Athlone Institute of Technology

Reporting in Practice: A study on childcare practitioners views towards the introduction of mandatory reporting of children at risk

Ann Kenny

MA in Child and Youth Studies

2016

Athlone Institute of Technology

Reporting in Practice: A study on childcare practitioners views towards the introduction of mandatory reporting of children at risk

Ann Kenny

MA in Child and Youth Studies

2016

Submitted in part fulfilment of the Master of Arts in Child and Youth Studies, Athlone Institute of Technology

27th May 2016

Word count: 13,984

Declaration

I declare that this dissertation and the research involved in it are entirely the
work of the author. This work, or part of it, has not been submitted for a
qualification to any other institute or university.
Signature:
Ann Kenny

Acknowledgements

First I would like to thank Karen Leonard my dissertation supervisor and lecturer for all the clear academic guidance and assistants she generously provided me with.

I am particularly grateful to all the interviewees who gave up their time, providing interesting and enlightening information which shaped the discussion for the study.

I would like to further express my gratitude to my lecturers Dr. Sheila McGree, Dr. Ashling Jackson, Dr. Margaret O'Keeffe, Teresa Brown and Mary Corrigon in preparing me to carry out the research.

I wish to give a special thank you to my family who have been extremely patient throughout the duration of my course of study.

Lastly, I would like to thank my good friend Bridget Carey for her continues encouragement and support.

Table of contents

	PAGE
ABSTRACT	1
LITERATURE REVIEW	4
METHOD	15
RESULTS	22
DISCUSSSION	36
REFERENCES	51
APPENDIX	60

Abstract

Abstract

It is now a legal requirement in Ireland under the Children First Act (2015) for all those coming into contact with children through their work to report cases of suspected child abuse or neglect. However, for quite some time the literature has illustrated complex issues surrounding the reporting of concerns of child maltreatment (Stanley & Goddard 2002; Horwath, 2007; Brandon, Belderson, Warren, Howe, Gardner, Dodsworth &Black, 2008; Ferguson, 2011; Buckley, 2014; NSPCC, 2014).

The current study expands and contributes updated information on previous research surrounding the reporting of child abuse. Moreover, it was the first study of this topic to be conducted since the introduction of mandatory reporting in Ireland. The aim of the study was to explore the views of childcare practitioners within the setting of an Afterschool Project regarding the introduction of mandatory reporting of child abuse and neglect. The practitioners were chosen in this setting as they have a lot of daily contact with the children using their service.

To fulfil the main goal of the research three objectives were considered. Firstly, to find out the views of practitioners in relation to mandatory reporting of children considered to be risk. Next to explore how equipped practitioners felt in relation to reporting suspected cases of child maltreatment. Finally, the practitioners were asked to recommend ways they could be assisted regarding the process of mandatory reporting in their work contents.

The research instrument chosen to conduct the investigation was a qualitative method using semi-structured interviews, focusing on a small cohort of six practitioners. The interviews took place between the 15th and 19th of April 2016. Followed by an examination of the data using a thematic analysis to organise and give structure to the findings.

The findings were consistent with previous research highlighting complex issues and fears surrounding the reporting of child abuse. The main findings showed practitioners had all received training required for reporting concern of child abuse

which is covered in the Children First Guidelines (Department of Children and Youth Affairs, 2011) (DCYA). However, the practitioners believed they would benefit from taking a refresher course. The evidence also indicated varied practices being used surrounding the process of reporting. Furthermore, the results identified a gap in the training of the Children First Guidelines (DCYA, 2011) for some members of the agency. In addition the need to identify the designated liaison person within the agency to all members was signposted.

Overall the results inferred a general understanding of mandatory reporting. However the main findings highlighted above showed insufficiencies in the following of procedures outlined in the Children First Act (2015). The implication for practice is matters concerning child protection may not be deal with efficiently. The researcher thought the evidence of deficiencies could be resolved with further training in the Children First Guidelines (DCYA, 2011).

Literature Review

Literature Review

Introduction

The demand for mandatory reporting of suspected child abuse and neglect has been an issue in Ireland for decades. When high profile cases of child abuse came to light the government would debate on the legalisation concerning the reporting of suspected child abuse and neglect. However, the State was reluctant to criminalise failure to report through fear of the social work department being inundated with referrals they couldn't manage. (Buckely & Burns, 2015).

The number of referrals made to the social work department has doubled from 2006-2012 (Tusla, 2012). The referrals made to the child welfare and protection services yearly consist of 50% welfare issues and 50% considered as being that of child protection (Tusla, 2014). Buckely and Burns (2015) claim, the growth in the workforce is not reflective of the escalation of referrals made to the Department. They perceive social workers being forced to increase the thresh hold of reaction as a result of dealing with rising levels of child abuse and neglect. Furthermore they understand this practice increasing the risk of burn and create additional strain on staffing levels.

In 1995 the Department of Health (DoH) publication for the prevention and welfare of children was later expanded on in the Children's First National Guidance (Department of Health and Children, 1999) (DHC). The Guidance outlines the importance of interagency collaboration between the social work department and other services. Furthermore it clarified the Health Board and the Gardaí are both responsible for the notification and investigation of suspected child abuse. Although, Horgan (1996) argues, this did not sit well with either as both operate from different perspectives.

By 2011 with the revised Children First Guidance (Department of Children and Youth Affairs, 2011) (DCYA) the government indicated their intention to legalise mandatory reporting of suspected child abuse and neglect. This was followed with the Children First Bill (2012) then preceded by the Children First Bill (2014) and finely enacted

into law on 19th November 2015. It is now a legal requirement under the Children First Act (2015) for all those coming into contact with children through their work to report cases of suspected child abuse or neglect. However, for quite some time now the literature has illustrated issues surrounding the reporting concerns of child maltreatment (Stanley & Goddard 2002; Horwath, 2007; Brandon et al. 2008; Ferguson, 2011; Buckley, 2014; NSPCC, 2014). Taking into account past research and the recent change in the legal duty for those working with children it would be of value to explore this further. Therefore the aim of the current study explores the view of childcare practitioners towards the introduction of mandatory reporting of suspected child abuse and neglect.

This section involves a review of the literature associated with child protection and reporting suspicions of child abuse and neglect. Throughout the section a critical evaluation of the studies, policies and laws both national and international are deliberated. Additionally child protection, child abuse and reporting concerns in practice are discussed. At the end of the section the research question is defined.

Child protection

Outline of the history on child protection and developments in child protection legislation.

Child protection is defined as "A broad term to describe philosophies, policies, standards, guidelines and procedures to protect children from both intentional and unintentional harm" (UNICEF, 2013; p.19).

The child protection and welfare service formally social workers existed in Ireland from 1974, with child abuse recognised mainly as physical harm inflicted by parents (Buckley & Burns, 2015). Later in 1987 the Child Abuse Guidelines (DoH, 1987) defined the child abuse reference list to include physical injuries, severe neglect and sexual or emotional abuse. However, there was no reference in those guidelines on how to identify severe neglect unlike other forms of abuse which are outlined in

detail. Today neglect is recognised as the most common form of abuse (DCYA, 2015a), with the majority of abuse reported happening within the family home (DCYA, 2011). Ireland has the largest population of children in the EU, with 25% of the population under the age of eighteen years (Central Statistics Office, 2012). By the end of April 2015 there were 6,420 children in the care of the State, most of which for reasons of protection (DCYA, 2015b).

During the past decades there have been numerous high profiled scandals of child abuse leading to several official inquiries (South Eastern Health Board (SEHB), 1993; Murphy, Buckley & Joyce, 2005; DHC, 2009; HSE, 2010) leading to further developments of regulations and laws protecting children. The Child Care Act (1991) provides for the State to take action in order to protect children from harm and ill treatment, with the main purpose of providing care and protection for children at risk (Nestor, 2011). Additional to the Child Care Act (1991) are the amendments in 1997 and 2001 to aid the State to intervene in family life as mentioned in Art 42.5 of the Constitution of Ireland (1927). Furthermore the Children's Referendum in 2015 reinforced the power of the State to intervene when children (from a marital home or otherwise) were seen to be at risk and in need of protection. The Child Care Act also sets out the responsibility of the HSE (now Tusla the Child and Family Agency, which came into effect in January 2014) to protect children. It is the responsibility of Tusla to take action to identify and promote the welfare of children who are not getting acceptable care and protection within the home.

Child Abuse

The history of child abuse and neglect in Ireland and England.

"Child abuse and neglect (or child maltreatment) consists of any acts of commission or omission by a parent, caregiver or other adult that results in harm, potential for harm, or the threat of harm to a child (usually interpreted as up to 18 years of age) even if the harm is not the intentional result." (Leeb, Paulozzzi, Melanson, Simon & Arias, 2008; cited in Lancet, 2009; p. 68-69).

The Ryan Report (Commission to Inquire into Child Abuse, 2009) was a defining moment exposing the abuse children were subjected to in Ireland within the institutional care of the State and the Church. This was a significant time in child protection with the publication of the Ryan Implementation Plan (DHC, 2009) outlining the expected commitment from the State. An additional report of institutional maltreatment of children is documented in the Ferns Report (Murphy, Buckley & Joyce, 2005), exposing over 100 allegations of child sexual abuse against twenty one priests from 1962 until 2002.

Besides the recognition of institutional abuse, the safety of being bought up within the family unit has come into question. Child abuse within the home has now been identified, with cases coming before the courts. The Kilkenny Incest Case (SEHB, 1993) involved a father abusing his daughter over a fifteen year period. These types of cases are not unique to Ireland. In England, the Victoria Climbié case (House of Commons Health Committee, 2003) resulted in the death of a child. A more recent case that of Baby Peter (Local Safeguarding Children Board, 2009), prompted the Progress Report (House of Commons, 2009) exploring good practice, promotes the protecting of children outing required improvements. However, learning has not been gained from the international literature of the failing of child protection services. For instance, in the shadow of the Lamming Report (House of Commons, 2009) emerged the Roscommon Child Care Case (HSE, 2010) reiterating the failings of passed cases.

Risk factors associated with child abuse

Detailing the risks factors linked to child abuse and neglect.

It is accepted there is an association between certain risk factors and child maltreatment. (McCoy & Keen, 2009). Social disadvantage is one of the main risk factors of child abuse and neglect (HSE, 2011; Jaffee & Maikovich-Fong, 2011; Videka, Gopalan & Bauta, 2014). Finkelhor & Dziuba-Leatherman (1994) state, by virtue of being a child they are at risk of being subjected to maltreatment. Other risk factors connected to child abuse and neglect include children with special needs,

children from diverse cultural backgrounds, parenting alone and parents with mental illness or addition problems (Horwath, 2006; Centre for Disease Control and Prevention, 2015; Child Welfare Information Gateway, 2015). Videka et al. (2014) consider families associated with the risk factors above are also most likely to experience poverty and social disadvantage which too will increase the risk of child abuse and neglect. Nevertheless, it is important to realise that although certain risk factors may exist among families where child abuse and neglect occurs, it does not mean the presence of these factors will result in child abuse and neglect (Goldman, Salus, Wolcott, & Kennedy, 2003).

Studies in England display results of 25% of children on the child protection register were found to have parents who misused alcohol or drugs (Advisory Council on the Misuse of Drugs, 2003). Whereas Forrester (2000) claims children with parents with drug or alcohol issues were twice as likely to enter the care system. There is a dearth of data on children at risk and the reasons for entering into State care (Buckley, 2008; Burns & MacCarthy, 2012; cited in Buckley & Burns, 2015; p. 58). Until recently in Ireland there was an absence of transparency of child court proceedings with the secrecy of the in camera rule (Coulter, 2014). Little was known about what factors influence whether a child stays with their parents or is taken into the care of the State (O'Mahony, Shore, Burns & Parkes, 2012; Coulter, 2014). However, the introduction of the Child Law Reporting Project (CLRP) has given some insight into this area. The risk factors mentioned above are consistent with findings of the CLRP, with 27% of children before the district courts having special needs, 8% of the parents had either mental illness or cognitive disabilities, 25% were from culturally diverse backgrounds and 60% were parenting alone (Coulter, 2014). These and other cases portray many children in Ireland stuck in a life of neglect and or abuse without a functioning adult. The CLRP highlights the importance of the identification and reporting of child abuse and neglect for early intervention which can lead to better outcomes for children and families.

Mandatory reporting

Clarifying mandatory reporting both nationally and internationally.

Mandatory reporting structures are used in several countries and have been in place for many years. For instance Australia introduced mandatory reporting laws of some description across all states and territories (Child Family Community Australia, 2015). Likewise in the majority of States throughout America and Canada mandatory reporting exists. However, jurisdictions differ as to who the mandated reporters are and the type of abuse subject to reporting.

In Ireland mandatory reporting of suspected child abuse and neglect is in place for those coming into contact with children in their employment including the public, private and voluntary sector. The Council of Europe has advised all nations to introduce mandatory reporting of suspected child maltreatment. Nevertheless, most countries within the EU do not have laws requiring mandatory reporting. In Great Britain for example only some professionals are required by law to report suspicions of children at risk, such as police, local authorities and social workers. The Child Protection Guidelines (Scottish Government, 2014; HM Government, 2015) and professional codes of conduct may outline other professional's duty to report, but they are not bound to do so by law (DoH, 1996). Some jurisdictions are hesitant to bring in mandatory reporting. Research evidence shows reluctance for some countries is due to fear of unintended adverse consequences (NSPCC, 2014). For example generating a nation of over reporting, overwhelming already stretched resources and diverting attention away from where it's most needed.

Deficiency within the child protection system

Problems with inter-agency collaboration and high caseloads.

Since the 1970's disciplines and agencies lack of collaboration has caused failings in child protection (Buckley and Burns 2015). Children Acts Advisory Board (2009) outline, multi-layered tension and the inability to communicate effectively between social workers, other professionals and agencies hinder the management of child protection cases.

In September 2014 there were 9,000 children waiting to be allocated a social worker (Oireachtas Joint Committee on Health and Children, 2014; HIQA, 2015). Caseloads

impact on quality of services social workers can provide. For instance, cases seen as less serious may be let sit and acted upon only when the situation reaches a certain threshold of crisis. This in turn leaves such cases receiving attention which is often too late for prevention supports, resulting in removing children from their environment (Ferguson, 2011). Burns & MacCarthy (2012) argue, this is a far cry from the milk float approach (steady provision from the start), it's a fire brigade response (urgent reaction to crisis). This reactionary response is in conflict with the philosophical basis of the Child Care Act 1991 and the UNCRC (1989) which urge for prevention and early intervention for the child. Additionally the child protection services are supposed to be operating applying the ecological model of care practice (Bronfenbrenner, 1979) as recommended (Child Family Community Australia, 2013; Tusla, 2013; Barnardos, 2015). The ecological model considers the complex transactions between people and their environment applying early interventions in order to prevent violence before it occurs (Greene, 2010).

Dilemmas to reporting

Problems for professionals concerning the reporting of suspected child abuse and neglect.

The Children First Guidance (DCYA, 2011) states all those coming into contact with children have a duty to identify and report any concerns of child maltreatment. However, there are issues surrounding this for different professionals. For example, the fear of violence from carers can affect whether concerns of neglect are reported (Stanley & Goddard 2002). Another possibility is role confusion relating to status e.g. public health nurses not feeling they have the status to challenge doctors (Ferguson, 2011). Alternatively lack of challenge can result in statements about the child and risks that are mistaken or misleading are allowed to stand (Brandon et al. 2008). Pollak and Levy (1989) identified a list of feelings (fear, guilt, shame, anger and sympathy) which can influence decisions to refer. Horwath (2007) expands on this to also include feelings of helplessness.

According to Horwath (2006) factors that can affect the professional to make a referral are fear or repercussion, opinion of social work services, deficiency in continuity of staff, a lack of understanding of the social work process and absence of feedback from social workers. Horwath (2006) refers to the lack of feedback from social workers as the 'Black hole of the child protection system'. She claims the reasons for this lack of feedback stems from ethical issues of confidentiality and time restraints as a result of heavy workloads. Horwath & Saunders (2004) add, professionals not understanding the expertise of the social workers can result in a lack of confidence of their ability to address referrals. They continue claiming, difficulties with professionals accessing social worker and lack of response to messages as causes for not reporting to the social work department. However, their study too revealed professionals who had direct contact with social workers were more likely to make referrals. Apart from professional's reluctance to report to the child protection services, social workers themselves can be unwilling to act on reports made to them. Ferguson (2011) claims, reasons for social workers not following up referrals can be due to misplaced loyalty towards their service user's confidentiality, communication of serious concern not being interpreted as such and having to spend too much time on administration.

Reporting Concerns

General Practitioners (GPs) are in the ideal position having knowledge of family medical history (addition problems, poor mental health or learning difficulties) to identify and report concerns of child maltreatment at an early stage. However, there have been many high profile cases in which GPs failed to act on this privilege information (SEHB, 1993; House of Commons Health Committee, 2003; HSE, 2010).

Reasons given for non-referral by GPs include: sense of proving to be detrimental to their relationship with families; concerned with being sued if proved unfounded or too heavy a workload reducing time required for case conferences (Polnay, 2000; Horwath, 2006). Other rational given by doctors are the belief child abuse is outside their area of expertise and concerns about doctor patent confidentially (Bannon & Carter, 2003). Whereas Polnay (2000) argues, some GPs believe making a referral

will not result in helping the child or family and could in fact make things worse for the child. Horwath & Saunders (2004) suggest teachers also share the worry of causing more harm that help towards the child if reporting concerns to social workers. Furthermore they add, this can result in trying to put in interventions to support the family, only making a referral to the social work department as a last resort when all else fails. This practice could result in children being left at risk in an escalating situation which could have been prevented by the professionals with the appropriate expertise.

The recent study carried out by Buckley (2014) outlined the views of those working with children on the forthcoming legalisation of mandatory reporting of suspected child abuse. Participants comprised of professionals in schools, hospitals, youth services and other health and justice services. The findings confirmed an absence of ownership, interest and awareness of child protection matters from the participants. The explanations understood to be responsible for these attitudes where considered as defective training and a culture belief child protection being the remit of social workers.

Mandatory reporting has recently been introduced in Ireland and to date there has not yet been any research into how this is viewed. The current study would be of value to discover the views of childcare practitioner's within an Afterschool Project towards this new legal requirement. The researcher decided to carry out the present study with practitioners in this setting as her hypnotises was they were likely to have had to deal with mandatory reporting as they have the increased opportunity to gets to know the children becoming aware of their normal behaviour (eating, interaction with other children and adults). Additionally, the practitioners have the chance to build positive relationships with the children in a less formal environment than school. This in turn could give rise for the child to feel confident enough to disclose information to them which may otherwise go undiscovered.

Therefore the aim of the study is to explore the views of childcare practitioners regarding the introduction of mandatory reporting of child abuse and neglect. To fulfil this goal there are three objectives. First, the views of practitioners are to be established regarding mandatory reporting of child abuse and neglect in relation to

their practice. Next how equipped practitioners feel in relation to mandatory reporting of suspected child abuse and neglect explored. Finally, the practitioners are to be requested to make some recommendations on how might they be assisted regarding the process of mandatory reporting in their work contents.

Conclusion

Highlighted, throughout the literature are issues concerning the reporting of child abuse and neglect. All the above mentioned professions are in unique positions to see into the lives of children who could be subject of abuse. However, without interagency collaboration, the proper training in child protecting and an understanding of the work of the child welfare services this will continue to be a lost opportunity for early intervention. Buckley and Burns, (2015) argue, there is a need for a more ecological approach involving all working with children and families to work together and share responsibility for child protection.

The above research studies highlight the complex issues surrounding the reporting of child abuse and neglect, and the need to explore further how childcare practitioners view reporting concerns of child welfare. The current study will expand and contribute updated information on previous research since the introduction of mandatory reporting in Ireland. This will be done in the form of a qualitative analysis, focusing on a small cohort of childcare practitioners within an Afterschool Project.

Method

Method

Introduction

This section explains the methodology applied to collect the data and analyse of the findings of the research. First the research design will be outlined. Next a description of the participants will be given and the materials used will be produced. Finally the procedure used to conduct the study will be outlined, containing both ethical considerations and the method of analysis used to extract the data.

Research Design

The research instrument chosen to conduct the investigation was a qualitative method using semi-structured interviews. Bryman & Bell (2011) consider the use of a semi-structured interview tool affords for the gathering of specific information on the research topic. Bell (2001) deliberates qualitative research to be superior over that of a quantitative approach for the collection of exhaustive rich data. She adds this method allows for the opportunity to capture the thorough views and experiences of participants. However, Cheek (2007; cited in Tracy, 2010; p. 838) claims in general the public's perception of quantitative research is that of being more scientific. Although many view a qualitative approach is best suited for social research, whereas quantitative research often is more appropriate for number crunching (Guba & Lincoln 2005; cited in Tracy, 2010; p. 838; Rubin & Babbie, 2014).

The researcher selected this method in order to facilitate the investigation into how childcare practitioners view the process of mandatory reporting of child abuse and neglect in their work context. This approach affords participants the opportunity to express their opinions without restriction (Hoffmann, 2007; Clark, 2010). Furthermore, a qualitative approach is more likely to delve deeper than a quantitative method in order to obtain intricate information (Winter, 2000; cited in Tracy, 2010; p. 841; Bryman, 2004; Rubin & Babbie, 2014). Whereas Tracy (2010) outlines the

necessity for rich rigor throughout all stages of the research process increasing the chances of collecting high quality data and improving future research practice.

Initially focus groups were considered as a possibility to collect the required data. However, given the nature of the topic as it relates to child protection there is a risk of raising personal issues. Reflecting on this the researcher felt it more appropriate to conduct the research with one to one interviews in private. Furthermore other risk factors were identified ruling out the suitability of focus groups (Dowling, 2014). For example confidentiality could be a problem if a respondent disclosed information in a group session identifying a service user known to the other participants.

Open-ended interviews were considered to be better suited for the research, since it is believed the particular topic required open and candid discussion to establish the information sought (Hoffmann, 2007). Additionally, this tool facilitates better self-expression and face to face personal interaction between the researcher and respondent (Bryman, 2004; Clark, 2010; Rubin & Babbie, 2014), which a questionnaire alone could not have achieved (Hoffmann, 2007; Clarke, 2010). Bell (2001) expands on this, acknowledging the advantage of interviews for flexibility. For instance she explains the interviewer can note non-verbal responses and enquire into the feelings of participants. The open interview questions operated as a probe to initiate a conversation on each area of interest (Denzin & Lincoln, 2000; cited in Hoffmann.2007; p. 330). Similarly, Hoffmann (2007) outlines the significance of letting participants go further than the questions to uncover new areas.

Participants

The sample of the study was all female and consisted of six childcare practitioners from six homework club settings within the Afterschool Project of the one organisation. The criteria for selection were all participants to be childcare practitioners working within the Afterschool Project of the organisation for at least one year.

Participant 1 was in her thirty's with a level 6 Child Care (ten years with agency)

Participant 2 was in her fifty's with a level 6 Child Care (four years with agency)

Participant 3 was in her forty's with a level 8 Child Care (eleven years with agency)

Participant 4 was in her forty's with a level 6 Child Care (eight years with agency)

Participant 5 was in her fifty's with a level 6 Child Care (six years with agency)

Participant 6 was in her fifty's with a level 6 Child Care (five years with agency)

Materials

The participants received letter of introduction (see Appendix 1) outlining the purpose of the study and consent forms (see Appendix 3) between one and six days before the commencement of the interviews. Also the interview schedule (see Appendix 2) being the instrument used for data collection was received at this time by the participants.

The schedule consisted of seventeen questions. The first set of questions was a short list of demographic queries followed by the main inquiry into the study. The key questions set out with the main goal of the research in mind. Firstly, discover the views of participants regarding mandatory reporting of suspicions of child abuse and neglect and how this may influence their practice. Secondly, determine how confident interviewees feel they are towards the process of mandatory reporting. Finally, request for recommendations, how participants may be aided in the process of mandatory reporting connected to their work.

Procedure

The researcher rang the CEO of the organisation to see if he would grant permission to carry out the research outlining the criteria for selection. The CEO requested an email outlining the interest of the research. Consent to conduct the research was then given by the CEO, subject to the approval of the manager of the Afterschool Project. The CEO circulated the letter of introduction (see Appendix 1) about the study to all staff working in the Afterschool Project and requesting they support it.

In line with the ethical policies and procedures of Athlone Institute of Technology outlined in the Research Handbook (McGree, 2016) the researcher submitted the research proposal to the Ethics Committee. Following this approval was received to go ahead with the study. With the approval in place the researcher rang the manager of the Afterschool Project asking permission to carry out the study. She responded with a request of a copy of the outline of the study originally sent to the CEO of the organisation. There were several email communications between the researcher and manager of the Afterschool Project and during these correspondences it was agreed the study could take place. The interview schedule (see Appendix 2) was requested and furnished to staff by the Project Manager, who also acted as gatekeeper to recruit the participants.

The Project Manager was absent from work so her assistant had been delegated her work load. On the 13th April the assistant rang the researcher to arrange a time to introduce her to the six recruited participants all of which were childcare practitioners. This took place on the 14th April, one day prior to the commencement of the interviews. The researcher went with the assistant to the six after school homework clubs to meet the participants. During the meetings the researcher introduced herself and a letter of introduction (see Appendix 1) and consent form (see Appendix 3) were distributed to each participant. The issue of confidentiality and anonymity was discussed. The researcher stated, all participants would be anonymous and their data would be confidential. However, it was also made clear confidentiality cannot be guaranteed should child protection concerns come to light in the course of the interview. Time was giving to answer questions about the study and the right to withdraw if wished at any time was outlined. Additionally, the researcher explained the data would be audio recorded on her laptop during the interviews and notes would be taken. Furthermore, it was pointed out if anyone felt uncomfortable about being recorded at the time just notes would be taken instead. In line with the Data Protection Act (1988) the researcher explained the audio data collected would be stored on the researcher's laptop and password protected. The

researcher outlined the recordings would be destroyed immediately after being transcribed. Similarly, the transcripts would be kept password protected on the researchers lap top assessable only to the researcher and if necessary her supervisor. It was also specified in order to protect their identity the transcripts would be marked with numbers (1-6) only and would be destroyed by the 30th September 2016. Also it was pointed out any notes taken at the time of interviews would too be numbered and locked in a cabinet separate from consent forms which could identify participants. The researcher then made times and dates for the interviews to take place which would be convenient to all parties.

The gathering of data took place by interviews between the 15th and 19th April 2016. Before each interview the participants read and signed the consent forms and a verbal request to record the interviews was consented to. The issues surrounding confidentiality were reiterated and participants were asked if they had any questions. In preparation of personal upset with the topic being that of a sensitive nature or if child protection issues were identified a list of accredited counsellors and the contact for Tusla's local Duty Social Worker (see Appendix 4) was provided.

The interviews were conducted by the researcher, who audio recorded them and took notes. The duration of each of the interviews lasted between twenty to thirty minutes. Semi-structured interviews (see Appendix 2) were used to collect the data for the study. The questions explored the views of childcare practitioners towards the introduction of mandatory reporting suspected child abuse and neglect. The researcher used prompts when participants failed to give a clear response directed to a question.

As soon as possible after the interviews the researcher listened back to the recordings and added to the notes any relevant observations e.g. tone of voice and body language (Rubin & Babbie, 2014). The consent forms were kept in a locked cupboard separated from the rest of the data collected. The written notes were kept

away from the consent forms and made identifiable only by numbers. The recordings were transcribed, marked with numbers only and stored password protected on the researcher's laptop. The notes and the audio recordings were destroyed once the process of analysing the data was completed.

In order to connect to what had been uncovered a thematic analysis was used "Thematic analyses seek to unearth the themes salient in a text at different levels" (Attride-sterling, 2001; p. 387). Coding took place picking through the transcript, to identify themes which emerged from the interviewees responses (Strauss, 1987). These themes were colour coded providing themes, over all themes and sub themes making up the bones of the findings. This procedure was repeated with each of the interviewee's transcripts until saturation point had been achieved (Glaser & Strauss, 1967).

Results

Results

Introduction

This section presents the findings of the qualitative study. The study was conducted within the setting of an Afterschool Project with six childcare practitioners. The practitioner's views were sought on mandatory reporting of suspected child abuse and neglect. A brief outline of the method of analysis used to realise the findings from the data is giving, followed by a descriptive interpretation of the results. A summary of the findings will be provided at the end of this section.

Method of analysis

The study was conducted using a qualitative method of research. A thematic analysis was applied to draw the findings from the data in the form of semi-structured interview with open ended questions (see Appendix 2). This method affords for themes to develop from the information gathered during the interview process. The procedure used to enable the discovery of the themes was to transcribe each recorded interview verbatim, picking out sentences and colour coding these into common themes (Strauss, 1987). The themes were further analysed and sorted into sub themes until saturation point was reached (Glaser & Strauss, 1967).

The aim of the study was to establish the views of childcare practitioners towards the introduction of mandatory reporting of suspected child abuse and neglect. In order to achieve the goal three main objectives were applied. Firstly, to explore the participant's views in relation to mandatory reporting in relation to their practice. Secondly to discover how confident the interviewees felt regarding mandatory reporting of concerns of child maltreatment. Finally the researcher was to request

participants recommend ways in which they may be supported regarding mandatory reporting in their work contents.

From the data collected the researcher identified four main themes using the thematic method of analysis comprising of: (1) Views towards the introduction of mandatory reporting; (2) Impact of mandatory reporting on practice; (3) Confidence regarding reporting child abuse and neglect and (4) Recommendations to improve the practice of mandatory reporting.

1) Views towards the introduction of mandatory reporting

The views on mandatory reporting of child abuse and neglect since being introduced in Ireland were identified as one of the main themes. The interviewees projected both positive and negative responses to the introduction of mandatory reporting.

Positive views on mandatory reporting

The findings showed some interviewees regarded mandatory reporting as a valuable intervention for the protection and welfare of children who use their service. Participant 2 states: "I agree with it and it's very important that we are able to do that. For too long things were pushed under the carpet." Whereas, participant 3 points out: "Introducing that policy it outlines commitment to valuing and safeguarding the welfare and protection of the children attending the service." She expands on this saying: "It's all for the good of the child, the family and the good of the service, the organisation." Likewise participant 5 states: "I feel that mandatory reporting is an extremely valuable tool to have, it opens the doorway to ensure the rights of the child and welfare of the child always come first."

Some interviewees outlined the improved transparency resulting from mandatory reporting. Participant 1 stated: "At least it's documented" and participant 3 thought it could reassure parents with children attending the service: "A parent knows their

child is in an environment where they know they're going to be looked after, they're going to be contacted if there's anything at all." While some believe, mandatory reporting will develop a positive response to report suspected child maltreatment. Participant 5 claims: "Mandatory reporting enforces the moral obligation on every adult to care for and protect all children from abuse and harm creating a culture where child abuse will not be tolerated."

Negatives views on mandatory reporting

However, in contrast to the strengths of mandatory reporting the findings exposed some interviewees also having concerns regarding its introduction. Fear of reporting was one of the concerns defined by some. Participant 1 pointed out: "It could be an issue if you have to get involved if there's a court case." Whereas Participant 2 saw there could be repercussions of reporting from the parents: "Some of the parents can be aggressive towards the staff and it could be a fear that if you did report a worry about a child the parents may do something."

Other concerns of mandatory reporting for some interviewees consisted of not being believed if a suspicion of child abuse or neglect was presented. Participant 3 suggested: "Workers thinking that nobody would believe them what their after being told, so maybe don't report it." This is reiterated by Participant 2 saying: "You may not be believed."

Apprehensions regarding the possibility of noncompliance to follow up reported abuse were highlighted from some interviewees. Participant 2 considered the possibility of: "nothing would be done about it." This concern is reiterated by Participant 4 who adds: "We would hope that it's followed up, as a society we know of when we just stood on abuse and neglect."

In contrast, over reporting was found to be of some concern. Participant 5 saw how mandatory reporting could result in over reporting which could prove to be troublesome: "Over reporting and unsubstantiated reports could increase, over flooding in agencies dealing with reported abuse." She goes on predicting:

"Genuine cases of abuse and neglect will be over looked. It can lead to a lot of family trauma when unsubstantiated reports have to be investigated."

The lack of confidence from some interviewees of the actual power of mandatory reporting was raised. Participant 6 pointed out some weaknesses of mandatory reporting: "There are still no sanctions for people who refuse to engage with the system." Moreover she remarks on the gaps in the system of mandatory reporting: "There isn't ongoing checks or standards to reach so there are still a lot of people who are not trained up in the signs of child abuse and who are not aware of their statutory obligations, there's still a lot of ground to cover that way."

There were found to be both positive and negative reactions regarding mandatory reporting. On the plus side interviewees thought there was more protection for the child and increased transparency surrounding reporting concerns of child maltreatment. While on the minus side participants feared the possibility of personal repercussions, noncompliance or over reporting burdening already overstretched child protection systems.

2) Impact of mandatory reporting on practice

The findings showed a varied response to the impact of mandatory reporting on the interviewees practice being both positive and negative. The increase of time spent on administration was expressed by some interviewees. Participant 1 stressed: "It's a lot more paperwork now." She expanded on this saying: "Everything has to be wrote down, then we hand it to our manager and she would go to the social worker."

Although some interviewees did not think the introduction of mandatory reporting has had any impact on their practice. Participant 2 said: "No, it hasn't really. I haven't had to do it yet." While participant 3 claimed: "So far we haven't had any incidents since it came in so we haven't been through the mill yet." She goes

on to explain pre mandatory reporting experiences: "From the past I know if there has been anything we have been in contact with parents and we never have had any bad impacts, it's always been kind of positive."

The issue of clarity was linked to mandatory reporting for participant 6 who thought mandatory reporting assisted by clarifying when to report, while giving her the confidence and power to do so: "I suppose it does take away the kinda you know ambivalence of not kind of deciding yes I am going to do this, I am going to go further with it and maybe takes away the doubt and gives you that kind of power that right in the sense of you know it makes up your mind for you, I can't stand back I am going to act on this. Whereas before you might have felt like it but you may have felt you don't have the right."

The finding also demonstrated how some believed reporting concerns of child maltreatment were easier and less of a threat if the suspected offender was unknown to the person reporting Participant 6 states: "If you're dealing with strangers all the time your far more aware and far less concerned about their personal feelings or response, or if that's going to impact on you when you go outside the door or go into your own village or street or whatever."

Mandatory reporting was of concern to some interviewees who thought of Ireland as a country where everyone knows everyone making it harder to report. Participant 6 said: "I suppose in Ireland we live in a very closed society in that you know a lot of people, so by bringing up an issue it also possibly impacts on your personal life so that makes a difference, it makes it more difficult I think." She goes on to suggest living in a close knit community can prevent reporting concerns of child abuse: "That's how a lot of it was covered up in the past because, oh he knew him and they knew them and that wouldn't go on there and these things were overlooked. But in Ireland it's so small people know people, it does impact on you."

There were varied responses to the impact of mandatory reporting on practice. Some interviewees acknowledged mandatory reporting allows for the right and clarifies the need to report concerns. Whereas others felt burdened with extra duties of administration and worried over the consequences of reporting within a small community.

3) Confidence regarding reporting child abuse and neglect

Training and skills

All of the interviewees had completed Children First Guidance training (DCYA, 2011), some doing so within the last two years and others much longer ago. Some of the participants had done additional training in Meitheal (Tusla, 2013). Participant 4 states: "I have done training with Meitheal I found helpful in understanding the needs and strengths of families." Likewise Participant 1 reiterates this sentiment: "I did a really good course not so long ago Meitheal, it's a good one you touch on everything, it helps you understand all what's going on then." This was also the case with Participant 6 who adds: "I have also taken part in Meitheal which gives you a lot of supports around child abuse and neglect."

There was a general consensus between the interviewees for the need of refresher training on Children First Guidance (DCYA, 2011). Participant 1 thought staff should have ongoing training on Children First Guidance (DCYA, 2011): "Probably have a refresher every 4 years, just like the first aid one you have to have refreshers." Participant 6 added: "Each time you revisit something you get different questions so you have a forum to ask those questions." She also points out the need to keep up with any changes in legislation: "Things change like the mandatory reporting." Participant 3 too sees change as a reason to do a refresher: "Things change, children change the rearing of children change everything changes, society in general is changing, so we do need to. I know it's a hassle but we have to really upgrade our skills."

Benefits of Children First Guidance training (DCYA, 2011)

The main points participants got from the training were discussed. Participant 2 comments: "I just remember from it if I spotted a child with marks on them on a regular basis, not just a once off I would know there is something going on with that child." While Participant 5 specifies: "The National Guidance is designed to encourage people to report concerns or suspicions, it trains practitioners in a positive clear manner."

The main message Participant 3 and 4 got from the training was the importance of applying observation skills with the child. Participant 3 states: "There are signs there, they're not all visible and sometimes you have to read between the lines." Also Participant 4 outlines the importance of observing the children in their care, declaring: "As a childcare worker I observe all the time on a daily basis, so would feel I would notice any change in a child."

Confidence of identifying and reporting abuse

There were a range of views from the interviewees regarding their confidence of identifying and reporting concerns of abuse or neglect. For Participant 1 if she thought there was an issue of abuse concerning a child she would go ahead and report it: "I would have no problem if a kid is being neglected or hurt or anything." Whereas participant 3 was a little uneasy about reporting on concerns: "Well I wouldn't be 100% I'd probably be nervous enough." She expands on this explaining: "At the back of your mind you'd be thinking will they believe me, or is it serious enough to report, but at this stage I think anything you see with a child has to be reported. So whether I'm confident or not I'd just do it." While Participant 5 conveyed: "I am very confident, I have been working with children for thirteen years now and I feel that if a child makes a disclosure or if I notice any physical or emotional signs of abuse or neglect I know the proper manner in which to deal with this." She goes on to explain: "I would listen carefully, never lead with questions and follow the proper chain of command."

Process of reporting

There was a variety of way in which participants dealt with the process of reporting suspicions of child abuse or neglect. Some interviewees would record and report directly to their line manager. Participant 4 states: "We keep records of all concerns and inform our line manager." She goes on to clarify: "The only process on our part would be to report to our line manager. We don't get involved passed that."

In contrast other respondents would communicate concerns to their manager or other agencies. Participant 1 specifies: "We would just report to our manager or we would contact the school or the social worker." Likewise, Participant 6 would talk to her supervisor or contact the school directly with concerns about a child: "What would be the norm would be that you would keep records you know you wouldn't jump. You go to your supervisor if you had concerns and discuss it at that level." Also she clarifies: "Part of the form parents have to fill in is to agree that I contact the school."

The findings showed varied confidence in participants regarding reporting child abuse and neglect. All respondents did the Children First Guidance training (DCYA, 2011) and some participated in the Meitheal programme (Tusla, 2013). Most of the participants were confident in the identification of child abuse and neglect. The results also showed differences in the process of reporting suspicions of child abuse or neglect.

4) Recommendations to improve the process of mandatory reporting

At individual level

The results demonstrated how the interviewees considered ways in which to improve their practice of mandatory reporting. The use of more observation skill and keeping records of such was suggested by Participant 2 who believed she could: "Make more observations and the staff working with me. If we think something is not

right with a child to be more observant and keep records, writing down little things." While Participant 3 acknowledges although she holds a high level of attainment in Child Care thinks she could benefit in an update in the Children First Guidance (DCYA, 2011): "I suppose upgrade my skills a little bit, I'd probably be rusty I know I have my BA and I would have covered something in child care and that but now as it is as it stands with mandatory, just to update the skills a bit."

At organizational level

The findings revealed several suggestions from the interviewees of how the organisation could support their practice of mandatory reporting. Firstly the idea of having something visible to refer to when considering a possible concern. For example a booklet which outlines the signs of abuse and neglect, or posters displaying the procedures to follow for reporting concerns. Participant 3 proposed: "To have booklets or maybe posters around so people know there is someone they can actually report to even if it were only a booklet or paperwork that you were given handouts or something you could look at visually that you could see and come back to."

Some interviewees thought to having appropriate staffing levels would assist with mandatory reporting. Participant 6 claims: "staffing it's important there's very little you can do if you don't have enough staff." Participant 1 considers additional time and staff could result in better practice of mandatory reporting: "More time, more man power, then you could just do so much more if you could be on the ball."

The interviewees indicated it would be of assistance to be kept informed of the progress of concerns they report. Participant 4 would like: "To be kept up to date on what's happening with a concern." Some interviewees thought it would be of

benefit it they received information on each child entering their service. Participant 5 considered knowledge of the child's background and communication between the parents would prove useful: "By being aware of all relevant information on each child's family history and regular contact with parents would help."

A few of the participants had taken training in the Meitheal programme (Tusla, 2013), which they found very useful in understanding family dynamics and the importance of early intervention. Participant 4 outlines the usefulness of the programme to improve practice: "Meitheal explains the importance of responding to families effectively in a timely way so children and families get the help they need to improve their outcomes." She goes on to recommend the programme for other workers: "I think it would be great if all workers received this training to improve their practice of reporting." This message was repeated by Participant 1 who also suggested: "This would be a good course for staff to do."

Several of the interviewees identified a gap in the training of some staff concerning the identification and reporting of suspected child abuse and neglect. Participant 2 proposes: "All the after schools should have training how to deal with it, especially CE and Tús workers that come on board. Not just permanent workers, we are all in it together we all need training." This is repeated by Participant 6: "Although I have qualifications there are CE workers or Tús workers who are not trained up." Participant 4 too suggests: "Make all childcare workers be aware of the importance of child protection and Children's First Guide(lines)."

Additionally Participant 5 includes the need to inform staff of procedures surrounding reporting: "Make staff aware of the procedures that need to be followed, identify the child protection officer in the company to all staff, ensure staff that confidentially will be maintained at all times." Finally staff wanted to be informed of any new legislation relevant to their practice. Participant 5 stressed: "Being made aware of any changes occurring in the current legislation."

Outside agencies

The interviewees believed if outside agencies such as schools and social workers shared information with them about the children in their care they would be better equipped to identify and report concerns of abuse and neglect. Participant 1 could see the value of having some information on the children attending their service: "It would help if we had a little background on them, then we could really keep an eye on XYZ." However, she goes on acknowledging this information is not legally accessible: "But at the moment we are not allowed to have that kind of information." Other interviewees thought it would be of benefit if outside agencies kept them updated on how their report was progressing. Participant 5 suggests: "Agencies should connect with staff working with children, inform them of their methods in dealing with the reporting once it has been made, advise them of any changes that take place, ensuring childcare staff always have the most updated information."

A recommendation for increased resources into child protection services was made. The lack of funding going into child protection and the consequences of such were outlined. Participant 6 states: "There's a major lack of social workers, a major lack of funding going into the whole sector." She points out the consequences: "When you see the length of time when a child is recognized to be in danger to when something legally is done from the start can be a very very long process, that really shouts no funding, people just aren't on the ground, the work load is too high and they burn out very quickly."

The results highlighted several recommendations to improve the process of mandatory reporting. At an individual level interviewees identified the need to improve observation and reporting skills. At an organisational level the respondents suggested visual aids to help recognise and report child maltreatment. Some saw a need for increased staffing levels and Improved communication on follow ups to

reports made. It was also proposed that staff be given the opportunity to participate in the Meitheal programme (Tusla, 2013). In addition interviewees wanted the inclusion of Community Employment (CE) and Tús workers in the Children First Guidance training (DCYA, 2011).

Interviewees identified a requirement to create an awareness of who the Child Protection Officer is within the organisation. The participants too requested Information of any updates in legislation concerning their work practice. In considering what outside agencies could do to improve the practice of mandatory reporting interviewee's desired improved interagency collaboration, through passing on any relevant information and working in partnership with them. A final recommendation for more resources surrounding the child protection services was called for by the participants.

Summary of the results

The findings demonstrated both positive and negative perceptions of childcare practitioners towards mandatory reporting. The results show a general acceptance that mandatory reporting does impact on the practice of the interviewees. There were varied views on how confident participants felt surrounding mandatory reporting. The findings identified recommendation to improve the practice of mandatory reporting.

The results showed conflicting views towards the introduction of mandatory reporting. The interviewee's thoughts ranged from being a positive step towards child protection, to concern of the repercussions in carrying out this now legal duty. The findings exposed the impact mandatory reporting would have on the participants practice. Highlighting on the one hand, the concern of Ireland being a close knit society and how this could have implications on the personal life of those reporting a

concern. While on the other hand, mandatory reporting could be an effective tool in clarifying the requirement to report.

The findings relating to confidence of mandatory reporting showed an overall awareness of child abuse and neglect along with reporting procedure. All the participants had undertaken the Children First Guidance training (DCYA, 2011). The results revealed a mixt response of confidence surrounding the reporting of concerns of abuse or neglect. Some participants expressing their readiness and ability, outlining the procedures they would take. While others voicing their anxiety towards reporting. The findings also projected differences in practice involving the actual process of reporting between some staff.

The findings revealed the recommendations for improved practice of mandatory reporting. The general consensus from the interviewees identified the need for future training in the identification of child abuse and neglect for all workers. Also the need for the organisations Child Protection Officer to be identified to all staff members. In addition, improved communication between agencies for prevention and early intervention for child abuse was put forward. Finally further resources were proposed for the child protection services to deal with concerns of child abuse and neglect more efficiently.

Discussion

Discussion

This section provides a thorough discussion in relation to the main findings of the current study. The previous research, policy and practice provided within the Literature Review are compared with the findings of the current study. The significant of the finding, the implications to practice and the interviewee's recommendations to assist the process of mandatory reporting are specified throughout. Also the researcher's suggestions for future research will be given. Finally the method applied to collect the results is evaluated, followed by the section summary.

Overview of findings

The main findings of the current study revealed childcare practitioners mixed views regarding the introduction of mandatory reporting of suspected child abuse and neglect and the impact on their practice. From the one side interviewee's viewed mandatory reporting ranging from being a positive step towards protecting children, to concern of the repercussions in carrying out this now legal duty. The findings showed the impact mandatory reporting would have on the interviewees practice. There was a general acceptance mandatory reporting impacts on the practice of staff, with there being positive and negative aspects. Highlighting on the one hand mandatory reporting could be an effective tool in clarifying the requirement to report. While on the other the implications on the personal life of those reporting a concern. The findings demonstrated a variety of viewpoints taken on the how competent practitioners felt surrounding mandatory reporting. Some were confident in their ability of reporting, while others expressed their apprehension towards this process. The suggested recommendations to improve the practice of mandatory reporting were discovered from the participants. The interviewees agreed that there was a need for ongoing training in the identification of child abuse and neglect for all staff members. In addition, most believed improved communication between other agencies was necessary for improving the practice of reporting concerns of child maltreatment.

Generally the Interviewees considered the introduction of mandatory reporting provided greater protection for children and transparency surrounding reporting concerns of child maltreatment. Mandatory reporting was introduced under the Children First Act (2015) stating those coming into contact with children through their work have a legal responsibility to report cases of suspected child abuse or neglect. Additionally the process of identifying and reporting concerns of child maltreatment is set out in the Children First Guidance (DCYA, 2011). The findings proved the process of dealing with suspicions of child abuse and neglect has been clarified as a direct result of both mandatory reporting and Children First Guidance training (DCYA, 2011). This result is encouraging relating to the implications for practice, displaying those working with children have some knowledge of child protection and what is expected when issues are raised concerning the safety and welfare of children using their services.

In previous studies (NSPCC, 2014) research evidence shows reluctance for some countries to implement mandatory reporting due to fear of unintended adverse consequences. For instance the over reporting of child maltreatment resulting in the overwhelming of already stretched resources. According to Buckely & Burns (2015) this practice can also lead to diverting attention away from where most needed. The concerns of the consequences of over reporting were similar to the findings of the current study. An additional worry showed up in the findings, being the likelihood of an increase in unsubstantiated reports and the negative impact these would have on families while under investigation. "It can lead to a lot of family trauma when unsubstantiated reports have to be investigated." Horwath & Saunder (2004) claim the fear of causing more harm that help towards the child if referred to social workers which can result in trying to put in interventions to support the family. They go on to suggest, this will only be reported as a last resort when all else fails. In the researchers view this practice can risk the child being left in an abusive situation being managed by those without the expertise to do so.

The number of referrals made to the social work department has doubled form 2006-2012 (Tulsa, 2012), with half considered as child protection (Tusla, 2014). However, Buckely & Burns (2015) argue, the increase in the workforce is not reflective of this. They add, with the doubling of referrals social workers could be forced to increase the threshold of reaction. Furthermore they claim, social workers then end up dealing with higher levels of abuse and neglect increasing the risk of burnout.

In September 2014 there were 9,000 children waiting to be allocated a social worker (Oireachtas Joint Committee on Health and Children, 2014; HIQA, 2015). The implications of both recent evidence (Oireachtas Joint Committee on Health and Children, 2014; HIQA, 2015; Buckely & Burns, 2015) and the current findings reveal insufficient resources within the child protection services to accommodate the increased demand in reports of suspected child abuse and neglect. This practice is in conflict with the philosophy of the Child Care Act (1991) and the UNCRC (1989) of prevention and early intervention to support families to reduce the risk of child maltreatment. The Child Care Act (1991) provides for Tusla the Child and Family Agency to take action to identify and promote the welfare of children who are not getting acceptable care and protection within the home. This is far from the reality with so many children at risk awaiting the allocation of a social worker to be assigned to them. The deficit of social workers also goes against the ecological model of practice (Bronfenbrenner, 1979) recommended by child protection services (Child Family Community Australia, 2013; Barnardos, 2015). Furthermore, Ferguson (2011) points out the implications for not having the appropriate resources in child protection services will leave children at risk in volatile and abusive homes. He also claims social workers are becoming involved in child protection cases only when the situation reaches a certain threshold of crisis. He goes on to suggest cases left too long before receiving attention often result in the child being placed into the care system. The current findings also repeated the consequences to the deficiency of front line services in child protection through lack of available funding, coupled with high staff turnover. The result of which, leads to increased caseloads which are of higher risk. The previous evidence and the present study both highlight the need for increased resources into the child protection services.

Ireland is unique in so far as most of Europe including England has not implemented mandatory reporting despite the Council of Europe advising all nations to do so. An unexpected result in the findings of the current study revealed some childcare practitioners had doubts of the effectiveness of mandatory reporting. They suggested no sanctions had been put in place for individuals who fail to comply with the system. In addition they mentioned a lack of checks to see if organisations are training staff in the Children First Guidance (DCYA, 2011). The researcher considers as this system is new perhaps that is why there have been no known cases of noncompliance.

The childcare practitioners believed many people working with children are not aware of their statutory obligations concerning the reporting child abuse. The Children First Act (2015) provides for sanctions towards organisations which prove to be in breach of their duty to make provision for procedures necessary for mandatory reporting. The sanction involves the organisations entry onto a published register of noncompliance, being removed only when appropriate procedures are put in place.

The current study identified the necessity to create an awareness of the legislation change in Ireland placing the reporting of child abuse on a legal footing. The implications for childcare services whose workers are not informed of the new legislation outlining their legal duty could leave children at further risk and or are entered onto the register of noncompliance. The effects of which are not yet known but the researcher envisages once entered onto the register access to funding could prove to be problematic. The rational for the unexpected finding could be contributed to the dearth of mandatory reporting in other jurisdictions, limiting research evidence in this area. It would be pertinent to explore this topic further once mandatory reporting has been in place for a longer period of time.

In relation to the findings of the current study when childcare practitioners were asked how mandatory reporting would impact on their practice, they accepted there are advantages and disadvantages. However, they repeatedly expressed the impact as being more negative than positive. Such as, the fear of violence from parents towards those reporting concerns of child abuse. "Some of the parents can be aggressive towards the staff and it could be a fear that if you did report a worry about a child the parents may do something." This apprehension is comparable to previous studies (Stanley & Goddard 2002; Horwath, 2006). Several fears emerged from the current findings connected to the implications for those reporting concerns. Respondents expressed anxiety such as the involvement in a case coming before the courts. Another worry was to report someone within the community known to them. "But in Ireland it's so small people know people, it does impact on you." Also there was a concern of not being believed. "Workers thinking that nobody would believe them what their after being told, so maybe don't report it." However, these concerns were not concurrent with previous research. The rationale behind the fear of reporting a person known to them could be connected with identifying Ireland for some as that of a close knit society, creating some difficulty to report child maltreatment. Likewise, the fear of not being believed may stem form when the discourse of the child in Ireland was one of not being believed (DHC, 2009). The implications on practice in this regard could prove to reduce disclosure of child abuse to the Authorities leaving children at further risk. The evidence shows some having fears of repercussion, which could deter from reporting requires further research into this area.

The literature highlights both national and international cases where children where left in situations of abuse and neglect as the result of poor interagency collaboration between the social work department and other services (House of Commons Health Committee, 2003; Local Safeguarding Children Board, 2009; HSE, 2010). In response to these cases policies where made available to prevent future repeat recurrence (DHC, 2009; House of Commons, 2009; DCYA, 2011) outlining the importance of interagency collaboration. Buckley and Burns (2015) point out the need for a more ecological approach, involving all working with children and families

to work together and share responsibility for child protection. Evidence emerged from the current findings indicating poor interagency collaboration between services. Childcare practitioners explained they were not kept up to date on reported concerns, making suggestion for this to be put right. The Children First Act (2015) provides for those reporting to the Child and Family Agency duty social worker to receive in writing the reason why further action will not be taken. Other than this there is no reference on how the duty social worker is to communicate back to the original reporter apart from on a need to know basis. In the researchers opinion staff do need the reassurance of knowing their concern is being dealt with. The implication to practice of the lack of feedback can deter those from reporting cases of suspected child abuse and neglect (Horwath & Saunders, 2004; Horwath, 2006). Horwath (2006) refers to this lack of feedback as the 'Black hole of the child protection system'. She claims the reasons for social workers not giving feedback on the reported concern are due to ethics concerning confidentially and time restraints.

The findings projected childcare practitioner's lack of accessible information on children using their service known to be at risk held with other agencies, although some understood this to be confidential and privileged information. It was suggested: "It would help if we had a little background on them, then we could really keep an eye on XYZ." Outlined in the Children First Guidance (DCYA, 2011) is the importance of agencies working in tandem when dealing with children at risk. However this is on a need to know basis only. The researcher would question if it necessary for information on children at risk to be shared with the childcare practitioners for them to be aware of possible child abuse. Finkelhor & Dziuba-Leatherman (1994) state, by virtue of being a child they are at risk of being subjected to maltreatment.

In keeping with previous research (Polnay, 2000; Horwath, 2006) the findings indicate there is a correlation between inappropriate staffing which can reduce the amount of referrals. The childcare practitioners pointed out by not having enough staff the signs of child maltreatment could be missed. They also claimed the

availability of time reduces the amount of records that can be kept. This particular finding had serious implications for practice as childcare practitioners within the Afterschool Project are in a good position to get to know the children, becoming aware of their normal behaviour (eating, interaction with other children and adults). Additionally, there is the opportunity to build positive relationships with the children in a less formal environment than school. This in turn could give rise for the child to feel confident enough to disclose information which otherwise could be lost. Without enough staff affording for the correct amount of time either to spend with the children or keep records updated, there could be missed opportunities to prevent harm for children using the service who are at risk.

The current research inquired about confidence regarding reporting child abuse and neglect. Findings established a variety of viewpoints taken on how confident the childcare practitioners felt surrounding mandatory reporting. All of the interviewees had completed Children First Guidance training (DCYA, 2011). However the findings identified a gap in the training of Children First Guidance (DCYA, 2011) for some workers within the Afterschool Project, particularly those under C.E. and Tús schemes. The childcare practitioners were concerned child protection procedures were being compromised as a result of this gap and called for Children First Guidance training (DCYA, 2011) for all staff within the organisation. "All the after schools should have training how to deal with it, especially CE and Tús workers that come on board. Not just permanent workers, we are all in it together we all need training."

The current study revealed some of the participants had training in the Meitheal programme (Tusla, 2013), which they found very useful in understanding family dynamics and the importance of early intervention. The Meitheal programme (Tusla, 2013) is in keeping with the philosophy of the ecological model of care practice (Bronfenbrenner, 1979), considering the complex transactions between people and their environment and applying early interventions in order to prevent violence before it occurs (Greene, 2010). This model of practice is recommended by child protection

services (Child Family Community Australia, 2013; Barnardos, 2015). An additional recommendation made by the interviewees was for Meitheal training (Tusla, 2013) to be available to all staff within the Afterschool Project. The researcher believes this finding demonstrates how the organisation is taking a proactive stance towards ensuring the continuous professional development of its workforce.

The findings associated with how confident the childcare practitioners felt about mandatory reporting showed most being confident in the identification of child abuse and neglect. Also, some interviewees communicated their ability of reporting, while others expressed their apprehension towards this process. The findings revealed a suggestion for visual tools to aid with the identification and procedure to follow in cases of suspected child abuse and neglect. However, this is outlined within the Children First Guidance (DCYA, 2011). The implications for practice of this lack of awareness of the availability of information within the Children First Guidance (2011) can result in missing signs of child maltreatment and poor reporting ability.

The findings demonstrated differences in the way in which the process of reporting suspicions of child abuse or neglect. Some interviewees would record and report directly to their line manager. In contrast other respondents would communicate concerns to their manager or other agencies directly. The participant's made a recommendation to create an awareness of who the designated liaison person is within the organisation "identify the child protection officer in the company to all staff". This may account for the difference in practice surrounding the reporting procedure. The Children First Act (2015) sets out the procedure for reporting concerns of child abuse to be followed regarding the Children First Guidance (DCYA, 2011). Within the Guidance it is stated all organisations coming into contact with children are to designate a liaison person to who all staff within the organisation are to report concerns of child abuse and neglect. It is the responsibility of the designate person to liaison with outside agencies (the duty social worker of the Child and Family Agency). It is the opinion of the researcher for reasons of consistency and to promote better interagency cooperation the designated person within the

organisation directly deals with all workers concerns of child abuse. Ferguson, (2011) declares reasons for social workers not following up referrals can be due to communication of serious concern not being interpreted as such. Whereas Brandon et al. (2008) add, the lack of challenge can result in statements about the child and risks that are mistaken or misleading are allowed to stand. Outlined in the Children First Act (2015) all designated persons are to undergo specific training in order to equip them to carry out this duty. The researcher anticipates at best the danger of those not equipped to communicate directly with other parties about a concern of child maltreatment could result in an unsubstantiated allegation causing unnecessary harm to the family involved and at worse leaving the child in an abusive situation.

It is clear from the research findings there is a general consensus of the need for refresher training on the Children First Guidance (DCYA, 2011). This recommendation was linked to mandatory reporting now being in place. The findings also highlighted the childcare practitioners desire to be informed of any new legislation relevant to their practice. The research imagines this is in response to the exploratory nature of the study prompting the participants to consider their practice of mandatory reporting of suspected child maltreatment in the context of their work and the implications of such.

Evaluation of method and suggestions for future research

In regard to the evaluation of the method applied in order to collect the data required for the study, access to the sample was somewhat restricted as the researcher had to go through a gatekeeper within the organisation. In the opinion of the researcher this may have skewed the results to a degree. For instance one of the areas explored within the study was knowledge of the Children First Guidance (DCYA, 2011). All participants recruited had undergone training of Children First Guidelines (DCYA, 2011), although the findings exposed a lack of training in Children First Guidance (DCYA, 2011) for C.E. and Tús workers. This was an unexpected finding

so measures were not taken to prevent this. To avoid this outcome in future research a selection of workers to include C.E. and Tús staff should be requested.

Another limitation of the study was being conducted within the one organisation and only based on one project. This is a relative narrow point of view from the practitioners working with children within the Afterschool Project. To get a clearer understanding on a larger scale it is therefore suggested future research into this area of a larger cohort of participants including other projects within different organisations.

Although the sample gathered was small consisting of six female childcare practitioners, each of the participants worked within a different homework club. The researcher believed this contributed to the varied findings towards the practice of reporting concerns of child maltreatment within the homework clubs. The sample was all female but the researcher felt this did not affect the findings as in this discipline staff are predominantly female. There was also a good variety of age groups within the sample and a decent range of years served within the organisation.

The time frame in which the researcher acquired approval from the ethics committee to the due date for the completion of the study was very limited, although the data gathered was of good quality. If a longer period of time was allowed a larger number of participants could have been recruited adding to the quantity of data collected. The resources available to the researcher were also very limited. If the study was to be repeated in the future with a longer time scale and the resources allowing for a triangulation (mixture of qualitative and quantitative) approach a more in-depth study with increased reliability could be achieved (Silverman, 2013).

The research instrument chosen, being a qualitative method using semi-structured interviews (Bryman & Bell, 2011) to conduct the investigation into how childcare

practitioners view the introduction of the mandatory reporting of child abuse and neglect in their work context, proved to be successful in gathering specific information on the research topic. Open-ended interviews were used prompting open and candid discussion which gained not only the information sought but also revealing unpredicted findings (Hoffmann, 2007). For example the revelation of different practice surrounds the process of mandatory reporting or the need to create an awareness of the change in legislation (mandatory reporting) for those coming into contact with children in the workplace. This method was able to delve deeper than a quantitative technique in order to obtain intricate information (Winter, 2000; cited in Tracy, 2010; p. 841; Bryman, 2004; Rubin & Babbie, 2014). Many consider this approach is best suited for social research (Guba & Lincoln 2005; cited in Tracy, 2010; p. 838; Rubin & Babbie, 2014) and it gave the participants the opportunity to express their opinions without restriction (Hoffmann, 2007; Clark, 2010). Also some of the interviewees said they had actually enjoyed participating in the study and found it interesting.

The choice of one to one interviews in private proved to be more appropriate over that of focus groups (Dowling, 2014) which were originally considered. Personal issues were raised during the interviews and information was disclosed which could have identify service users known to the other participants within a focus group. The researcher found this tool facilitated better self-expression and face to face personal interaction (Bryman, 2004; Clark, 2010; Rubin & Babbie, 2014), which a questionnaire alone could not have achieved (Clarke, 2010; Hoffmann, 2007).

The interview schedule was spread out allowing time for the interviewer to listen back to the audio recordings and write up extra notes of non-verbal responses (Bell, 2001) while still fresh in her mind. Another advantage of the breaks between interviews and not exceeding more than three in any one day prevented the researcher becoming fatigued and affecting the quality of the information collected. In addition a rich rigor was achieved throughout all stages of the research process enabling the gathering of high quality data Tracy's (2010). Furthermore, the thematic

analysis applied to connect to the findings (Attride-sterling, 2001) proved useful in aiding the researcher to gain access of the results in a structured and manageable way.

Overall summary

The section provided an overview of the results of the current study connected to the main themes which emerged from the findings using a thematic method of analysis. The main themes comprising of: The views towards the introduction of mandatory reporting; the impact of mandatory reporting on practice; confidents regarding reporting child abuse and neglect and recommendations to improve the practice of mandatory reporting. The findings of the study related to the main themes have been incorporated into the discussion of the results projecting a selection of views, confidents and suggestions for improvements surrounding mandatory reporting of suspected child abuse and neglect.

Most of the current findings are in contrast with previous studies. Additionally some new findings were discovered. Unpredicted findings have been explained and all implications of results for practice were addressed. Recommendations from the interviewees to improve their practice of mandatory reporting and the researcher's suggestions for future research are incorporated throughout the section. An evaluation of the method applied displays the strong and weak points of data collection. Finally, the limitations of the study related to the recruitment of participants, the sample involved and the access to time and resources were outlined.

Conclusion

There has been significant progression in the policy and legislation towards the protection of children in Ireland. One of the central changes being that of the Children First Act (2015) providing for mandatory reporting of suspected child abuse and neglect. The present study shows a positive awareness of this change though

also suggest the Children First Act (2015) is not as fully embedded as it needs to be. It could be argued this is a relatively new piece of legislation. Nevertheless, the main structures for the enactment of the Children First Guidance (DCYA, 2011) have been in place a lot longer.

Recommendations

In response to the current findings the researcher recommends ways in which to improve services.

Many deciding to work with children would not have contemplated they may have to considered whether a child attending their service was being abused, let alone be in a position of compulsory reporting. It could be argued this is not what they signed up for when considering working with children. However, as the law stands now there is an onus on all coming into contact with children in their work to report suspicions of child abuse and neglect. It would there for be recommended at interview stage information pertaining to this responsibility is made clear to all applicants.

Furthermore, it is recommended all new agency members to be given a copy of the Children First Guidance (DCYA, 2011) and requested to become familiar with its content. The rational for this recommendation is to ensure all employees are both aware of the signs of abuse and neglect and the procedure to report this. Moreover this will immediately fill the gap to some degree between starting with the agency until training becomes available of Children First Guidance (DCYA, 2011).

To ensure consistency among agency members it is recommended all are to receive Children First Guidance training (DCYA, 2011).

Additionally, in order to assure procedures for mandatory reporting is adhered to it is recommended refresher training in Children First Guidance (DCYA, 2011) to be made available.

To safeguard reporting procedure is followed it is recommended the designated liaison person within the organisation is identified to all its members.

In order to prevent any breach of the law it is recommended all agencies are aware of and inform its members to the enactment of any legislation relevant to their provision of service.

Finally the researcher recommends the Government provide the appropriate level of resources to the child protection services necessary to meet the growing demand.

References

References

Advisory Council on the Misuse of Drugs (2003). *Hidden Harm-Responding to the Needs of Children of Problem Drug Users*. London: Home Office.

Attride-sterling, J. (2001). Thematic Networks: An analytic tool for qualitative research. *Qualitative Research*, 1(3), 385-405.

Bannon, M. J. & Carter, Y.H. (2003). *Protecting Children from Abuse and Neglect in Primary Care*. Oxford: Oxford University Press.

Barnardos .(2015). *Budget 2015* [Online]. Available at: http://www.barnardos.ie/budget2015. [Accessed 12th March 2016].

Bell, J. (2001). *Doing your Research Project: A Guide for First-Time Researchers in Education and Social Science* (3rd Ed.). Buckingham: Open University Press.

Brandon, M., Blederson, P., Warren, C., Howe, D., Gardner, R., Dodsworth, J.,

Black, J. (2008). *Analysing Child Deaths and Serious Injury Through Abuse and Neglect: What Can We Learn?* Nottingham: Department for Children, Schools and Families.

Bronfenbrenner, U. (1979). *The Ecology of Human Development*. Cambridge: Harvard University Press.

Bryman, A. (2004). Social Research Methods. Oxford: Oxford University Press.

Bryman, A. & Bell, E. (2011). *Business Research Methods* (4th Ed.). Oxford: Oxford University Press.

Buckley, R. (2014). *Child Abuse Reporting in Ireland and the Socio-legal Implications of Introducing a Mandatory Reporting Law.* Doctoral Dissertation. Trinity College Dublin, Ireland.

Buckley, H. & Burns, K. (2015). Child Welfare and Protection in Ireland: Déjà vu all Over Again. In A. Christie, B. Feather-Stone, S. Quin & T. Walsh (Eds.), *Social Work in Ireland Changes & Continuities*. London: Palgrave, p. 51-70.

Burns. K. & MacCarthy, J. (2012). An Impossible Task? Implementing the Recommondations of Child Abuse Inquiry Reports in Context of High Workloads in Child Protection & Welfare. *Irish Journal of Applied Social Studies*, 12(1), 24-37.

Central Statistics Office (2012). *This is Ireland: Highlights from Census 2011, Part 1,* Dublin: Stationery Office.

Centre for Disease Control and Prevention. (2015). *Child Maltreatment: Risk and Protective Factors* [Online]. Available at:

http://www.cdc.gov/violenceprevention/childmaltreatment/riskprotectivefactors.html. [Accessed 12th January 2016].

Child Care Act. (1991). [Online]. Available at: http://www.irishstatutebook.ie/eli/1991/act/17/enacted/en/html. [Accessed 11th March 2016].

Child Family Community Australia. (2013). *Risk and protective factors for child abuse and neglect* [Online]. Available at: https://aifs.gov.au/cfca/publications/risk-and-protective-factors-child-abuse-and-neglect. [Accessed 14th March 2016].

Child Family Community Australia. (2015). Institute of family studies [Online]. Available at: https://aifs.gov.au/cfca/. [Accessed 21st January 2016].

Child Welfare Information Gateway. (2015). Factors that Contribute to Child Abuse and Neglect [Online]. Available at:

https://www.childwelfare.gov/topics/can/factors/contribute/. [Accessed 12th November 2015].

Children First Act. (2015). [Online]. Available at: http://www.irishstatutebook.ie/eli/2015/act/36/enacted/en/pdf. [Accessed 7th March 2016].

Children First Bill. (2012). [Online]. Available at:

http://www.oireachtas.ie/documents/bills28/bills/2014/3014/b3014d.pdf. [Accessed 2nd March 2016].

Children First Bill. (2014). [Online]. Available at:

http://www.oireachtas.ie/documents/bills28/bills/2014/3014/b3014d.pdf [Accessed 10th March 2016].

Clark, T. (2010). On 'being researched': Why do people engage with qualitative research? *Qualitative Research*, 10(4), 399-419.

Commission to Inquire into Child Abuse. (2009). *Commission to Inquire into Child Abuse* [Online]. Available at: http://www.childabusecommission.ie/rpt/pdfs/. [Accessed 3rd March 2016].

Constitution of Ireland. (1937). [Online]. Available at: http://www.irishstatutebook.ie/eli/cons/en/html. [Accessed 10th March 2016].

Coulter, C. (2014). The Child Care Act in Practice: Some Emerging Issues from the Child Care Law Reporting Project. *Irish Journal of Family Law*, 2, 35-40.

Data Protection Act. (1988). [Online]. Available at:

http://www.irishstatutebook.ie/eli/1988/act/25/enacted/en/html. [Accessed 7th March 2016].

Department of Children and Youth Affairs (2011). *Children First: National Guidance for the Protection and Welfare of children*. Dublin: Government Publications.

Department of Children and Youth Affairs. (2015a). *The State of the Nation's Children Reports* [Online]. Available at:

http://www.dcya.gov.ie/viewdoc.asp?fn=/documents/Research/StateoftheNationReport.htm. [Accessed 7th January 2016].

Department of Children and Youth Affairs. (2015b). *Foster Care* [Online]. Available at:

http://www.dcya.gov.ie/viewdoc.asp?fn=/documents/Children In Care/FosterCare.ht m. [Accessed 4th February 2015].

Department of Health (1987). *Guidelines on Procedures for the Identification, Investigation and Management of Child Abuse*. Dublin: Department of Health.

Department of Health (1996). *National Commission of Inquiry into the Prevention of Child Abuse. Childhood Matters Part 1.* London: The Stationery Office.

Department of Health and Children (1999). *Children First: National Guidelines for the Protection and Welfare of Children.* Dublin: Stationary Office.

Department of Health and Children (2009). Report of the Commission to Inquire into Child Abuse, 2009: Implementation Plan. Dublin: Stationery Office.

Dowlin, J.S. (2014). School-Age Children Talking about Humour: Data from focus groups. *International Journal of Humour Research*, 27(1), 121-139.

Children Acts Advisory Board (2009). *A Literature Review of Inter-agency Work with a Particular Focus on Children's Services*. Dublin: Children Acts Advisory Board.

Ferguson, H. (2011). Child Protection Practice. Hampshire: Palgrave MacMillan.

Finkelhor, D. & Dziuba-Leatherman, J. (1994). Victimization of children. *American Psychologist*, 49, 173-183.

Forrester, D. (2000). Parental substance misuse and child protection in a British sample. A survey of children on the child protection register in an inner London district office. *Child Abuse Review*, 9(4), 235-246.

Glaser, B.G. & Strauus, A.L. (1967). *The Discovery of Grounded Theory: Strategies for Qualitative Research*. Chicago: Aldine Publishing Company.

Goldman, J., Salus, M., Wolcott, D., & Kennedy, K. (2003). *A coordinated response to child abuse and neglect: The foundation for practice.* Washington D.C: Department of Health and Human Services.

Greene, R. (2010). *Human Behaviour Theory and Social Work Practice* (3rdEd.). New Jersey: Transaction Publishers.

HSE. (2010). Roscommon Child Care Case: Report of the Inquiry Team to the Health Service Executive. Dublin: HSE.

HSE (2011). Child Protection and Welfare Practice Handbook. Dublin: HSE.

HIQA (2015). Annual report of the Health Information and Quality Authority: Children's Services 2014. Dublin: HIQA.

HM Government (2015). Working together to Safeguard Children. A guide to interagency working to safeguard and promote the welfare of children. London: HM Government.

Hoffmann, E.A. (2007). Open-Ended Interviews, Power, and Emotional Labour. *Journal of Contemporary Ethnography*, 36(3), p. 318-346.

Horgan, D. (1996) Inter-agency Co-operation: team work and child protection, *Irish Social Worker*, 1 (4), 4-6.

Horwath, J., & Sanders, T (2004). 'Do you see what I see? Multidisciplinary perspectives of Child Neglect.' Dublin: North Eastern Health Board and the University of Sheffield.

Horwath, J. (2006). The Missing Assessment Domain: Practitioner subjectivity when identifying and referring child neglect. *British Journal of Social Work*, 23(8), 1285-1303.

Horwath, J. (2007). *Child Neglect Identification and Assessment*. Hampshire: Palgrave MacMillan.

House of Commons Health Committee (2003). *The Victoria Climbié Inquiry Report*Sixth Report of Session 2002–03. London: The Stationery Office Limited.

House of Commons (2009). The Protection of Children in England: A Progress Report. The Lord Laming. London: The London Stationery Office.

Jaffee, S.R. & Maikovich-Fong, A.K. (2011). Effects of chronic maltreatment and maltreatment timing on children's behaviour and cognitive abilities. *Journal of Child Psychology and Psychiatry*, 52(2), 184-194.

Lancet. (2009). *Child Maltreatment 1 Burden and consequences of child maltreatment in high-income countries* [Online]. Available at: http://www.brown.uk.com/childabuse/gilbert.pdf. [Accessed 2nd March 2016].

Local Safeguarding Children Board .(2009). *Serious Case Review: Baby Peter Executive Summary February 2009* [Online]. Available at: http://www.haringeylscb.org/sites/haringeylscb/files/executive_summary_peter_final.
pdf. [Accessed 10th Febuary 2016].

McCoy M. L. & Keen, S. M. (2009). *Child abuse and neglect*. New York: Psychology Press.

McGree, S. (2016). Class notes: Research Methods. Athlone Institute of Technology, Department of Humanities.

Murphy, F. D., Buckley, H. & Joyce, L. (2005). *The Ferns Report. Presented by the Ferns Inquiry to the Minister for Health and Children.* Dublin: Government Publications.

Nestor, J. (2011). An Introduction to Family Law (4th Ed.). Dublin: Gill & Macmillan.

NSPCC. (2014). Exploring the case for mandatory reporting: a summary of a roundtable hosted by the NSPCC [Online]. Available at:

https://www.nspcc.org.uk/globalassets/documents/information-service/exploring-case-mandatory-reporting-roundtable-summary.pdf. [Accessed 29th April 2016].

Oireachtas Joint Committee on Health and Children .(2014). *Update on Child and Family Services: Child and Family Agency* [Online]. Available at: www.kildarestreet.com/committees/?id=2014-09-25a.287. [Accessed 7th January 2016].

O'Mahony, C., Shore, C., Burns, K. & Parkes, A. (2012). Child Care Proceedings in the District Court: what do we really know? *Irish Journal of Family Law*, 2, 49-56.

Pollak, J. & Levy, S. (1989). Countertransference and Failure to Report Child Abuse and Neglect. *Child Abuse and Neglect*, 13, 515-522.

Polnay, J. C. (2000). General Practitioners and Child Protection Case Conference Participation. *Child Abuse Review*, 9, 108-123.

Rubin, A & Babbie, E.R. (2014). *Research Methods for Social Work* (8th Ed.). USA: Cengage Learning.

Scottish Government (2014). *National Guidance for Child Protection in Scotland*. Edinburgh: Scottish Government

Silverman, D. (2013). *Doing Qualitative Research* (4th Ed.). London: Sage Publications Ltd

South Eastern Health Board (1993). Kilkenny incest investigation team headed by Catherine McGuinness; report presented to Mr. Brendan Howlin T.D. Minister for Health by South Eastern Health Board May 1993. Dublin: Stationery Office.

Stanley, J. & Goddard, C. (2002). *In the Firing Line. Violence & power in child protection work.* Chichester: Wiley.

Strauss, A.L. (1987). *Qualitative Analysis for Social Scientists*. Cambridge: University Press.

Tracy, S.J. (2010). Qualitative Quality: Eight "Big-Tent" Criteria for Excellent Qualitative Research. *Qualitative Inquiry*, 16(10), 837-851.

Tusla Child & Family Agency. (2012). *Review of Adequacy for HSE Children and Family Services 2012* [Online]. Available at:

http://www.tusla.ie/uploads/content/REVIEW_OF_ADEQUACY_2012_FINAL__signe d_by_GJ__amended_26_06_2014.pdf. [Accessed 18th March 2016].

Tusla Child & Family Agency .(2013). *National Guidance and Local Implementation:*A National Practice Model for all Agencies working with Children, Young People and their Families [Online]. Available at:

http://www.tusla.ie/uploads/content/Tusla Meitheal A National Practice Model.pdf. [Accessed 4th May 2016].

Tusla Child and Family Agency. (2014). *Quarter 3 2014: National Performance activity Report* [Online]. Available at:

http://www.tusla.ie/uploads/content/National Performance Activity Report Quarter 3 2014 Final %282%29.pdf. [Accessed 7th January 2016].

UNCRC. (1989). [Online]. Available at: http://www2.ohchr.or...ish/law/crc.htm. [Accessed 1st March 2016].

UNICEF. (2013). *Child Protection Manual: The best way to protect children is to empower them to protect themselves* [Online]. Available at: http://www.unicef.org/violencestudy/pdf/CP%20Manual%20-%20Stage%201.pdf. [Accessed 10th March 2016].

Videka, L., Gopalan, G. & Bauta, B.H. (2014). Child abuse and neglect. In A. Gillerman (3rd Eds.), *Handbook of Social Work Practice with Vulnerable and Resilient Populations*. New York: Columbia University Press, p. 248-268.

Appendix

Appendix 1: Letter of introduction



To whom it may concern

My name is Ann Kenny and I am a student at Athlone Institute of Technology. The course I am undertaking is the MA in Child and Youth Studies. As part of the course I am required to complete a research project. I have chosen to explore the views of childcare practitioners of the implementation of mandatory reporting of suspected child abuse and neglect within homework club settings.

The research is supervised by a lecturer in the Department of Humanities. I hope to conduct one to one interviews with practitioners with the purpose of finding out their opinions towards mandatory reporting of suspected child abuse and neglect.

If you would agree to take part in the research I would be grateful. If at any time you want to withdraw from the study you may do so. Any of the information collected, will only be used for the sole purpose of my research project and for no other purpose.

Absolute anonymity of all participants will be maintained throughout. The interview will be recorded by Dictaphone and transcribed. The time required for the interviews will be between 30 and 45 minutes. You are welcome to contact me on 0863718010 if you have any questions or would like to receive results of the final project.

Thank you for your time and support.

Appendix 2: Interview Schedule

Demographic questions:

- 1. Age
- 2. Sex
- 3. How long have you been a childcare practitioner?
- 4. What is your level of qualification?

Objective 1: To ascertain the views of the practitioners in relation to the mandatory reporting of child abuse and neglect in relation to their practice.

- 1. From a policy point of view what are your opinions of mandatory reporting of child abuse and neglect?
- 2. What are the positives if any of mandatory reporting?
- 3. What are the negatives if any of mandatory reporting?
- 4. Does mandatory reporting impact on your practice and if so how?

Objective 2: To explore how equipped workers feel in relation to mandatory reporting suspected child abuse/neglect.

- 5. Have you received any training on the identification of child abuse and neglect?
- 6. Have you received any training regarding the reporting of child protection concerns?
- 7. Have you received training regarding the Children First Guidance? If so what did you get out of it? Would you suggest any follow up?
- 8. How confident are you in identifying and reporting suspicions of child abuse and neglect?
- 9. How confident do you feel with the actual process of mandatory reporting?

Objective 3: To make some recommendations on how workers might be assisted regarding the process of mandatory reporting in their work contents.

- 10. What might help you with reporting suspicions of child abuse and neglect in future practice?
- 11. Can you make any suggestions of what you could do to improve your practice of mandatory reporting?
- 12. What could your organisation do to assist you in your practice in relation to mandatory reporting?
- 13. What could outside agencies do to assist you in your practice in relation to mandatory reporting?

Appendix 3: Consent Form

Consent Form

I agree to take part in an interview regarding childcare practitioner's views on the implementation of mandatory reporting. I understand the information gathered will be used for the sole purpose of research and my name or anything that could identify me will not be used in the study. I am also aware that I can withdraw from the research at any time, if I choose.

Name in block capitals	
Signed	 Date
I agree to the interview bein will be destroyed on or befo	g audio recorded and then transcribed. I understand this re 30 th September 2016
Yes	
No	
Signed	Date

Appendix 4: List of accredited counsellors

National Counselling Service

Freephone 1800 670 700 between the hours of 8am and 2am. www.hse-ncs.ie

Faoiseamh Counselling Service

Freephone 1800 331 234 operating on seven days a week from 8am to 2am

One in Four

Provides support and resources for women and men who have experienced sexual abuse.

Contact number is: 01 6624 070.

Paul Daniels

Individual Counsellor / Psychotherapist

Unit 2, Market point, Mullingar, Westmeath 353

meltra@eircom.net

Aspen Counselling and Family life centre

Office Phone: 0863193749 Mobile Phone: 0863193749

Accredited With: The Irish Association for Counselling & Psychotherapy (IACP)

Patricia Gallagher

Individual Counsellor / Psychotherapist

Carrick, Dalystown, Mullingar, Westmeath.

65

patricia-gallagher@hotmail.com

Office Phone: 0833789080 Mobile Phone: 0833789080

Accredited With: The Irish Association for Counselling & Psychotherapy (IACP)

Eamonn Bennett

Individual Counsellor / Psychotherapist

Knockdrin, Mullingar, Westmeath.

Office Phone: 044 9371251

Mobile Phone: 044 9371251

Accredited With: The Irish Council for Psychotherapy (ICP)

Mary Allen

Individual Counsellor / Psychotherapist

Town Centre, Athlone, Westmeath

mary_allen00@msn.com

Office Phone: 0868439456 Mobile Phone: 0868439456

Accredited With: The Irish Association of Humanistic & Integrative Psychotherapy.

(IAHIP); The Irish Council for Psychotherapy (ICP); ECP / WCP

The Child and Family Agency Duty Social Worker

Child and Family Agency, Social Work Department, Athlone Health Centre, Coosan Rd, Athlone, Co. Westmeath.

Phone: 090 6483106