningful ways.



This model provides a way of conceptualising Article 12 of the UNCRC which is intended to focus decision-makers on the distinct, albeit interrelated, elements of the provision. The four elements have a rational chronological order:

- **SPACE:** Children must be given safe, inclusive opportunities to form and express their view.
- **VOICE:** Children must be facilitated to express their view.
- **AUDIENCE:** The view must be listened to.
- **INFLUENCE:** The view must be acted upon, as appropriate.

(Image: Professor Laura Lundy referenced in Department of Children and Youth Affairs (2015), National Strategy on Children and Young People's Participation in Decision-Making 2015-2020, Dublin: Government Press)

Chapter three of the strategy details the model and checklist which provides questions to reflect on when facilitating the participation of children and young people. See overview in table below:

<p>SPACE</p> <p>HOW: Provide a safe and inclusive space for children to express their views</p> <ul style="list-style-type: none"> - Have children's views been actively sought? - Was there a safe space in which children can express themselves freely? - Have steps been taken to ensure that all children can take part? 	<p>VOICE</p> <p>HOW: Provide appropriate information and facilitate the expression of children's views</p> <ul style="list-style-type: none"> - Have children been given the information they need to form a view? - Do children know that they do not have to take part? - Have children been given a range of options as to how they might choose to express themselves?
<p>AUDIENCE</p> <p>HOW: Ensure that children's views are communicated to someone with the responsibility to listen</p> <ul style="list-style-type: none"> - Is there a process for communicating children's views? - Do children know who their views are being communicated to? - Does that person/body have the power to make decisions? 	<p>INFLUENCE</p> <p>HOW: Ensure that children's views are taken seriously and acted upon, where appropriate</p> <ul style="list-style-type: none"> - Were the children's views considered by those with the power to effect change? - Are there procedures in place that ensure that the children's views have been taken seriously? - Have the children and young people been provided with feedback explaining the reasons for decisions taken?

(DCYA, 2014)

The National Youth Strategy 2015 -2020 is another complementary strategy developed in conjunction with Better Outcomes Brighter Futures that focuses on individuals aged 10 to 24 years. This strategy references the EU Strategy for Youth – Investing and Empowering: a renewed open method of coordination to address youth challenges and opportunities, which acknowledges that young people are one of the most vulnerable groups in society, especially in the economic and financial crisis, while at the same time they are a precious resource.

7.2. Existing Participation Structures in Clare

At a local level there is commitment to enhance rural youth capacity building actions in order to enhance participatory practices. The Clare Local Development Strategy includes social inclusion and rural youth in its action plan. In particular, local objective 7 'build capacity for community participation and entrepreneurship', (CLDC, 2016) prioritises this. The County Clare Local Economic and Community Plan (2016) states that a community development approach 'is centred on a series of principles that seek to go beyond consultation to participation and beyond capacity building to consciousness raising and empowerment', (Clare County Council, 2016, pg8). It also emphasises an aim to 'support young people (<18yrs) and young adults (18 -25 yrs.) in the county to live as valued members of the community, recognising their contribution, heeding their particular needs and supporting their right to have a say in decisions affecting them', (Clare County Council, 2016, pg42).

This can be supported by working collaboratively with those who have developed resources and materials in line with National Strategies promoting child and youth participation. Throughout the country the Children and Young People's Services Committees are encouraging this. Tusla's participation toolkit (2016) and Youth Work Ireland's Participation Strategy (2015), are two examples of how agencies can explore what it means for a particular agency or group to implement the four components of Lundy's model, space, voice, audience influence. In particular, the A-Z of Participatory Methods in the final section of Tusla's Child and Youth Participation Toolkit outlines the features of various participatory methods that are transferrable to partner organisations. In addition, Investing in Children have been working with Prevention, Partnership and Family Support to develop a Quality Assurance process across TUSLA in relation to participation. In 2017, they recorded the Clarecare Springboard project as an example. The Springboard 2017 summer camp programme was entirely created from the collectively agreed choices of the young people involved in the planning process. The Mid West Youth Participation Project also began a process which is ongoing utilising the agenda day methodology to engage with young people who had direct experience of Tusla services and Tusla funded services.

7.3. Observations from CYPSC Consultations

The CYPSC consultations with stakeholders also gathered local perspectives on current levels of participation and suggestions for enhancing the experience of children and young people.

7.3.1. Children's Data and Participation Comments

In the children's data from the 5 to 12 age group it is observed that voice is the main aspect of participation that is commented on. Children describe feeling unheard and frustrated about not being in charge or being unable to do certain things due to the age restrictions of being a child. Examples are demonstrated in the following quotes; "no one listen to you" (girl 10); "worst thing children are weaker than parents" (boy 8); and "parents can sometimes be over protective – more rights for children" (boy 9).

Suggestions for improving their participation are to listen, provide more time or space for themselves and to let them influence decisions that their school or the council make. This is demonstrated in the following quotes; "to be a day when children could always be treated like an adult for one day" (girl 11); "to have their own time to themselves" (boy 9); "not being able to have a voice. Let children voice decisions concerning them that the council make" (boy 11); and "get to pick where they went for their school tour" (boy 10).

7.3.2. Young People's Data and Participation Comments

In the young people's data for the 13 – 18 age group it is observed that space is the main aspect of participation that is commented on. They describe Clare as lacking in youth friendly spaces where there can meet, socialise with friends and get involved in activities. This is demonstrated in the following quotes; "for 14 to 18 there is very little where young people can go socially"; "I think that there is a lack of centres or clubs for 16-18-year-old as the youth clubs are more for younger years and between these years you are too young to go out etc"; and "there's not many places or youth friendly things on and if there is it mainly on in big areas". There were also positive comments about living in Clare and one young person commented that, "Young people are made more involved in their communities" which indicates that this person feels positive about his/her level of participation.

Suggestions for improving participation are to provide more youth friendly spaces and youth clubs that are both in urban and rural areas. Examples demonstrating this are; "provide youth cafes or youth clubs, areas where young people can hang out and meet new people without use of alcohol, only way to meet new people is to go out"; and "there could be more teen friendly facilities".

7.3.3. Service Providers Data and Participation Comments

Current ways in which service providers indicate that young people participate show that there are examples across the four components of the Lundy model. The four components are interlinked and do not operate in isolation. However, some services may be stronger on some aspects than others.

Service providers were asked in the online survey to comment on how they invite young people to evaluate their services and to provide examples. The most popular response by service providers about how young people participate was in end of programme evaluations or annual feedback sessions. An interpretation of the examples provided are presented in the table below;

SPACE	
Youth Forum (EPIC)	Collective fora for young people in care or leaving care to participate
Youth Facilitation at Agenda Days	TUSLA is planning Agenda Days with young people and training facilitators to involve young people in Agenda Days
Youth Research	Gathering data and surveying peers
Consultations with Stakeholders	Organisations seeking consultations with youth, parents, teachers and other service providers
Work Experience	TY students participating in work experience
VOICE	
Younger Voices	CYS youth group representing and promoting the Youth Voice
Youth Representation	Comhairle na nOg - Representing youth at local, regional and national levels
Providing Information	Sharing information and discussing policies with young people
AUDIENCE	
Feedback	Through questionnaires, evaluations and conversations
Surveys	Youth Information Surveys
Interviews	External evaluations sometimes involve interviews with youths e.g. HIQA
Monthly Meeting	Reviewing with Young Person if service is meeting their needs
INFLUENCE	
Board Membership	Youth members on Boards of Management/Committees e.g. LCETB
Programme Design	Contributing ideas during design of programme Identifying gaps in programmes and proposing responses Planning how programme is implemented Feedback after each session
Annual planning	Seeking youth involvement at planning stages
Recording Opinions	Youth opinions recorded in files, assessments and reports by people working directly with young people
Preschool and Afterschool Curriculum Planning	Involve children in decision making about curriculum and settings. Have group discussions at circle time on the children's likes and interests and record observations. Children in preschool are involved in choosing activities and how timetable is organised Children in particular in ECCE are invited to choose activities and express how they feel about their surroundings and activities.

7.3.4. All Ireland Research Observatory (AIRO) Example

During a presentation by AIRO to the CYPSC in Clare they mentioned an example of a youth participation project with transition year students called 'AIRO Transition Year (TY) Data for Decisions', which involves a half a day at Maynooth University and a 6-8 weeks mapping module in school. Colaiste Mhuire in Ennis is one of the pilot sites for this project and it is intended to be launched in September 2018.

7.4. Proposals to Enhance Rural Youth Capacity Building and Participation

Overall, rural youth capacity building and participation can be enhanced by actions that work towards creating space, voice, audience and influence in Co. Clare. An aim of this study was to develop a set of proposals to enhance participatory practices which are presented as seven proposals below;

1. Contact the Participation Hub at the Department of Children and Youth Affairs (DCYA) and explore options for training support and resources to build capacity locally.
2. Practice new methodologies to enhance participation quality and experiences. Refer to Tusla's Participation Toolkit for suggestions in the A-Z of Participatory Methods ([http://www.tusla.ie/uploads/content/Tusla - Toolkit \(web version\).pdf](http://www.tusla.ie/uploads/content/Tusla_-_Toolkit_(web_version).pdf)).
3. Work collaboratively to adhere to commitments and achieve actions identified in existing plans locally that prioritise youth participation and empowerment.
4. Review your agencies or organisations current levels of participatory practice in line with the four components of the Lundy model to assess and identify areas that require strengthening.
5. Identify actions that will enhance 'voice' for 5-12-year olds and 'space' for 13 -18-year olds as was highlighted during CYPSC consultations.
6. Make a conscious shift from consultation to empowerment and ensure that actions prioritise a responsive 'audience' and evidence of 'influence'.
7. Allocate resources to support youth participation and leadership initiatives.

8. Recommendations to Inform Service & Development Planning

Ref	BOBF	Priority Recommendations (0-24 years)
R1	Outcome 1: Active & Healthy	<ul style="list-style-type: none"> ➤ Increase the provision of parental support services and groups, especially for parents of 0-4 years. ➤ Develop and resource mental health services and provision by improving access to assessment and treatment across all age groups but in particular 12-24 years. Priority areas are suicide prevention and social media obsession/addiction. ➤ Develop and resource services in drug and alcohol education, prevention and support. Early Intervention with under 12's and more support services for 12 -24 years. ➤ Support the establishment of afterschool activities and clubs for 5-12 years and youth friendly spaces and clubs for 16 -18 years.
R2	Outcome 2: Achieving in Learning & Development	<ul style="list-style-type: none"> ➤ Increase the number of childcare places in the county and encourage the establishment of more private and community childcare facilities. ➤ Support educational transitions, especially from primary to secondary school and secondary to further education or training. Prioritise social and emotional wellbeing initiatives in schools. ➤ Review special needs service provision and address the lack of services outside of Ennis. ➤ Review Secondary School provision as school placement issues exist and are expected to rise due to the large population of 5 -12 years. ➤ Explore innovative education and training opportunities that will support rural entrepreneurship.
R3	Outcome 3: Safe and Protected from Harm	<ul style="list-style-type: none"> ➤ Expand Family Support Services throughout the county. ➤ Resource support services for homeless youth (12 -18 years) and housing for young adults (19 -24 years). Review emergency accommodation provision in Clare. ➤ Support and establish anti bullying and cyber safety initiatives for 5 to 18 years. ➤ Support young people leaving care and into aftercare services (15-24).

R4	Outcome 4: Economic Security and Opportunity	<ul style="list-style-type: none"> ➤ Identify supports and information that can be provided to parents in relation to managing finances and accessing childcare. ➤ Diversify indoor and outdoor facilities and activities available to children and youth (0-24 years). ➤ Create innovative solutions to address rural transport and access issues in line with the County Development Plan. ➤ Support the provision of employment opportunities and promote entrepreneurship with Young Adults (18-24 years).
R5	Outcome 5: Connected, respected and contributing to their world	<ul style="list-style-type: none"> ➤ Identify and support the establishments of alternative play (0-12 years) and youth friendly spaces (12- 18) in the community. ➤ Improve internet access and support local digital strategies. ➤ Promote community groups/activities in East Clare for 5-12 years and urban areas for 12 -18 years. ➤ Promote and establish employment and entrepreneurship to attract young adults back to living in the Clare (18-24 years).
R6	Goal 1: Support Parents	<ul style="list-style-type: none"> ➤ Increase family and parental supports pre and post-natal. Support the provision of access to mental health care, creative therapies and informal social support. Support those who struggling with financial security, separation or experiencing domestic violence in the home. ➤ Develop and run information and training programmes on mental health, sexual health, drugs and alcohol, and social media for parents. ➤ Support parents with afterschool care and activities.
R7	Goal 2: Earlier intervention and prevention	<ul style="list-style-type: none"> ➤ Encourage parents to access antenatal, breastfeeding and parental supports. ➤ Programmes for children and youth on mental health, sexual health, drugs and alcohol and cyber safety. ➤ Support young adults as leaving school to access further education or training options.

R8	Goal 3: Listen to and involve children and young people	<p>Explore the Lundy Model and take steps to implement proposals to enhance rural capacity building and participation such as;</p> <ul style="list-style-type: none"> ➤ Contact the Participation Hub at the Department of Children and Youth Affairs (DCYA) and explore options for training support and resources to build capacity locally. ➤ Practice new methodologies to enhance participation quality and experiences. Refer to Tusla's Participation Toolkit for suggestions in the A-Z of Participatory Methods (http://www.tusla.ie/uploads/content/Tusla_-_Toolkit_(web_version).pdf). ➤ Work collaboratively to adhere to commitments and achieve actions identified in existing plans locally that prioritise youth participation and empowerment. ➤ Review your agencies or organisations current levels of participatory practice in line with the four components of the Lundy model to assess and identify areas that require strengthening. ➤ Identify actions that will enhance 'voice' for 5-12-year olds and 'space' for 13 -18-year olds as was highlighted during CYPSC consultations. ➤ Make a conscious shift from consultation to empowerment and ensure that actions prioritise a responsive 'audience' and evidence of 'influence'. ➤ Allocate resources to support youth participation and leadership initiatives.
R9	Goal 4: Ensure quality services	<ul style="list-style-type: none"> ➤ Review and establish if the Hardiker model is the most suitable and relevant model of assessing need and service provision when working collaboratively in Co. Clare. ➤ Conduct a more detailed assessment of service provision in East and North Clare as those who participated in the mapping exercise identified the least amount of services in these areas. ➤ Identify actions to overcome access to services challenges due to waiting lists, rural isolation and transport. ➤ Review service provision needs in Shannon and South East Clare as Shannon had the highest population growth in last census and South East Clare has highest projected growth. ➤ Allocate appropriate funding to resource staff and services.

R10	Goal 5: Strengthen Transitions	<ul style="list-style-type: none"> ➤ Preschool to Primary School ➤ Primary to Secondary School ➤ Secondary School to Further Education, Training or Employment.
R11	Goal 6: Cross – Government and interagency collaboration and coordination	<ul style="list-style-type: none"> ➤ Improve coordination and communication between services to reduce delays in children, young people or families accessing services. ➤ Establish a way to support youth and young adults (13-24 years) with a dual diagnosis. E.g. Mental Health and Drug & Alcohol Misuse.

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