CYPSC

CHILDREN & YOUNG PEOPLE'S SERVICES COMMITTEES

Sligo Leitrim

Framework for Parenting Support Strategy for Sligo and Leitrim

Consultation Report 2021

Acknowledgements

The author is very grateful to members of the study steering group, who gave advice and feedback during the course of this study. I am very grateful to the parents, young people, and support services that completed questionnaires and interviews and participated in focus groups. The wisdom and clarity of all those who participated in the consultation process during the Covid-19 pandemic was exceptional.

Note on the use of the terms 'parent' and 'parenting support'

Throughout this document and its associated publications, the words 'parent' or 'parents' are used. This study takes the definition of 'a parent' as 'Any person who identifies as having a parenting role'[1] (Department of Equality, Disability, Integration and Youth, 2021). This includes parents, guardians, adoptive parents, foster parents, grandparents and kinship parents.

In respect the term 'parenting support' this study takes the definition provided by Gillen et al., (2013) in Tusla's Parenting Support Strategy to comprise "both a style of work and a set of activities that provides information, advice and assistance to parents and carers in relation to the upbringing of their children, in order to maximise their child's potential"[2].

This report and its associated documents are available to download from:
https://www.cypsc.ie/your-county-cypsc/sligo-leitrim
https://www.parenthubslwc.ie

1 Department of Equality, Disability, Integration and Youth, 2021. Statistical Spotlight No.5. Profile of Parents in Ireland. Dublin: Government Publications.

2 Gillen A,. et al,.(2013) Investing in Families: Parenting Support Strategy. Supporting Parents to Improve Outcomes for Children. National Guidance and Local Implementation. Dublin: Child and Family Agency. ISBN: 978-1-905861-17-0

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Executive Summary

The Learning and Development Working Group of Sligo Leitrim Children and Young People's Services Committee (CYPSC) identified the need to formulate a specific Parenting Support Strategy for Sligo and Leitrim. To progress the development of the parenting strategy a Parenting Support Sub Group was established comprising members who have been involved in initiatives centred on supporting parents at all levels across the two counties. As part of the process of establishing a parenting support strategy for the two countries the Working Group undertook a process of consultation with parents, services and young people

The consultation process sought to identify the needs of parents and families and support organisations and how a plan for Sligo and Leitrim could meaningfully respond to parenting supports needs. Based on a review of national policy and legislative changes, a mapping of existing parenting support services alongside consultation with 334 parents, 31 organisations and 14 young people, clear directions were identified to address the needs of parents and organisation across the two counties.

The following figure highlights the key themes that arose from the consultation process.
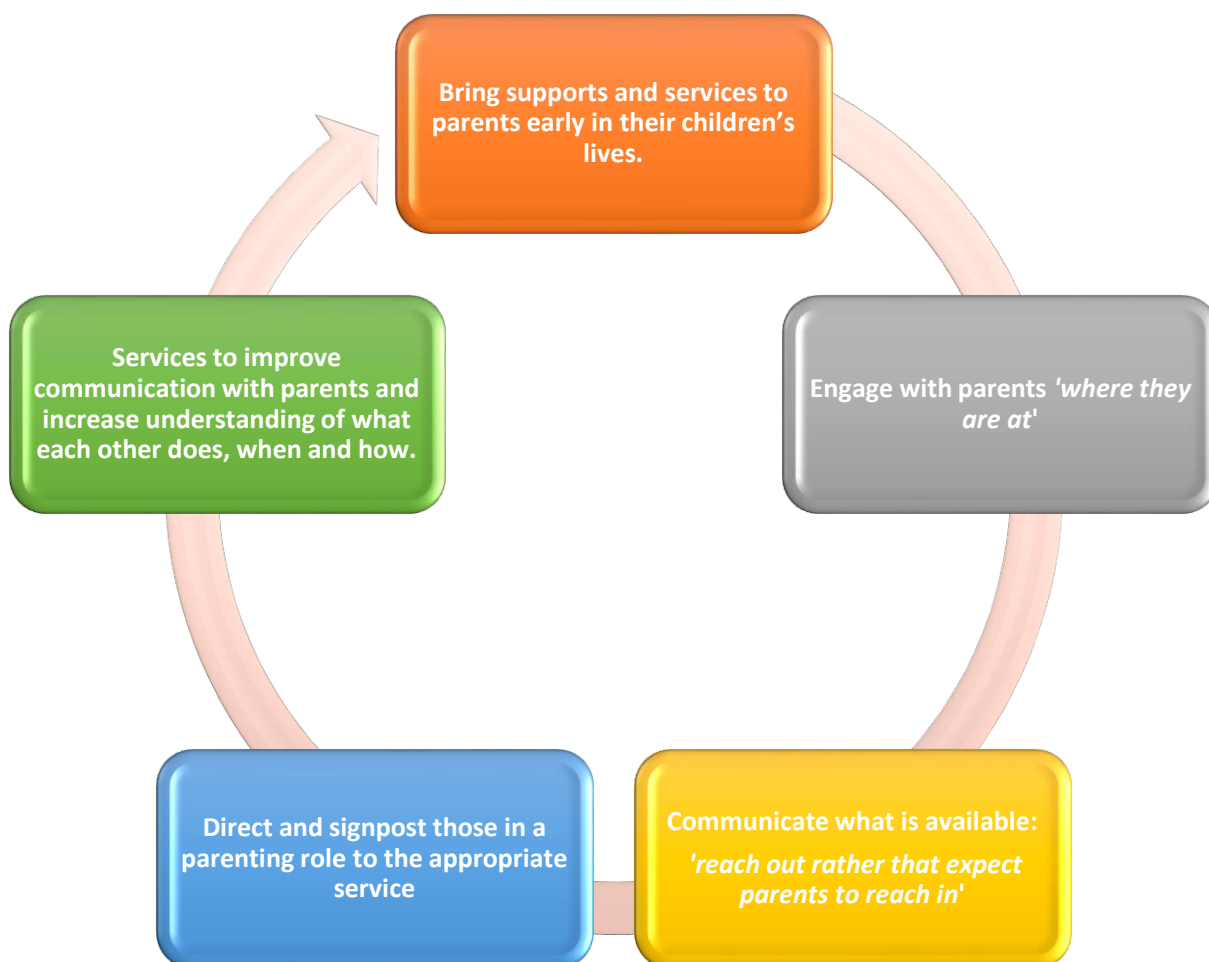
Other outcomes from the consultation further provided clear directions in the development of a Parenting Support Strategy for Sligo and Leitrim, including:

- There is a wide range of parenting support organisations in Counties Sligo and Leitrim, either with a specific focus of delivering parenting supports or part of a menu of support options. Parents felt strongly that collective and co-ordinated efforts needs to be made by service providers to energetically advertise and communicate programmes and supports available to reach as many parents as possible.

- The placement of parenting supports when parents most need them was also a key theme arising from the consultation across all groups and the need to 'normalise' parenting supports early and provide support at the significant stages and transitions when most needed.

- Specific groups of parents were also identified as requiring particular focus including fathers, Traveller, Roma and New Irish communities as well as building services capacity to deliver sensitive supports.

- Parents and services articulated the importance of groups at local community level in providing peer support around exchange of information, experience as well as having the ability to diminish social isolation especially in a predominated rural region.

- Support services also pointed to the need for greater co-ordination of parenting supports to ensure that duplication or confusion does not occur and a need to develop a space that explicitly states the parenting supports that are available to parents.

Chapter 1 introduction

1.1 BACKGROUND AND CONTEXT

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

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

CYPSC's Shared Vision, Next Steps 2019–2024 is a document to assist CYPSC to further develop in a strategic, integrated and sustainable manner to support the co-ordination and planning of efficient and effective services for children and young people. It sets out to further structure and support the capacity of CYPSC to reflect relevant policies and emerging developments and respond to emerging needs, both national and local.

'The CYPSC infrastructure and intelligence of inter-agency working will be used to create the optimum circumstances to advance local and national priorities to enable effective systems change in local communities. Cultivating leadership through 'joined-up working' and 'joined-up thinking', both locally and nationally, will be at the forefront of our efforts. CYPSC will be supported in their mission to improve outcomes for children and young people through coordinated, responsive and innovative services'.[3]

1.1.1 CHILDREN AND YOUNG PEOPLE'S SERVICES COMMITTEE IN SLIGO LEITRIM

Since 2014, the Sligo Leitrim Children and Young People's Services Committee (Sligo Leitrim CYPSC) has worked to ensure that all statutory, community and voluntary organisations involved in the delivery of services to children and families across the region are aware of the existence of the local committee.

Recognising the importance of their support, input and guidance, key actors of those organisations responsible for the delivery of services for children and families participate. Membership of the CYPSC is drawn from the wide range of statutory, community and voluntary organisations agencies in Sligo and Leitrim. The Committee is committed to meaningful engagement with children and young people in the region to ensure its work into the future is underpinned by comprehensive needs assessment and the development of needs-led services. It oversees and directs the priority actions areas arising from the Children and Young People's Plan (CYPP) to achieve better outcomes for children and young people throughout Sligo and Leitrim. With the support of a Coordinator, the CYPSC works with key partner bodies operating at local levels, such as the Local Community Development Committees (LCDCs), and reports nationally to the Department of Children, Equality, Disability, Integration and Youth.

To assist with the development and implementation of the Plan, the Sligo Leitrim CYPSC has established sub groups and working groups, comprised of personnel from across the range of member organisations and geographic region, which meet regularly to address identified and emerging need across the two counties (see Appendix 1: Structure of CYPSC Sligo Leitrim).

1.2 RATIONALE FOR THE PARENTING SUPPORT STUDY

This study originated from a need identified by the Learning and Development Working Group of the Sligo Leitrim Children and Young People's Services Committee (CYPSC): "to formulate a specific Parenting Support Strategy for Sligo and Leitrim"[4].

Arising from a draft discussion paper prepared to inform the conversation regarding the development of such a strategy a Parenting Strategy Sub-group was established. In seeking to ensure that those in a parenting role, children and young people were at the centre of the development of the strategy the sub group undertook with the support of an independent researcher an extensive consultation process to:

- Identify the range of parenting supports being provided in Sligo and Leitrim.
- Parents' perceptions in relation to the range of supports provided.
- Specific gaps and unique needs of parents in Sligo and Leitrim, and
- Gaps in parenting supports that could be provided through the CYPSC.

On foot of the consultation process, the sub group members considered the consultation outcomes between May and October 2021 resulting in the production of a Parenting Support Strategy for Sligo and Leitrim 2022 - 2026.
This document is the report of the consultation outcomes examining parenting support needs undertaken in Countries Sligo and Leitrim between January and May 2021.

In order to set the context for presentation of the consultation outcomes, the following section explores what is meant by 'parenting supports' and the 'parenting supported services' that reflect the definitions of parenting supports.

1.3 DEFINING PARENTING SUPPORT

A review of literature undertaken in the course of this study firstly focused on defining parenting support. Parenting support is understood as being consistent with the style of work in the family support approach, potentially formal, semi-formal or informal. The principle is of minimum intervention and is driven by the needs of the family (Gillen at al., 2013). According to the Department of Children and Youth Affairs, (2014) parenting support sits within the broader concept of family support, whereby "supporting parents to parent confidently and positively is one of the primary, universal and most effective supports that the State can provide along the continuum of family support"[5].
However, there appears to be no one definition of parenting support within Irish literature with much of parenting support being defined by the delivery of services that "can support parents directly or indirectly towards better outcomes for their families"[6]. Moran et al. (2004) took parenting support to include "an intervention for parents or carers aimed at reducing risks and/or promoting protective factors for their children, in relation to their

4   Call for Tenders: Stakeholder Consultation and Development of Framework for Parenting Support Strategy for Sligo Leitrim. November 2021. Mayo Sligo Leitrim Education and Training Board.
5   Department of Children and Youth Affairs (2014) Better Outcomes, Brighter Futures: The National Policy Framework for Children and Young People 2014 – 2020. Dublin: Department of Children and Youth Affairs.
6   Connolly, N. et al., (2017) Parenting Support and Parental Participation: Mapping Parenting Support in the Irish Context. Galway: UNESCO Child and Family Research Centre. National University of Ireland Galway.

social, physical and emotional wellbeing"[7].

This study takes the definition provided by Gillen et al., (2013) in Tusla's Parenting Support Strategy to comprise "both a style of work and a set of activities that provides information, advice and assistance to parents and carers in relation to the upbringing of their children, in order to maximise their child's potential"[8].

Based on this definition, parenting supports can comprise a wide spectrum of supports and services such as information provision to parents about parenting, structured parenting classes or programmes, one-to-one support, parental leave entitlements, formal and non-formal networks and service provision oriented to reduce social isolation and enhance peer to peer supports.

Parenting supports can therefore take the form a "service offered to people in everyday life"[9]. The experiences, circumstances and level of resilience of parents can vary over the parenting journey. It is apparent from the literature and service mapping that some families may require universal supports while others may have more complex needs requiring more tailored interventions to their needs at a particular time or over a period of time. Therefore, parenting supports can take the form of universal supports such as 'parenting classes', to more targeted supports provided by "specialist services to support families in particular situations, dealing with specific problems that may present at different times in the life-course of the child"[10].

Supporting parents "to parent confidently and positively" is the first of six transformational goals of Better Outcomes, Brighter Futures in the national policy framework for children and young people, which recognises that parenting programmes and interventions should be proven to increase parenting skills, confidence and capacity; reduce parental stress […] and increase the enjoyment of, and satisfaction in parenting[11].

Furthermore according to Better Outcomes Brighter Futures, "research is increasingly pointing to the benefits of positive parenting and a supportive home environment in aiding childhood development and influencing future prospects and social mobility"[12].

1.4 STUDY AIMS AND QUESTIONS

The aims of this study are to inform and assist in the development of a Parenting Support Strategy for Sligo Leitrim CYPSC[13]. As referred to previously, the study evolved from recognition that parenting support needs exist and additional needs are emerging in Sligo Leitrim, including those arising from the impacts of Covid-19 related public health restrictions.

7   Moran et al., (2004) What works in Parenting Support? A Review of International Evidence, Nottingham: Department of Education and Skills Policy Research Bureau.
8   Gillen A,. et al,.(2013) Investing in Families: Parenting Support Strategy. Supporting Parents to Improve Outcomes for Children. National Guidance and Local Implementation. Dublin: Child and Family Agency. ISBN: 978-1-905861-17-0
9   Daly, Mary (2015) Parenting Support in European Countries: A Complex Development in Social Policy. Social Policy and Society, 14:4, 593–595. doi:10.1017/S1474746415000317
10   Connolly, N. et al., (2017) Parenting Support and Parental Participation: Mapping Parenting Support in the Irish Context. Galway: UNESCO Child and Family Research Centre. National University of Ireland Galway.
11   Department of Children and Youth Affairs (2014) Better Outcomes, Brighter Futures: The National Policy Framework for Children and Young People 2014 – 2020. Dublin: Government Publications.
12   ibid
13   Call for Tenders: Stakeholder Consultation and Development of Framework for Parenting Support Strategy for Sligo Leitrim. November 2021. Mayo Sligo Leitrim Education and Training Board.

Therefore, the consultation sought to:

- Identify issues of critical importance to the physical, psychological, social, economic, cultural and emotional wellbeing of parents, families and communities as well as to the operational capacity of support and service providers, and
- Contribute to the development of an evidence-informed strategy that will respond effectively to these issues over a three-year period (2022-2026).

More specifically, the study questions were in response to the original terms of reference and included:

- Are the services and supports currently provided in the region meeting the support needs of parents and their children in Sligo and Leitrim?
- What these services are and where they are located?
- Is there an overlap of support/duplication of work?
- What are the gaps in support?
- Post Covid- 19, what will be required to support parents and children?
- What do parents in Sligo and Leitrim want or need by way of parenting supports?
- How can parents have ownership of the parenting supports?

The resulting document is based on a rich combination of administrative information, survey data, detailed analyses and information from in-depth interviews with stakeholders. The study comprised of six main phases in order to provide a comprehensive picture of the current operation of parent supports in Sligo Leitrim and future parenting needs. The consultation process was approached from three distinct viewpoints, namely identifying:

a) The needs of parents and families, deficits in current service provision and the process of delivery and capacity-building measures that would meaningfully respond to parenting supports needs.

b) The needs of parenting support organisations serving the area, the deficits in activities and services.

c) The supports to address those needs and possible strategies to meaningfully address them.

The detailed methodology used in the study is outlined in the following section.

1.5 DATA SOURCES AND METHODOLOGY

1.5.1 RECRUITMENT

The methodology undertaken comprises a sociodemographic profile of Sligo and Leitrim, one-to-one qualitative explorations through interviews and focus groups sessions with parents, services and young people. Convenience sampling was used to generate the sample of participants with inclusion criteria of being a parent, a service providing support to parents/families in Sligo and Leitrim. Participants were recruited with the assistance of local parenting sub group representatives.

The qualitative exploration comprised of 51 in-depth, one-to-one, semi-structured interviews with a person in a parenting role, and 33 participants took part in the seven focus group sessions. Parents contacted the researcher directly and dates, times, and locations for interviews to take place were arranged. Interviews were completed by the researcher and took place at varying times, during the day and evenings, to facilitate parent's participation.

Participants were also recruited through requests for participants provided to stakeholder databases, a local press awareness articles and posts on social media platforms. In addition to the in-depth interviews, 250 parents completed a questionnaire detailing key needs, opinion and recommendations.

Additionally, thirty-one to one interviews were held with representatives of support organisations/services. Support service participants at the consultations involved local service providers and advocacy groups.

A key component in the consultation process was to include a sample of young people. Again a local stakeholder organisation supported the identification of a wide sample of young people willing to take part in the study. A consent form was sent to parents of those young people under the age of 18 and during the focus group session held via zoom another adult was present.

1.5.2 DATA COLLECTION: INTERVIEWS AND FOCUS GROUPS

Prior to the interviews, each participant was given an information sheet, with detailed information on the study, confidentiality, and the complaints procedure. All interviews and focus groups were completed online using Zoom/Teams or by phone.

An interview guide was developed to provide structure and focus to the interviews, which were transcribed verbatim by the researcher.
Additional notes were also recorded by the interviewer immediately following the interviews to capture any additional aspects. The semi-structured interview guide contained purposefully broad open-ended questions, combined with probing questions, which were designed to elicit deeper exploration and understanding of the participant's experience of being a parent, a service provider or a child of a parent, the challenges, supports and perceived barriers to engagement in parenting supports.

Follow-up questions were asked of the participants where necessary to clarify information or gain further useful insights.

1.5.3 DATA COLLECTION: SURVEY OF PARENTS

This phase involved an on line survey to parents in Sligo and Leitrim in order to provide more detailed information than is available from administrative data. The questionnaires focussed on:

- Perceptions of current parenting support provision, strengths and weaknesses;
- Perceived relationship with parenting support provision, and
- Required outcomes for parents in respect to their needs.

The study received an extremely high response to the survey, with detailed questionnaires completed by 250 parents. Survey findings were used to document the prevalence of engagement in different types of parenting support provision and to examine variation in provision and perceptions, using cross-tabulations.

1.5.4 APPROACH TO DATA ANALYSIS

The study involved the collection of a range of data, both quantitative and qualitative, from a number of sources, including parents, services and the young people. Rather than present information from the different sources as separate accounts, the analytical approach sought to integrate insights from different forms of data and relate these to the central aims of the research.

The central themes were identified as follows:
- The nature of provision of supports around which activities and interventions are provided;
- Identification and targeting of parenting support needs;
- Parenting outcomes of the interventions provided (where applicable);
- Overall strengths and weaknesses of the spread, nature and outcomes of parenting supports provided.

Thematic analysis, with reference to the framework analysis outlined by Richie et al (2003)[14], was used to analyse the responses from the consultation participants. The transcribed text was analysed utilising an inductive thematic analysis comprising three steps. Firstly, the researcher read the transcripts repeatedly to form an overall impression of the content. An initial coding framework was then developed by identifying words and phrases which described the parents' perspectives on their role, challenges and barriers encountered. The codes were then collated into themes which were reviewed and refined resulting in the identification of consistent overarching themes and sub-themes which emerged from the data.

The data provided by participants in the on-line survey was saved, managed, and analysed in Excel. Data were anonymised by assigning numbers to participants. Survey findings were used to document the prevalence of different practices (e.g. types of provision) and to examine variation across different types of parenting supports in provision and perceptions, using cross-tabulations. Tests of statistical significance are used to compare different types of clusters.

The consultation process was undertaken on behalf of the CYPSC Learning and Development Working Group by a Social Research Consultant. The entire process was overseen by the Parenting Sub Group.   Draft reports were presented at a number of occasions throughout the consultation process to the Parenting Sub Group of Sligo Leitrim CYPSC in order to inform the recommendations and the strategic planning process.

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14   *Ritchie J, Lewis J. Qualitative research practice: a guide for social science students and researchers. London: Sage; 2003.*

1.5.6 ETHICAL APPROACH AND SAFETY

Participants' safety and emotional wellbeing was an important consideration of the research and has always been to the forefront. The interviews were completed by the researcher and adhered to ethical guidelines.

During the interview and focus group process the primary objective was to create a safe space for all study participants to explore and give voice to their experience of being a parent, supporting a parent or being the child of a parent including the influences, joys, and challenges.

Prior to commencing the interviews and focus group sessions, participants were given clear assurances in respect to the confidentiality of the process, detailed information regarding the study and contact details of the researcher. Participants were given the option to withdraw from the consultation process at any time.

1.6. DESK RESEARCH:

1.6.1 PARENTING SUPPORTS: IRISH LEGISLATIVE AND POLICY CONTEXT

Before presenting the main findings, this study is placed in the context of policy and legislation on parenting support. This involved an analysis of a policy reports on parenting supports.

1.6.2 ANALYSIS OF THE NATIONAL AND LOCAL OPERATING CONTEXT

A brief national profile of parents was examined to place the study and the subsequent parenting support in a national context. A combined profile of Sligo-Leitrim drew on the CYPSC area boundaries. Drawing on Census data from 2016, supplemented where possible with more up to date data a brief profile of the area was compiled.

In the development of a local parenting support profile, the rich data already collected and supplied by various service providers and local information resources such as the Sligo Leitrim directory of services was useful in compiling baseline data on topics such as:
- Parenting interventions.
- Local statistical data, and Existing local resources that support the parenting process directly and indirectly in Sligo and Leitrim.

1.7 STRUCTURE OF THE REPORT

For the purposes of supporting the development of a parenting support strategy for Sligo-Leitrim this report is presented in two parts with Part 1 comprising:

Chapter 2 places this study in the context of statistical, legislative and policy existing on parenting and parenting supports in Ireland.

Chapter 3 outlines the nature of the local geographical and operating context and draws on qualitative data to explore the parenting support structures operating environment on the ground.

Part 2 comprises:
Chapters 4 and 5, draws together the outcomes of the consultation process under different themes.

The final chapter indicates the implications of the study findings and presents recommendations regarding or the future strategic focus.

Chapter 2 Parenting in Ireland: Statistical, Legislative and Policy Context

2.1 INTRODUCTION

Despite the frequent use of the term 'parent' or 'parents' parents are not a homogenous group. Like any 'group' in society parents are made up of people from diverse social and cultural and economic status. Nonetheless constructing a profile of those in a parenting role is useful in planning actions, policy and the development and implementation of support services to meet the diverse and varied needs that may arise. Therefore, the purpose of this section is to highlight the national and local profile of the parent population especially that relevant to Sligo and Leitrim. The local profile in particular provides an important backdrop to the area in which the consultation was conducted, specifically its geographical profile and significant statistical information and the level and depth of existing parenting (and family) support service provision.

Understanding the varied legislative and policy development in respect to parents in Ireland is crucial in order to effectively take account of how parents, children and young people are viewed and supported by policy makers and how policy and legislation has evolved to reflect changing views. Accordingly, the second part of this section presents a short review of the position of parenting and parent supports in the national Irish legislative and policy context.

2.2 STATISTICAL PROFILE OF PARENTS IN IRELAND

The Statistical Spotlight #5: Profile of Parents in Ireland (2021) suggests that "there are over 1 million parents in Ireland living with children under 18 years of age".
Census 2016[15] reveals that there were 1,218,370 families[16] in the State, 862,721 of these were families with children, an increase of 28,455 since 2011. A notable development highlighted in Census 2016 was that while the number of families has grown over the period 1996 to 2016 the average number of children per family fell markedly between 1996 and 2006 before levelling off in 2011 and 2016.

The average number of children per family remained at 1.38 in 2011 and 2016.

Department of Children, Equality, Disability, Integration and Youth Gov.ie/dcediy

The most common 'family type' among parents living with at least one child under 18 was "married with children". The likelihood of being married increased with the number of children. On average, 75.3% of parents living with children under 18 were married, ranging from 65.4% of parents living with one child under 18, to 84.7% of parents living with three children under 18. The second most common family type among parents with at least one child under 18 was "cohabiting with children", which ranged from 16.5% in families with one child under 18 to 8.9% in families with three children under 18.

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15   CSO (2016) Census of Population Profile 4 Families and Households.
16   For census purposes, a family is defined as a couple with or without children, or a one parent family with one or more children.

Census 2016 also indicated that there were 218,817 (25.4%) family units with children (of any age) headed by a parent who was parenting alone. This represented approximately one in four of families with children and one in five of all families (25.4% of all family units with children in Ireland and 18% of all family units).

2.2.1 NUMBER OF BIRTHS

According to the CSO Vital Statistics[17] (Q1, 2021) there were 13,895 births in quarter 1 2021, 476 births or 3.3% less than the same period in 2020. This corresponds to a birth rate of 11.2 per 1,000 population, a decrease of 0.5 points per thousand population from quarter 1 2020. There were 9,564 deaths in quarter 1 2021, an increase of 10.3% (or 890 deaths) from quarter 1 2020. This equates to a death rate of 7.7 per 1,000 population, an increase of 0.7 points from quarter 1 2020. There were 37 infant deaths registered in quarter 1 2021 giving an infant mortality rate of 2.7 per 1,000 live births. The number of births less the number of deaths in quarter 1 2021 resulted in a natural increase of population of 4,331 persons. There were 7,008 male births and 6,887 female births in quarter 1, 2021.

2.2.2 PARENTAL AGE

According to Census 2016, a total of 45.1% of all parents living with at least one child under 18 were between the ages of 35 and 44. The profile of parents in Ireland provides a more up to date statistics in respect to parental age:

"In 2018, Ireland was tied with Spain as the country with the highest mean age of women at childbirth (32.2) in the EU 28. The mean age of women at childbirth in Ireland has consistently remained higher that the EU 28 average since 2008, and has been either the highest or second highest in EU every year during this time"[18].

The CSO Vital Statistics[19] (Q1, 2021) confirms this trend with the average age of first time mothers was 31.4, the same age as recorded for the same period in the previous year. The average age of all mothers at maternity for births registered in quarter 1 2021 was 33.1 years, which is also the same age as recorded in quarter 1 2020. The average age of first time mothers outside marriage/civil partnership was 29.6, while the average age of all mothers outside marriage/civil partnership was 30.9 years. In the same quarter in 2020, the average age of mothers having their first baby outside marriage/civil partnership was 29.4 years while it was 30.7 years for all mothers for births registered outside of marriage/civil partnership.

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17   *CSO Vital Statistics (August 2021) Quarter 1 2021.*
18   *Department of Children, Equality, Disability, Integration and Youth (2021. The Statistical Spotlight #5: Profile of Parents in Ireland.*
19   *CSO Vital Statistics (August 2021) Quarter 1 2021.*

2.2.3 LOCATION OF BIRTHS

In 2016, the highest number of births registered was in Dublin City with 1,360 (9.8% of total live births in the country) followed by Cork County with 1,218 (8.8%) registered births. Longford had the lowest number with 117 (0.8%) registered births in quarter 1 2021. The highest number of births registered in quarter 1 2020 was in Dublin City which accounted for 1,585 or 11.0% of births followed by Cork County with 1,270 (8.8%). Leitrim had the lowest number, 96 births (0.7%), registered in quarter 1 2020.

Examining birth trends from an urban/rural perspective Census 2016 indicated that the majority of parents (61%) lived in aggregate town areas, i.e. towns with a total population compared with 39% living in a rural area.

2.2.4 THOSE PARENTING ALONE

Census 2016 reveals that the number of one parent families stood at 218,817 in 2016 of which 189,112 were mothers and 29,705 were fathers. The majority, 125,840, had just one child. When examined by age status strong differences appear between genders. One parent fathers were on average considerably older than their female counterparts with 68 per cent aged 50 years or over compared with just 38.3 per cent of women.

Single women made up 44.5 per cent of one parent mothers, whereas among one parent fathers widowhood dominated, accounting for 39.4 per cent of the total. Just over 1 in 5 one parent mothers were widowed, while a further 58,127 were either separated or divorced, accounting for 30.7 per cent of the group.

Most one parent families were living in one-family households. Of the 20,278 one parent families in multi-family households 18,717 were one parent mothers with the majority, 75.5 per cent (14,134) having just one child.

Only 47.8 per cent of single parents were at work, compared with 70.2 per cent for heads of two-parent families. Those looking after the home or family were also prevalent among one parent families, accounting for 17.7 per cent, although this was unevenly spread between men and women. Only 4 per cent of one parent fathers were homemakers, compared with 19.8 per cent of one parent mothers.

2.2.5 POVERTY AND DEPRIVATION STATISTICS

According to data published by the Central Statistics Office (CSO) and the Economic and Social Research Institute in 2019, the poverty line is calculated as being 60% of median income — €275.73 a week. Now, two years later, this amount has increased to €286.48 for a single person. There are some 190,000 children living in Irish households experiencing poverty. Before the onset of the Covid-19 pandemic, some 630,000 people were living below the poverty line — about one-eighth of the entire country.

The CSO's Survey on Income and Living Conditions (SILC) (2019) shows that the proportion of the population in poverty has fallen by about 3% over the last five years. The study also shows that a further 15% of all of those in poverty have a job. Parents and carers comprised 13.4% of those under the poverty line. Those unable to attend work because of illness or disability represented 12.3%, while the unemployed represented 10.9%.

The Survey on Income and Living Conditions (SILC) (2019) indicates that 17.8% of the population was defined as living in enforced deprivation. This compares with 15.1% in 2018. Most socio-demographic groups experienced an increase in 2019 enforced deprivation rates year-on-year. The largest increase was observed in those living in rented accommodation, where 34.4% were living in enforced deprivation in 2019, compared to 27.4% in 2018. There was little change in the year-on-year deprivation rate of those living in owner-occupied accommodation (10.3% in 2019 and 10.0% in 2018). Children under the age of 18 were most likely to be living in enforced deprivation, followed by persons aged 18-64, while those aged 65 and over were the least likely. In 2019, 23.3% of persons aged under 18 were living in enforced deprivation, compared to 17.1% of persons aged 18-64 and 11.2% of persons aged 65 and over. All age groups saw an increase in enforced deprivation rates compared to 2018.

Persons living in households with one adult and children under 18 were significantly more likely than other household types to be living in enforced deprivation (45.4%).

On the whole, households with children and those living alone were more likely to be living in enforced deprivation than other types of adult-only households.

 "At risk of poverty" refers to households with incomes below 60% of the national median income, which is equal to €277 per week/ €14,387 per year. Nationwide, the rate of households considered 'at risk of poverty' was 12.8% in 2019.
This is down from 14% in 2018, and 15.7% in 2017, which indicates a positive change overall. This figure of 29.7% for one-parent households is compared to a rate of 11.9% for two-parent households. This means that those parenting alone are almost three times as likely to be at risk of poverty compared to households with two parents.

Further, data shows that across Europe, households with dependent children that are headed by a parent parenting alone are more than twice as likely to experience "in-work poverty", meaning that they are falling below the income threshold despite being in employment.

In 2012, 8.9% of working lone parents in Ireland were living in poverty, by 2017 this had increased to 20.8%. The rate of in-work poverty among lone parents was five times higher than other households with children (20.8% compared to 4.2%).
Those parenting alone continue to have the lowest disposable income out of all households with children in the State, consistent with 2016 data. Results showed that those parenting alone in Ireland have the second highest rate of income poverty, persistent poverty, and severe deprivation among all EU-15 countries.

Those living in households with one adult and one or more children aged under 18 had the highest deprivation rate in 2019, at 45.4%. This is up from 42.7% in 2018. This rate is 17.1% for households with two adults with 1-3 children aged under 18, meaning that those parenting alone are more than 2.5 times more likely to be living in enforced deprivation as two-parent families.

'Consistent poverty' refers to a combination of both terms above, and thus refers to households with incomes below 60% of the national median income of €264 per week and also experiencing deprivation based on the 11 deprivation indicators. Households with one adult with children aged under 18 continue to have the highest consistent poverty rate among household types, at 17.1%. This rate is 6.1% for households with two adults with 1-3 children aged under 18. Those parenting alone are almost three times as likely to be living in consistent poverty as two-parent households.

2.2.6 PARENTS AND NATIONALITY

In 2016, the Census of Population indicated that Irish parents accounted for 82% of all parents living with a least one child under the age of 18. Non-Irish parents represented 16% and those who did not state their nationality accounted for 2%. The most common non-Irish nationality was Polish (4.6% of all parents in Ireland living with at least one child under 18 were Polish); followed by British (2.8%); Other EU (1.4%); Lithuanian (1.3%); and "Other Asian", i.e. non-Indian Asian (1%).

In respect to mothers nationality more recent data from the CSO states that of the 13,895 births in quarter 1 2021, there were 10,971 babies (79.0%) born to mothers of Irish nationality compared to 11,101 (77.2%) in quarter 1 2020[20]. Mothers whose nationality was classified as of UK nationality represented 2.0% of births, the EU14 (excluding Ireland) represented 1.8%, EU15-27 (excluding UK) represented 8.5% and other (countries excluding Ireland, UK and EU) represented 8.5% of mothers.

2.2.7 PARENTS AND DISABILITY

Of the 1,080,507 parents living with at least one child under 18 recorded in the 2016 Census, 8.2% (88,316) indicated that they had a disability. The majority of parents living with a disability reside in towns (8.7%) while 7.3% of parents living with a disability live in rural areas.

2.2.8 PARENTS HOUSING AND HOMELESSNESS

Census 2016 indicated that the number of married couples with children in rental accommodation increased by 20.1 per cent to 101,741 families between 2011 and 2016, while the numbers in accommodation owned with or without a mortgage fell by 1.6 per cent to 466,576.

The number of cohabiting couples with children in rental accommodation increased by 37.6 per cent to 39,981 families while those in other types of accommodation increased by 14.1 per cent to 35,606. The number of one parent female families in rental accommodation dropped to 87,086, down 2,281 (-2.6%) from 2011, while those in other types of accommodation increased and stood at 102,026, up 5,109 (+5.3%) between 2011 and 2016.

The number of households starting HAP tenancies for the first time rose sharply from 420 in 2014 to 16,930 by 2017, before dropping slightly to 14,540 in 2019. The main household types entering a HAP tenancy in 2019 were a single person with one child (3,550) and a single person (3,180)[21].

There was a marked decrease from 51.4% to 37.3% in the proportion of households on working-age income supports between 2015 and 2019, (including unemployment benefit and assistance), in the year they entered HAP. The percentage of households claiming Children related supports, (including Child Benefit), in the year they entered HAP rose from 48.9% in 2015 to 57.8% in 2018 before dropping to 54.4% in 2019.

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20   CSO Vital Statistics (August 2021) Quarter 1 2021.
21   CSO (2020) Social Housing in Ireland 2019 - Analysis of Housing Assistance Payment (HAP) Scheme

Over one-fifth of households entering HAP in 2019 were referred from homeless services. The proportion of new HAP households who have been referred from homeless services rose steadily from 3.1% in 2014 to 21.1% by 2019.

In August 2021 figures[22] released by the Department of Housing have shown that there are currently 8,212 people accessing emergency accommodation in the State. There are a total of 6,023 adults and 2,189 children, 984 young adults between the ages of 18-24 and a total of 953 families are currently homeless in Ireland. The vast majority of the nation's homeless are in Dublin with 4,220 people accessing accommodation.

One-parent families are disproportionately affected by homelessness. Despite making up only 20 per cent of families in Ireland, one-parent families make up 54 per cent of homeless families.

2.3 PARENTING SUPPORT: OVERVIEW OF THE IRISH LEGISLATIVE AND POLICY CONTEXT

Drawing on web-based and academic resources a review of the parenting support legislation and policy environment in the Irish context provides some insight into its development and its current place within the Irish policy context. It is clear that parenting support has been and continues to be knitted into a myriad of strategies, actions plans, policies and various ministries.

Taking a chronological approach, the 1990s provided a range of key legislative and family support policy that have afforded a seminal foundation and context for the development of parent, child and youth supports, services and rights in Ireland.

The introduction of the Childcare Act, 1991 saw a wide ranging piece of legislation that regulates childcare and child protection policy in Ireland. (The Department of Children and Youth Affairs is currently reviewing the Child Care Act 1991. The review is in line with a commitment in Better Outcomes Brighter Futures – The National Policy Framework for Children and Young People 2014-2020 which states that the Government commits to "review and reform as necessary, the Child Care Act 1991".[23]).

In 1992, Ireland ratified the United Nations Convention on the Rights of the Child (1989) providing a comprehensive legal and policy framework for rights based parenting support in Ireland.

The Parental Leave Act, 1998 (No.30 of 1998) (and the Parental Leave Amendment Act, 2006 (No.13 of 2006), are known collectively as the Parental Leave Acts) gives effect to an EU Directive on parental leave (96/34/EC) and came into operation in December, 1998. It provides a statutory entitlement to leave for employees who are parents. It was further amended by provisions of the Civil Law (Miscellaneous Provisions) Acts 2008. Also in 1998, Strengthening Families for Life was the final report of the Commission on the made significant recommendations for parents including supports for parents through the development of family support services, a range of information provision as well as an emphasis on collaboration with parents.

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22   *These numbers include only those currently accommodated in emergency accommodation funded by housing authorities and do not include homeless families in other situations. As such, the real number of families experiencing homelessness is likely to be higher than the report suggests.*
23   *ibid*

In 2000, the first National Children's Strategy, Our Children - Their Lives, was published in November 2000 after extensive consultation with parents and groups working with children, as well as with children themselves. The strategy was a 10-year plan of action, which called on the statutory agencies, the voluntary sector and local communities to work to improve the quality of all children's lives. It includes a range of actions across such areas as giving children a voice (so that their views are considered in relation to matters that affect them), eliminating child poverty, ensuring children have access to play and recreation facilities, and improving research on children's lives in Ireland. The strategy provided the first comprehensive national policy document for the full range of statutory and non-statutory providers in the development of services for children and was underpinned by the United Nations Convention on the Rights of the Child.

The strategy adopted a 'whole child perspective', recognising the multidimensional nature of all aspects of children's lives. In addition, it identified the need to provide appropriate supports for parents. Also in 2001, the Family Support Agency Act highlighted the need to promote information on parenting.

The Children and Young People's Services Committees (CYPSCs) were established as four pilots in 2007 followed by a phased roll out nationally resulting in 27 CYPSC[24] areas established across the country.

The Child and Family Agency Act, 2013 bestowed on Tusla, the Child and Family Agency, a range of responsibilities for supporting and promoting the development, welfare and protection of children and the effective functioning of families.

Tusla's Parenting Support Strategy (Gillen et al., 2013) established Tusla's strategic direction in supporting parents to improve outcomes for children and young people. The strategy 'Investing in Families' emphasised the development of a National Service Delivery Framework (NSDF) and Child and Family Support Networks (CFSNs) as a means of providing parenting support.
The strategy focuses on a continuum of supports from universal support to targeted and specialist services[25]. The strategy identifies the Hardiker model (1991) as useful for considering the level of service response according to the level of need. Families may move up or down on this continuum. Parenting support is also considered across the lifecourse, from preparing for and becoming a parent birth to 5 years, 6-12 years and 13- 17 years. The rationale for parenting support was clearly outlined in 'Why Support Parents?' to include:

"At the individual family level, preventative parenting support can enhance family well-being and reduce the prevalence of problems later in a child's life. At the community level, the provision of parenting supports can enhance the well-being of communities and promote greater social cohesion. Finally, at the societal level, support for parents can ensure a more effective use of resources, can serve to reduce inequalities, and can develop and promote human and social capital".
(Source: Investing in Families Chapter 1.2 p.4)

'50 Messages' was produced to accompany 'Investing in Families' and comprises best research and evidence-based statements on "Supporting Parents in their Parenting Role with Guidance Statements for professionals. These statements seek to guide practitioners to be 'on message' around how and why to support parents through general parenting, the different stages of the family lifecourse and to provide a safe and positive pathway through the different contexts and experiences that families encounter"[26]

24   https://www.cypsc.ie/
25   Gillen A,. et al,.(2013) Investing in Families: Parenting Support Strategy. Supporting Parents to Improve Outcomes for Children. National Guidance and Local Implementation. Dublin: Child and Family Agency. ISBN: 978-1-905861-17-0
26   Gillen A,. et al,.(2014) 50 Messages To Accompany Investing In Families: Parenting Support Strategy. Supporting Parents to

In 2014, Better Outcomes, Brighter Futures: The National Policy Framework for Children and Young People was published by the Department of Children and Youth Affairs. This framework "aligns government commitments to children and young people against five national outcomes. The policy framework identifies six areas that have the potential to improve outcomes and transform the effectiveness of existing policies, services and resources in achieving these national outcomes"[27].

Supporting parents is present in the first of its six transformational goals, whereby "parents will experience improved support in the important task of parenting and feel confidence, informed and able". The framework recognises the importance of parents in a child's life and the benefits of positive parenting, while promoting better support for parents as a priority through increased provision of supports to all parents:

"through universal access to good-quality parenting advice and programmes, and access to affordable quality childcare, as well as targeted, evidence-based supports to those parents with greatest needs".
(Department of Children and Youth Affairs, 2014).
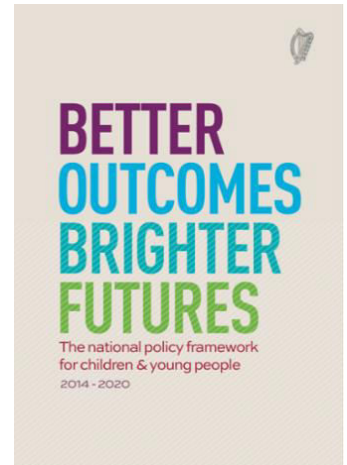
In addition, in a High Level Policy Statement on Parenting and Family Support (Department of Children and Youth Affairs, 2015) published in 2015 identifies the development of a system of supporting parents and families in seeking to build on family strengths, wherever possible, and values informal supports networks, that can readily deliver supports to children and their families based on inter-agency, cross-organisational and inter-disciplinary working[28].

Significantly in light of the development of a Sligo Leitrim Parenting Support Strategy, the High Level Policy Statement further encourages the availability of a coherent continuum of local supports to all parents and families that can be accessed easily and in a timely manner.

The Statement also positions the Children and Young People's Services Committees (CYPSCs) as an important forum for engagement between service providers. As previously stated, the purpose of Children and Young People's Services Committees is to secure better outcomes for children and young people through more effective integration of existing services and interventions at local level.

At local level, CYPSCs are county-level committees that connect statutory, community and voluntary providers of services, to children and young people, affording an opportunity for joint planning and co-ordination of activity, and oversight of local policy and provision, to ensure that children, young people and their families receive best possible services.

In 2015, under Outcome 3 'Safe and Protected from Harm' of the National Youth Strategy 2015 – 2020, positive parenting is recognised as a supportive factor on the lives of young people (10 -24 years)[29].

Improve Outcomes for Children. National Guidance and Local Implementation. Dublin: Child and Family Agency.
27   https://www.gov.ie/en/publication/775847-better-outcomes-brighter-futures/
28   Department of Children and Youth Affairs (2015) High-Level Policy Statement on Supporting Parents and Families ('Parenting and Family Support'). https://www.gov.ie/en/publication/09e8d6-highlevel-policy-statement-on-supporting-parents-and-families/
29   Department of Children and Youth Affairs (2015) National Youth Strategy 2015–2020 Dublin: Government Publications.

Ireland's first National Maternity Strategy, Creating A Better Future Together, 2016 – 2026 charts the future for maternity and neonatal care in Ireland, to ensure maternity care will be safe, standardised, of high-quality and offer a better experience and more choice to women and their families[30].

The Health Services Executive (2017) Breastfeeding in a Healthy Ireland: Health Service Breastfeeding Action Plan 2016-2021[31] and a range of other policies and strategies in the aforementioned 'National Maternity Strategy' and 'Better Outcomes, Brighter Futures' includes a range of supports for mothers to increase breastfeeding rates in Ireland. A particular interesting aspect of both the National Maternity Strategy and the Breastfeeding for Ireland Action Plan is the limited mention of fathers in their role as supporters of mothers and as parents.

The National Traveller and Roma Inclusion Strategy 2017 – 2021 (Department of Children, Equality, Disability, Integration and Youth, 2017) while not explicitly targeting specific parenting supports did identify that appropriate, culturally sensitive, preventative and early intervention supports should be available for Traveller and Roma families, if and when required, to enable children to live in a safe and secure environment. A key action includes "All relevant public bodies, including the Health Service Executive and TUSLA, will develop initiatives in collaboration with Traveller and Roma organisations to inform and empower families about available resources and supports"[32].

In 2018, the First 5, A Whole-of-Government Strategy for Babies, Young Children and their Families 2019-2028 (Department of Children and Youth Affairs, 2018) seeks to improve the lives of babies, young children and their families. It is a ten-year plan supporting children in having positive early experiences and "a great start in life"[33].

First 5 contains a key action to develop a national model of parenting services, so understanding the varied lives of parents living in Ireland is crucial in order to effectively take account of parents and children in a range of contexts and parenting relationships. The First 5 seeks to streamline and improve existing parenting supports provided across a range of Government Departments and State Agencies. Such supports outlined in First 5 include:

First5
A Whole-of-Government Strategy for Babies, Young Children and their Families 2019-2028

- Accessible, high-quality information and guidance made available for parents to promote healthy behaviours,
- Facilitate positive play-based early learning, and
- Create the conditions to form and maintain strong parent-child relationships and a continuum of parenting services - ranging from universal to targeted - including high-quality parenting programmes.

In 2018, the LGBTI+ National Youth Strategy 2018-2020 under Goal 2 Action 6 proposes to "expand and development supports to parents and families of LGBTI+ young people"[34].

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30   Department of Health 2016 National Maternity Strategy, Creating A Better Future Together, 2016 – 2026. Dublin: Government Publications.
31   Health Services Executive (2017) Breastfeeding in a Healthy Ireland: Health Service Breastfeeding Action Plan 2016-2021.
32   Department of Justice and Equality (2017) National Traveller and Roma Inclusion Strategy 2017 – 2021. Dublin: Government Publications.
33   Government of Ireland (2018)A Whole-of-Government Strategy for Babies, Young Children and their Families 2019-2028. https://first5.gov.ie/
34   Department of Children and Youth Affairs (2018) LGBTI+ National Youth Strategy 2018-2020 Dublin: Government Publications.

The Government of Ireland established in 2019, 'WHAT WORKS' an initiative led by the Department of Children, Equality, Disability, Integration and Youth[35] (with funding from Dormant Accounts), to support a move towards evidence informed prevention and early intervention services for children, young people and their families. Recent outputs of the initiative include "Relationships are Key" e-learning course (June 2021) for parents developed by Tusla's National Parenting Working Group in collaboration with parents.

The Healthy Ireland Strategic Action Plan 2021-2025 seeks to build on the Healthy Ireland Framework (2013) with a focus on reducing inequalities.

A key focus of the Action Plan is cross-government approach, with a total of 14 government departments responsible for implementing actions for the next 5 years.

In respect to parenting and family support actions include "Engage and collaborate with the Department of Children, Equality, Disability, Integration and Youth to align policy and initiatives with Healthy Ireland policy[36]" articulated through the implementation of the next iteration of 'Better Outcomes, Brighter Futures' and 'First Five'.

A Youth Justice Strategy 2021 – 2027 provides a starting point for a range of actions and initiatives. It is grounded on child welfare principles, deriving in particular from the UN Convention on the Rights of the Child. The objectives in the Strategy are premised on the need to maximise opportunities to promote positive behavioural change, and it includes a wide range of issues relevant to children and young people at risk of coming into contact with the criminal justice system, including family support as reflected in the Vision Statement for the Strategy:

"Collaborating across all sectors of government and society in the development and delivery of opportunities for children and young people, to harness support in their families and communities in order to strengthen their capacities to live free from crime and harm."[37]

Published in 2021, Our Rural Future Rural Development Policy 2021-2025 while not explicitly providing specific actions in reinforcing supports to parents proposes that research in the area of childcare, early learning, and school-age childcare needs of parents who work atypical hours or live in rural communities "will be conducted to allow the Government to develop recommendations for future action"[38] and will develop recommendations for future action.

The next section of the report presents an overview of the local operating context in Sligo and Leitrim.

35   https://whatworks.gov.ie/
36   Department of Health (2021) Healthy Ireland Strategic Action Plan 2021-2025. Dublin: Government Publications.
37   Department of Justice (2021) Youth Justice Strategy 2021 – 2027. Dublin: Government Publications.
38   Department of Rural and Community Development (2021) Our Rural Future Rural Development Policy 2021-2025. Dublin: Government Publications.

Chapter 3 Local Operating Context: Sligo and Leitrim Area Profile

The following section outlines the nature of the local geographical and operating context and draws on qualitative data to explore the parenting support structures operating environment on the ground.

3.1 INTRODUCTION

While Sligo and Leitrim are two distinct counties parenting support services in the north-west area are not always bound by county lines. Therefore, this study uses the demographic profile based on the dataset derived, and adapted, from the CSO's Small Area Population Statistics for Census 2016, the Sligo Leitrim CYPSC Plan 2020 – 2022 and the political map of Sligo-Leitrim (four-seat constituency). The latter comprises the entire counties of Sligo and Leitrim and a small number of Electoral Divisions (EDs) in counties Donegal and west Cavan.

The following themes and indicators included in this area profile reflect the significant points for consideration in the development of a parenting support strategy for Sligo-Leitrim.

3.2 AREA PROFILE

The population of Sligo-Leitrim at the time of the 2016 Census was 113,920 persons (including parts of Donegal and West Cavan as per the constituency of Sligo-Leitrim). This represents a 0.2% increase since the 2011 census of population. This compares to a population increase of 3.8% in the State overall over the same period. In respect to the individual counties under review County Sligo had a population 65,535 persons and County Leitrim had a population of 32,044 persons (with population change of 0.2% and 0.8% respectively in the inter-censual period 2011 – 2016).

3.2.1 RURAL AND URBAN SETTLEMENTS

In Ireland as a whole just over a third (37%) of the population live in rural areas (that is outside towns of 1,500). In contrast, the opposite pattern arising in the Western Region shows with 64.7% of the population living in rural areas (Figure 1). This is a marginal decline on 2011 (when it was 66%).

The region has a significantly higher proportion of people living in rural areas than for the State as a whole (37%).

The Western Region is a very rural region and Sligo-Leitrim largely mirrors the rurality of each of the seven counties of the region. While key centres of population exist across the two counties a feature of the area is that of dispersed population and scattered settlements. The counties of Sligo and Leitrim vary in rurality from almost 89.3% in Leitrim (where there is only one urban centre over 1,500 population) to slightly less rural dwellers in county Sligo (which includes the largest settlement in the area Sligo town) with a rural population of 60.2%.

Density is a key indicator of rurality and is important in considering the provision of services. In the State as a whole the population density is 70 people per square kilometre and in the more rural Western Region it is almost 32 people per km^2. Leitrim has the lowest population density in the region with just over 20 people per square kilometre, while county Sligo has the second highest population density (35.67 persons per sq. km) in the region after county Galway though it remains significantly lower than that of the State.

Table 1 below highlights the key centres of population across Counties Sligo and Leitrim with Sligo town being the main centre of population (19,199 persons) in County Sligo and Carrick-on Shannon (4,062 persons) being the most populous centre in County Leitrim.

Table 1: Key Centres of Population[39] (over 800 persons): Sligo and Leitrim (excluding Donegal, West Cavan areas)

County Sligo	Population Number	County Leitrim	Population Number
Sligo	19,199	Carrick-on-Shannon (Leitrim and Roscommon)	4,062
Tubbercurry	1,986	Manorhamilton	1,466
Strandhill	1,753	Kinlough	1,032
Collooney	1,610	Ballinamore	914
Ballymote	1,549	Drumshanbo	902
		Mohill	855
		Dromahair	808

3.2.2 AGE COHORTS

In Sligo-Leitrim 24.6% of population was aged under 18 and 16.8% were aged 65 or over in 2016. The corresponding State measures were 25% aged under 18 and 13.4% aged 65 or older.

3.2.3 NATIONALITY AND ETHNICITY

The ratio of Irish to non-Irish nationals residing in Sligo-Leitrim is higher than the State share in 2016 (87.0%). Of the usually resident population of Sligo-Leitrim, 88.9% stated their nationality as Irish in the 2016 Census. Nationalities other than Irish comprised 9.7% of the population of the constituency, with 1.4% 'not stated'.

In respect to ethnicity 86% of people identified their ethnicity as White Irish, which is a higher proportion than the State as a whole (82.2%). Other White Ethnicity accounted for 8.3% of people, compared to a State share of 9.5%. The population in Sligo-Leitrim who stated their ethnicity as Asian or Asian Irish (1.3%) or as Black or Black Irish (0.6%) was less than the respective State shares (2.1% and 1.4%).

There were significant differences in the size of the Traveller community across the administrative counties. The area under discussion in this report has the lowest population of the Traveller community in the State (along with Cavan 475 persons and Monaghan 271 persons and Donegal 588 persons). There were 384 persons from the Traveller community residing in County Sligo followed by county Leitrim with 211 persons in 2016[40]. There were 194 families from the Traveller community residing in County Sligo and Leitrim in 2016.

In County Sligo, 7,922 people (1 of 8 people, i.e. 12% of the population) are members of ethnic minority groups and 0.30% of the County's population are asylum seeker children, a percentage which is higher than the national mean of 0.12%.

Sligo has the highest proportion of asylum seekers and refugees in Ireland – the average in each county is 0.13% and in Sligo it is 0.40%. Sligo accounts for 1.38% of the national population, whereas 4.06% of all asylum seekers and refugees in Ireland live in Sligo. This can be accounted for in part by the location of Globe House, a Direct Provision Centre, in Sligo town.

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40   *CSO Census of Population 2016: Profile 8 Irish Travellers, Ethnicity and Religion.*

3.3 HOUSEHOLDS, HOUSING AND HOMELESSNESS

3.3.1 ACCOMMODATION TYPE

There were **43,638 private households** in Sligo-Leitrim in 2016. The Sligo-Leitrim population are more likely to live in houses or bungalows than in the State overall (93.4% compared to 86.5%).

Sligo-Leitrim has a lower proportion of households living in flats/apartments than the State as a whole (5.2% compared to 11.8%). The individual counties presented as marginally below the national average (19.4%) for the proportion living in private rented accommodation with Sligo 17.3% and Leitrim 15.0%.

In respect to local authority rented accommodation County Leitrim was slightly below the national average of 8.7% with 7.3% in local authority rented accommodation and County Sligo above the national average at 9.4%[41].

3.3.2 OCCUPANCY TYPE

County Leitrim had 12,404 permanent occupied dwellings in April 2016. The number of vacant dwellings in Leitrim fell by about 300 over the last six years to 5,226 last year. Of this, there were more than 1,600 holiday homes. More than 3,000 households are in rental accommodation in Leitrim and people in Leitrim begin to buy — rather than rent — at age 33. Home ownership rate for Leitrim is 73%. Leitrim continues to have one of the highest rates of vacant houses in the country.

Sligo has 24,761 permanent occupied dwellings in April 2016, an increase of 1.4% in six years. The number of vacant dwellings in Sligo fell to 6,571 from 7,328 in 2011. This included more than 1,840 holiday homes. Almost 6,960 households were in rental accommodation in 2016. And people begin buying their homes in Sligo at the age of 35.

Households in Sligo-Leitrim are more likely to own their houses outright (42.8% compared to 36%) and less likely to own a house with a mortgage or loan (27.8% compared to 31.6%) than in the State overall.

In 2016, 15.2% households rented from private landlords, which was lower than the State share of 18.3%. In addition, more households rent from a local authority than in the State overall (8.7% compared to 8.4%).

Compared to the State share, Sligo-Leitrim had a higher rate of overall vacant dwellings (13.4% compared to 9.2%) and a lower rate of occupied homes (80.1% compared to 87.7%).

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41   *Trutz Haase et al (2017) The 2016 Pobal HP Depreciation Index for Small Areas (SAP).*

According to the Department of Housing, local Government and Heritage the Annual Count of Traveller Families in 2016 in all categories of Accommodation[42] indicated a total of 125 Traveller families living in county Sligo and 69 families in County Leitrim. Table 2 below indicates the total number of families in all categories of accommodation (2016).

Table 2: Total Number of Traveller Families in all Categories of Accommodation (Annual Count 2016)

County	Accommodation by or with Assistance of LA	On Unauthorised Site	Own Resources	Private Rented Accommodation (Estimate)	Sharing Housing	Total
Sligo	71	10	1	31	12	125
Leitrim	37	0	0	27	5	69

According to Diversity Sligo there are approximately 199 people living in Globe House[43], the direct provision centre for asylum seekers in Sligo in 2019. There are 29 children (25 in school and 4 pre-schoolers, 2 under 1 year, 34 family units, 46 single women and 90 single men). Residents came from 30 different countries and 12 religions are represented. In total 70 residents were in employment and "there are 29 residents with papers" pointing to the challenge of those with residency transition to community mostly due to lack of suitable or affordable accommodation.

3.3.3 HOUSING STOCK AND HOMELESSNESS

According to CSO (April 2017) figures the amount of housing available in Sligo and Leitrim has fallen in Sligo and Leitrim in the preceding six years. The CSO define the housing stock as the number of permanent residential dwellings that are available for occupancy at the time of the census. In the two counties, there are fewer vacant dwellings, more people are renting and there are fewer younger home owners.

3.3.4 HOMELESSNESS

According to North West Simon Community 78 households comprising 92 adults and 80 children were provided with accommodation and/or support in County Leitrim during 2020. In respect to Sligo 72 households comprising 89 adults and 117 children availed of North West Simon Community supports in County Sligo during 2020[44].

In April 2021, North West Simon Community stated that a total number of individuals in emergency accommodation in the North West (including Sligo, Leitrim and Donegal) included 74 adults and 9 child dependents. The homeless figures[45] (adults accessing local authority managed emergency accommodation during the week of April 19 – 25 2021) for County Sligo was 47 households, and Donegal/Leitrim 27 households (where fewer that ten individuals are recorded in a county, data are aggregated in line with best practice described in the Irish Statistical System Code of Practice (ISSCOP).

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42   *Department of Housing, Local Government and Heritage (2020) Annual Count of Traveller Families in 2016 in all categories of Accommodation.*
43   *Diversity Sligo (2019): Annual Report 2019*
44   *https://www.northwestsimon.ie/about-homelessness-in-ireland/statistics-and-reports-on-homelessness/*
45   *Department of Housing, Local Government and Heritage Monthly Homelessness Report May 2021*

3.4 INFORMATION TECHNOLOGY ACCESS

In 2016, Sligo-Leitrim had a lower rate of PC access than the State as a whole (66.9% compared to 70.8%). Sligo-Leitrim households also have a lower rate of access to the internet than households in the State overall (75% compared to 81%).

3.5 TRANSPORT

In line with its rural environment the Sligo-Leitrim population in 2016 were more likely to travel to work or education by car or van (as a driver or passenger) than in the State overall (70% compared to 62.2%) and less likely to use public transport as their mode of transport (8.8% compared to 12.9%).

When taking into account the journey time to work, school etc., the Sligo Leitrim area had a higher proportion of less than 15-minute journeys (40.9%) than the State overall (32.2%). Sligo-Leitrim had the same proportion of 15 to 30-minute (28.8%) and a lower proportion of 30-to-45 minute journeys (13.8%) than the corresponding State shares (28.8% and 17.3% respectively).

3.6 EDUCATION

In comparison with the State, Sligo-Leitrim displayed a lower proportion of people who have completed their highest level of education at third level and above (25.1% compared to 28.5%) but a higher proportion completing their education at intermediate level (21.1% compared to 19.6%).

The proportion completing their highest education at secondary level was marginally higher than that seen in the State overall (33.4% compared to 33%). In the constituency, 14.1% of those who have completed their education did so at primary level, the corresponding State share is 12.5%.

In respect to age at which education ceased the Census 2016 revealed a lower proportion ceased their education aged 21 and over than in the State as a whole (22% compared to 24.4%). The proportions that completed their education aged 15 to 20 were marginally higher than the State share (38.5% compared to 37.7%).

3.7 ECONOMIC STATUS: INCOME, EARNINGS AND UNEMPLOYMENT

In respect to the average disposable income per person in 2017[46] County Sligo was €18,451 and for County Leitrim €18,115. The mean annual earnings in 2018[47] for County Sligo were €39,466 and for County Leitrim was €37,238. In respect to unemployment Table 3 below provides an overview of the unemployment rates for both County Sligo and Leitrim for October 2021 accounting for a total of 6,858 persons on the live register (4.1% of the State).

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46   *CSO (2017): County Incomes and Regional GDP*

47   *CSO Ireland (2018) Earnings Analysis using Administrative Data Sources*

Table 3: Unemployment Rates per social Welfare Office (Live Register) in Sligo and Leitrim (October 2021)

County Sligo		County Leitrim		State (Total)
County	2,115	County	1,314	
Sligo Town	1,808	Manorhamilton	300	
Tubbercurry	307	Carrick-on Shannon	1,014	
Total	4,230	Total	2,628	165,671

3.8 FAMILIES

3.8.1 FAMILY CYCLE

In Sligo-Leitrim, there are **29,189 family units**. Figure 1 shows the breakdown of the number of families in Sligo-Leitrim according to their stage of the family cycle. In 2016, the proportion of family units that are described as empty nest (12.8%) and retired (12.3%) is more than the corresponding State shares (10% and 10% respectively).

The proportion of families described as **pre-family (7.3%) is less than the State share (9.2%**). However, Figure 1 also shows that while the proportion of family units described as adolescent (13%) was higher than the State share of 12.3%), early school (11.0%) and pre-adolescent (11.1%) was lower than the that the State's share (11.9% and 11.4% respectively).
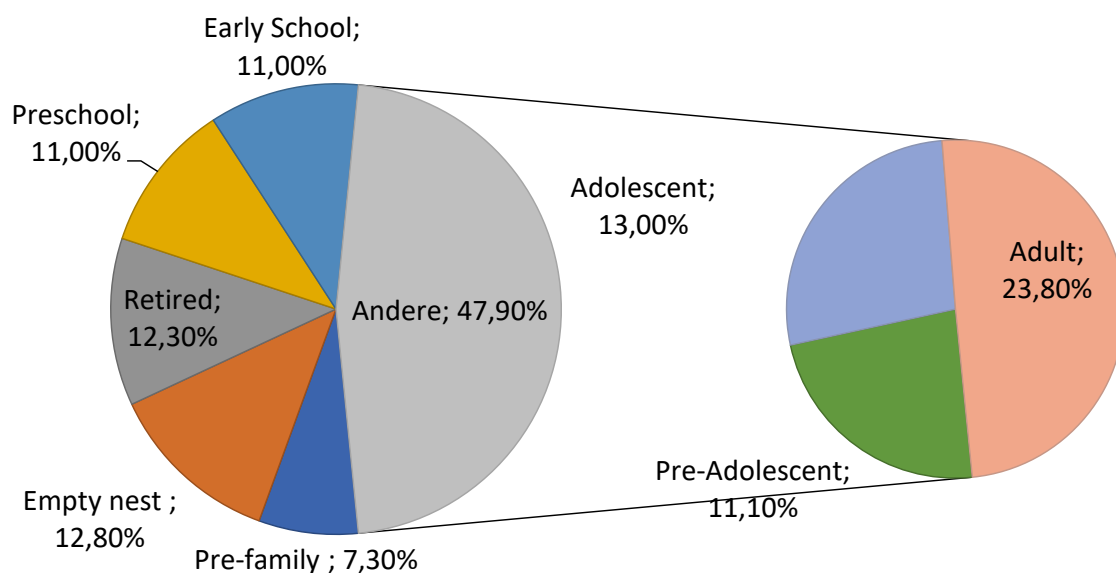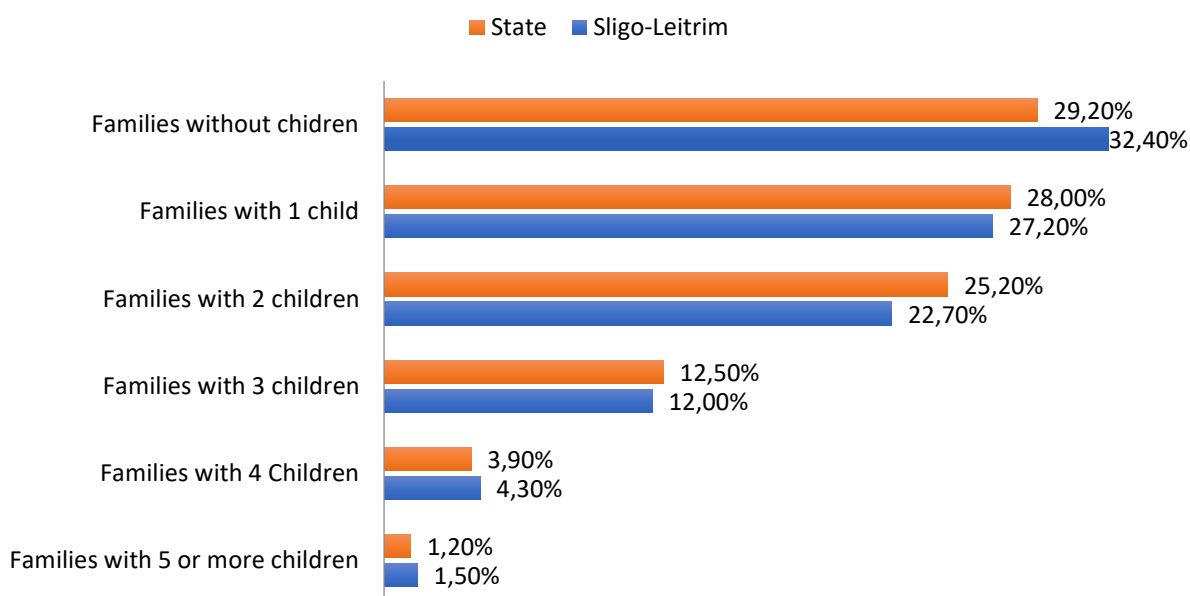
Figure 1: Sligo-Leitrim Family Cycle (2016)

Figure 2 below compares the propositions of families according to the number with and without children in Sligo-Leitrim and the State. Sligo-Leitrim had a lower proportion of families with 2 children (22.7% compared to 25.2%) and a lower proportion with 1 child (27.2% compared to 28%) than in the State as a whole.

Figure 2: Number of Families with/without Children in Sligo-Leitrim (Compared to the State)

Legend: ■ State ■ Sligo-Leitrim

Family type	State	Sligo-Leitrim
Families without chidren	29,20%	32,40%
Families with 1 child	28,00%	27,20%
Families with 2 children	25,20%	22,70%
Families with 3 children	12,50%	12,00%
Families with 4 Children	3,90%	4,30%
Families with 5 or more children	1,20%	1,50%

According to family type there were **19,734 families with children in Sligo-Leitrim** in 2016. Of these families 14,771 (74.9%) of these families were couples with children and 4,963 (25.1%) were one parent families.

In Sligo-Leitrim, there were less couples with all children under 15 (36.8%) and more with all children over 15 (25.7%) than in the State as a whole (37.7% and 25.2% respectively). The area showed a higher proportion than the State of one parent families with all children over 15 (36.8%) than in the State (37.7%) as a whole.

3.8.2 ONE PARENT FAMILIES

In 2016, there are 1,272 one-parent households in Leitrim of which 87% were lone mothers and 13% lone fathers. **One-parent families make up 22.7% of all households in Leitrim.** In respect to County Sligo there are 2,926 one-parent households in Sligo of which 86% were classified as lone mothers, 14% lone fathers. **One-parent families make up 25.8% of all households in Sligo.**

3.9 RELATIVE AFFLUENCE AND DEPRIVATION

According to Trutz-Haase (2016) Sligo-Leitrim is a predominantly rural constituency with a socio-economic composition in the mid-field (22nd) of the forty constituencies. Reflecting decades of adverse labour market conditions and the social selectivity of sustained emigration, the constituency lies just below the average on eight of the ten socio-economic indicators which underlie the HP Deprivation Index.

The absolute HP index score for County Sligo was -5.6 and for County Leitrim -7.1 (below that state average of -3.6), while the relative HP Index Score (2016) was -3.2 and -1.6 respectively (marginally below the state average of .6)[48].

Generally, the constituency has a strong urban-rural gradient. The urban peripheries of Sligo Town, Ballymote and Carrick-on-Shannon are all in the 'marginally above average' and even affluent range and can be interpreted that urban areas have remained central to economic growth and development. By contrast, the more rural locations are predominantly in the marginally below average and even disadvantaged ranges. The most disadvantaged areas, however, are enclaves in Sligo town itself.

3.10 SLIGO-LEITRIM PARENTING SUPPORT PROFILE

This following section provides a brief profile of parenting supports in Sligo-Leitrim area. By profiling the currently available statutory, community and voluntary support services targeting parents, children and young people in the Sligo/Leitrim region contributes to identifying existing resources as well as any gaps in service delivery. This brief profile is based on the available data and is not intended to be exhaustive.

A key commitment in Better Outcomes, Brighter Futures states that a role of local CYPSCs is to *"ensure planning and co-ordination of parenting supports at local level through Children's Services Committee (now CYPSC)".* Therefore, the information presented in this section is largely drawn from the Sligo-Leitrim CYPSC Plan 2020 - 2022. Additionally, an existing on-line directory of community and voluntary organisation (Sligoleitrimdirectory. ie) and information gleamed from the consultation process through direct contact with organisations and services are also utilised.

In the combined area of Sligo-Leitrim the delivery of parenting supports is provided by a myriad of different agencies, statutory, voluntary and community, servicing a range of different population groups. While the role of State services in the area has been increasing, voluntary organisations play an enormous role in service provision to parents, children and families.

It should be noted that in reviewing the profile of parenting supports in the area it is apparent that supports for parents are funded in a number of different ways. For example, services may be provided by Tusla, the Child and Family Agency. Alternatively, Tusla also provides funding though service-level agreements and grant aid agreements to non-statutory services, delivered at national and local levels.

The data is divided into direct supports and indirect parenting supports. Direct services comprise actions exclusively aimed at improving parental skills and capacities and indirect services made up of actions aimed at delivering wider supports to families including parents and have a broader remit than parenting and family support.

Table 4 below presents the services provides an overview of the main service providers working with Children, Young People and Families in the Sligo/Leitrim area with particular reference to parenting supports and the level of service provision based on the mapping process undertaken during the consultation process.

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48   *Trutz Haase et al (2017) The 2016 Pobal HP Deprivation Index for Small Areas (SAP).*

Table 4: Sligo-Leitrim Parenting Support Profile

Service(s)	Description of Provision	Parenting Supports, Education and Programmes
Direct Parenting Support		
Family Resource Centres (6) (Sligo town, Ballymote, Tubbercurry, West Sligo, Mohill and Carrick on Shannon)	Support services reflecting the community needs community needs. The provision of family supports, information and advice at local community level. Individual and home-based supports. Support and advocacy provided.	Community universal and targeted supports that respond to the needs of local families. Practical assistance to individual parents, children, young people and older people, community groups and other services. A range of group based supports offered including childcare, youth work etc.
Early years services (53 Private services 45 Community services)	Childcare and early education support services	Pre-school, Montessori, Private (sessional, full Day Care and After school), Community (Sessional, Full Day Care and After school). Notified childminders.
Baby/Toddler and Parent Groups (31 parent & toddler groups)	Range of community parent toddler groups.	Peer support
Parent Hub	Web based information on supports on a range of topics relevant to parenting (where possible). This service is available to all parents of children of all ages.	Information provision, sign-posting supports, highlighting events, education and programme opportunities.

Service(s)	Description of Provision	Parenting Supports, Education and Programmes
Direct Parenting Support		
Parent Hub	Web based information on supports on a range of topics relevant to parenting (where possible). This service is available to all parents of children of all ages.	Information provision, sign- posting supports, highlighting events, education and programme opportunities.
MACE Project (Delivery sites between the Republic of Ireland and Northern Ireland including Sligo and Leitrim)	Identification and assessment of families at risk from multiple adverse childhood experiences.	Interventions for families with children in age categories 0-3 years and 11-13 years including universal, targeted or specialist delivered on an individual and/or group basis.
Lifestart Growing Child and Parenting	Programme aimed at increasing parents knowledge and confidence and parenting skills and enhancing wellbeing and self-esteem.	Parents of 0-5 year olds. Home based.
Sligo and Leitrim Childcare Committees (Sligo and Leitrim - Childcare Providers (total 98)	A range of practical guidance and information on early childcare services including supports and grants to parent/toddler groups, childcare funding schemes etc.	Supporting universal and targeted provision. Provides website and phone contact detailing information for parents/groups.
Parenting Programmes (One of, short term education and capacity building programme and information e.g. Parents Plus Triple P Positive Parenting etc. often partnership with statutory and community organisations)	Web based or/and in person practical and positive parenting programmes (e.g. promoting parent s confidence seeking to prevent and remediate emotional and behavioural challenges in children by focusing on establishing effective parenting practices in families and improving communication. Seeks to decrease parental stress and establishing parent defined goals.	Universal and targeted programmes. Parents of 0 - 15 years olds

Service(s)	Description of Provision	Parenting Supports, Education and Programmes
Direct Parenting Support		
Child and Family Agency Parenting Support Programmes (Tusla)	Social Work including child protection, fostering and alternative Care and aftercare services. Provides PPFS, Child and Family Support Networks and Meitheal. Early Years Inspectorate in Sligo/Leitrim. Delivers a broad range of parent support programmes.	Parenting programmes offered in partnership with community programmes.
Breastfeeding Support	A range of information and support groups for new parents.	Individual voluntary support. HSE lactation specialist in Sligo University Hospital.
Indirect Support		
Domestic Violence Advocacy Service (DVAS) Sligo Rape Crisis and Sexual Abuse Service	Key working and needs assessment and support planning approach for women and children experiencing domestic and gender - based violence.	Emergency/Refuge accommodation available. Practical information, emotional, counselling support, signposting and court accompaniment.
Disability Support Services (e.g. HSE, Enable Ireland, Down Syndrome Ireland etc.)	A range of information and support for parents.	Universal and targeted supports to parents.
Diversity and Inclusion Supports (e.g. Sligo Traveller Support Group, Local Development Companies, Globe House Direct Provision Centre, Sligo Intercultural Forum, Diversity Sligo, International Cultural Group, Carrick on Shannon etc.)	Information, referral, support and advocacy.	Universal and targeted supports. Information, advocacy, support and referral.

Service(s)	Description of Provision	Parenting Supports, Education and Programmes
Indirect Support		
Drugs and Alcohol Prevention/Support Services (e.g. HSE Alcohol and Substance Misuse Services North West Regional Drugs & Alcohol Task Force Drugs Outreach)	Awareness raising, advice, service information. Signpost and provide counselling and treatment options.	Family support and harm reduction support, rehabilitation and aftercare advice and support.
Services to support Mental Health (Youth and Adult) (e.g. Family Life Centres, HSE Psychology, CAMHS, NEPS, Suicide Prevention Resource Office etc.)	One to one support in respect to emotional, psychological and educational wellbeing.	Targeted supports. Family facilitation and information provision. Counselling supports.
Gardaí Community Garda (JLO) Garda Youth Diversion Projects (YAPSL) Probation Services	Promotion and support for good relations between the Gardaí and the community to support children and young people at risk. After school, education, employment, training, sports etc. Intensive support programmes for young people and families using strength-based family focused approach for young people with complex needs.	Individual and home based mentoring. Universal and targeted supports. Information and support for families engaging with the Probation service. Parental and youth mentoring restorative justice programmes through referral from the Probation Service. Non-violence resistance training.
Local Partnership Companies	Local area based multi-sectoral partnership companies based in Sligo and Leitrim	Provide a range of community development supports to groups support local communities including LEADER and SICAP programmes.

Service(s)	Description of Provision	Parenting Supports, Education and Programmes
Indirect Support		
Youth Support Organisations (e.g. CYPSC, North Connaught Youth and Community Services, Foróige, Scouting Ireland, Foróige clubs, youth clubs, etc.)	Volunteer-led and operated youth groups. Programmes deliver activities relating to general well-being with focus on personal and social development, capacity building, self- esteem, decision making, sexual health, drugs and alcohol awareness, also mental health and healthy eating.	Information on services and events, some signposting for parents.
Educational Organisations (Primary Schools, 68 in Sligo (4 DEIS), Secondary Schools 12 in Sligo / 40 Primary Schools in Leitrim (9 DEIS) and 7 Secondary Leitrim), NEPS, Sligo Institute of Technology, St Angela s College, NUIG, Education Welfare Service, Mayo Sligo Leitrim Education Training Board, School Completion Project, Youth Reach)	Education, training and alternative pathways provision.	Universal & Targeted. Information on services, events, referral and signposting for parents.

3.11 Conclusion to Part 1

According to the Department of Children and Youth Affairs, (2014) parenting support sits within the broader concept of family support, whereby "supporting parents to parent confidently and positively is one of the primary, universal and most effective supports that the State can provide along the continuum of family support"[49].

However, there appears to be no one definition of parenting support within Irish literature with much of parenting support being defined by the delivery of services that "can support parents directly or indirectly towards better outcomes for their families"[50]. Moran et al. (2004) took parenting support to include "an intervention for parents or carers aimed at reducing risks and/or promoting protective factors for their children, in relation to their social, physical and emotional wellbeing"[51].

49   Department of Children and Youth Affairs (2014) Better Outcomes, Brighter Futures: The National Policy Framework for Children and Young People 2014 – 2020. Dublin: Department of Children and Youth Affairs.
50   Connolly, N. et al., (2017) Parenting Support and Parental Participation: Mapping Parenting Support in the Irish Context. Galway: UNESCO Child and Family Research Centre. National University of Ireland Galway.
51   Moran et al., (2004) What works in Parenting Support? A Review of International Evidence, Nottingham: Department of Education and Skills Policy Research Bureau.

This study takes the definition provided by Gillen et al., (2013) in Tusla's Parenting Support Strategy to comprise "both a style of work and a set of activities that provides information, advice and assistance to parents and carers in relation to the upbringing of their children, in order to maximise their child's potential"[52].

The circumstances and experiences of parents can vary over the lifecourse of their parenting journey with some requiring universal supports to those requiring more targeted supports to address more complex issues and therefore require interventions tailored to their needs. The national policy and legislative landscape has developed to become more rights focused over time, particularly inclusive of the voices of children and young people. The evolving shift towards a more inclusive, preventive as opposed to crisis orientated, whole child and lifecourse perspective in supporting children and young people has also garnered a focus on parenting supports and needs. This movement is positive and evidence would suggest that funding of supports is seeking to turn policy into practice on national and local levels, albeit with the lingering 'pilot focused' short-term funding systems of interventions and initiatives. In reviewing the policy arena associated with parenting it is apparent that perhaps the policy and legislative movement still absent key groups of parents from their consideration such as fathers, our new Irish communities, ethnic minority groups and rural dwellers among some. Key policy documents bear no deep reflection on the needs of such groups. For instance, the National Maternity Strategy has limited mention of the role of fathers and the National Traveller and Roma Integration Strategy again presents a limited focus on the role of parents in supporting positive educational, health and wellbeing outcomes for their children.

Sligo-Leitrim Local Area Profile

Good quality public and other services are essential to encourage people to continue to live in rural areas, towns and villages, and to support the sustainability of rural communities. Key services which people rely on include housing, healthcare, education, childcare, public transport, digital connectivity, and water and wastewater infrastructure. A 2019 report by the CSO on Measuring Distances to Everyday Services in Ireland highlighted that the average distance to most everyday services was at least three times longer for rural dwellers than for urban dwellers.

In some rural areas, substantially higher distances were recorded of around seven times further to services such as pharmacies, GPs and supermarkets. While key centres of population exist across Sligo and Leitrim a feature of the area is that of dispersed population and scattered settlements.

The counties of Sligo and Leitrim vary in rurality from almost 89.3% in Leitrim (where there is only one urban centre over 1,500 population) to slightly less rural dwellers in county Sligo (which includes the largest settlement in the area Sligo town) with a rural population of 60.2%. Therefore, delivering services including future parenting support services requires cognisance of this deep rurality across the area. For instance, the provision of childcare facilities in rural areas is often challenging, sometimes due to poor availability in low density population areas. Some areas have explored the potential for developing community-based childcare options under a social enterprise business model whereby profits are reinvested into continuously improving the service.

An Affordable Childcare Scheme was initiated in 2019 to offer a single, easy-to-access system of financial subsidies towards childcare for families in Ireland, enhancing affordability and accessibility, and providing a platform for investment in quality childcare to benefit current and future generations. However, there is still a need for the State to gain a better understanding of the needs of parents associated with the early learning care and school-

age childcare in rural communities. The recent published rural development policy provides limited cognisance of the need for childcare facilities to be side by side with workplace hubs in counties with a high degree of rurality.

Reflecting 2016 data, the combined profile of Sligo-Leitrim presents a picture of variation but overall is not characterised by particular extremes of either affluence or deprivation. The absolute HP index score for County Sligo was -5.6 and for County Leitrim -7.1 (below that state average of -3.6), while the relative HP Index Score (2016) was -3.2 and -1.6 respectively (marginally below the state average of .6)[53]. Generally, the constituency has a strong urban-rural gradient. The urban peripheries of Sligo Town, Ballymote and Carrick-on-Shannon are all in the 'marginally above average' and even affluent range and can be interpreted that urban areas have remained central to economic growth and development. By contrast, the more rural locations are predominantly in the marginally below average and even disadvantaged ranges. The most disadvantaged areas, however, are enclaves in Sligo town itself.

In addition, other key considerations in developing a parenting support strategy for Sligo-Leitrim include the following indicators of need:

- The ratio of Irish to non-Irish nationals residing in Sligo-Leitrim is higher than the State share in 2016 (87.0%). Of the usually resident population of Sligo-Leitrim, 88.9% stated their nationality as Irish in the 2016 Census. Nationalities other than Irish comprised 9.7% of the population of the constituency, with 1.4% 'not stated'.
- In line with its rural environment the Sligo-Leitrim population in 2016 were more likely to travel to work or education by car or van (as a driver or passenger) than in the State overall (70% compared to 62.2%) and less likely to use public transport as their mode of transport (8.8% compared to 12.9%).
- In 2016, Sligo-Leitrim had a lower rate of PC access than the State as a whole (66.9% compared to 70.8%). Sligo-Leitrim households also have a lower rate of access to the internet than households in the State overall (75% compared to 81%).
- In Sligo-Leitrim, there are 29,189 family units. Figure 1 shows the breakdown of the number of families in Sligo-Leitrim according to their stage of the family cycle. In 2016, the proportion of family units that are described as empty nest (12.8%) and retired (12.3%) is more than the corresponding State shares (10% and 10% respectively).
- The proportion of families described as pre-family (7.3%) is less than the State share (9.2%). However, while the proportion of family units described as adolescent (13%) was higher than the State share of 12.3%), early school (11.0%) and pre-adolescent (11.1%) was lower than that the State's share (11.9% and 11.4% respectively).
- Sligo-Leitrim had a lower proportion of families with 2 children (22.7% compared to 25.2%) and a lower proportion with 1 child (27.2% compared to 28%) than in the State as a whole.
- In 2016, there are 1,272 one-parent households in Leitrim of which 87% were lone mothers and 13% lone fathers. One-parent families make up 22.7% of all households in Leitrim. In respect to County Sligo there are 2,926 one-parent households in Sligo of which 86% were classified as lone mothers, 14% lone fathers. One-parent families make up 25.8% of all households in Sligo.

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53   *Trutz Haase et al (2017) The 2016 Pobal HP Deprivation Index for Small Areas (SAP).*

Sligo-Leitrim Parent Support Service Profile

Overall based on the mapping process the area appears to offer a range of high-quality programmes, events and information provision from a wide range of services is clearly apparent from the desk review of services and supports in Sligo and Leitrim. Services in Sligo-Leitrim supporting parents can take a range of forms, ranging from universal support in informal settings for self-referring parents to more targeted specialist services supporting families seeking to address specific challenges that may present over time ranging from economic inducted issues, behavioural challenges, education or access to services issues.

As is apparent from the listing outlined in table 4 the supports can often be embedded in 'other services'. This is a positive, allowing for in-house referral, expertise and experience in supporting parents and families under one service. However, it can also lead to presenting a complicated pathway for parents seeking supports for those with complex needs but also parents who may simply require information, or advice on dealing with specific challenges they may encounter over their parenting journey.

Less apparent in the Sligo-Leitrim area is the limited integration of private and public health services (e.g. GPs) in the parenting support profile, despite this plank of support being a key starting point for parents in seeking support from the earliest stage of their parenting journey.

Those with a particular focus on parenting supports have resources, expertise and experience in developing and delivering supports that are responsive to the identified needs of families. It also appears from the desk review of services that a clear cross community and collaborative approach to delivery of family and parenting supports exist built up over time and in practice appears to deliver on the whole child/whole system approach underpinned by policy.

Parenting support should be considered over the lifecourse, from preparing for and becoming a parent support children and young people through the complex transition across the age groups and events of their lives.

There appears to be no one service or place apart from Sligo-Leitrim CYPSC (albeit mostly from the point of the child/young person) and the family resource centres that can take this lifecourse view.

The service map presents a picture of a notable long established interagency partnership approach in Sligo-Leitrim. This is evident in the number of agencies working in the delivery of parenting supports at a local level. It would appear also that Sligo-Leitrim CYPSC is a key facilitator of this process both in building on the foundation of partnership working already existing but also diminishing the potential for a scattergun approach to delivery of parenting supports.

Part II: Outcomes of the Consultation Process:
Chapter 4 Outcomes of the Parenting Support Consultation: Parents and Young People's Perspectives

4.1 INTRODUCTION

The following section outlines the outcomes of the consultation process undertaken by the Sligo-Leitrim CYPSC. Reference is made in part I above to the focus of the consultation process, namely to identify:

- The needs of parents and families, deficits in current service provision and the process of delivery and capacity-building measures that would meaningfully respond to parenting supports needs.
- The needs of support organisations serving the area, the deficits in activities and services.
- The supports to address those needs and possible strategies to meaningfully address them.

The consultation approach employed differed in the nature of enquiry that it sought to examine and in the nature of respondents, including:

Those in a parenting role: An on-line survey focused on identifying the needs of those in parenting roles across Sligo and Leitrim seeking to ascertain their experiences, observations and perspectives of being parents. Questions focused on existing, new and emerging parenting needs and parent's perspective on future actions to support their future parenting needs. A total of 250 responses were received to this survey. In addition, a more direct engagement with the target group in question comprised a series of online focus groups (7 focus groups involving a total 33 participants) and one to one interviews (51) via zoom and telephone phone were held. The shortest interview was 40 minutes and the longest was 1 hour and 20 minutes.

Children and Young People: An important underlying principle of this study is the commitment to including information from children and young people about their opinions as to what supports and services would benefit those in a parenting role. To meet this commitment a sample of young people was sought and with the assistance of Foróige one on-line focus group was held with young people (14 participants) from across the catchment area. The session focused on gathering their reflections on parenting support needs and potential means of addressing gaps and enhancing positive initiatives into the future.

Support Services: One to one interviews were held with support organisations providing services to those in parenting roles, families, children and young people across Counties Sligo and Leitrim. The primary focus of these interviews was to facilitate services to identify existing, new and emerging parenting support needs from their service provision perspective.

The interview process also incorporated questions pertaining to the challenges facing them in implementing their activities and/or in offering support services that would best meet the needs of those in parenting roles in the future. A total of 28 support organisations participated in this part of the consultation process.

4.1.1 PROFILE OF ON-LINE SURVEY RESPONDENTS

As stated previously a total of 250 responses were received to the on-line survey. The majority of respondents identified as a parent 97.20% (n=243), of which 3.61% (n=9) identified as parenting alone. The remaining responses comprised 0.80% (n=2) identified as a grandparent, 1.20% (n=3) identified as a stepparent, 0.40% (n=1) identified as a foster parent, 0.40% (n=1) identified as a Kinship/relation parent, 0.40% (n=1) identified as a parent of child/children in care and 0.40% (n=1) identified as an adoptive parent. Two respondents (0.80%) identified as 'separated' parents. A profile of on-line survey respondents is offered in the figures 3 to 7 below.

Figure 3 outlines that the majority of respondents were female (83%) and 17% were male.

As figure 4 below outlines the majority of respondents indicated that they were from County Sligo (n= 205) of which 23.60% (n=59) came from Sligo Town & Environs, 22.89% from Sligo North (n=57), 21.69% from Sligo West (n=54) and 14.06% came from Sligo South (n=35).

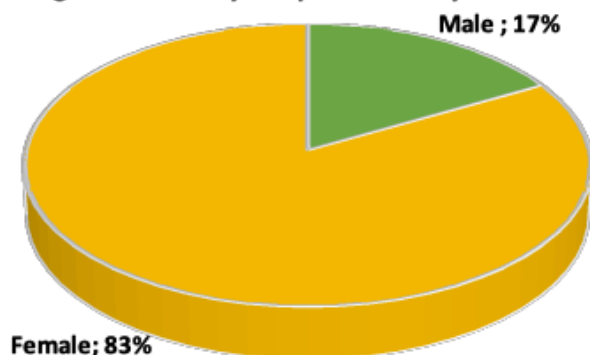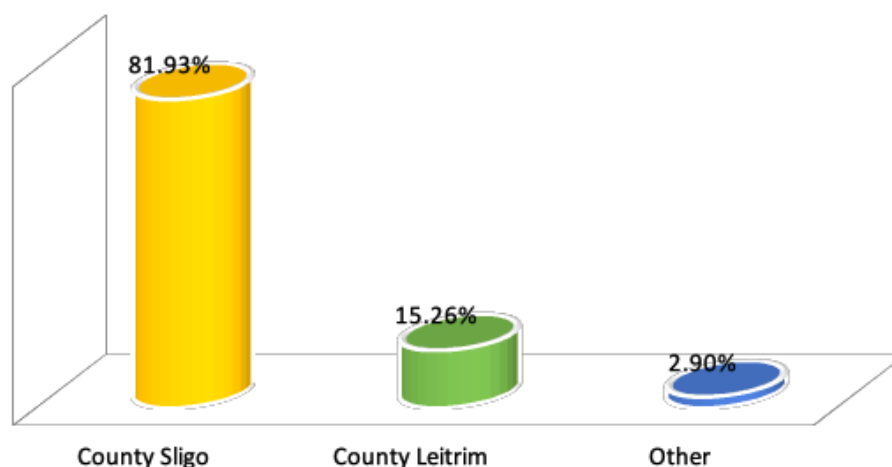Figure 3: Survey Respondents by Gender

Figure 4: Survey Respondents by Geographical Area

There was a total of 38 respondents from County Leitrim of which 10.04% came from Leitrim South (n=25) and 5.22% of respondents came from Leitrim North (n=13).

Those in the 'other category' accounted for 2.8% respondents (n=7) from areas such as County Roscommon or County Mayo were respondents accessed services in either County Sligo or County Leitrim.

Figure 5 below highlights that the majority of respondents were in the 36 – 45 years' category (n=131), with a near even split between respondents from the 46 – 54 years' age category (n=56) and the 25 – 35 years age category (n=53). There were 9 respondents in the 55+ year's age category and one respondent in the 18 – 24 years' age group.

Figure 5: Respondents by Age Category

52.21%

21.29%

22.49%

0.40%

3.61%

| 18 - 24 yrs | 25 - 35 yrs | 36 - 45 yrs | 46 - 54 yrs | 55+ yrs |
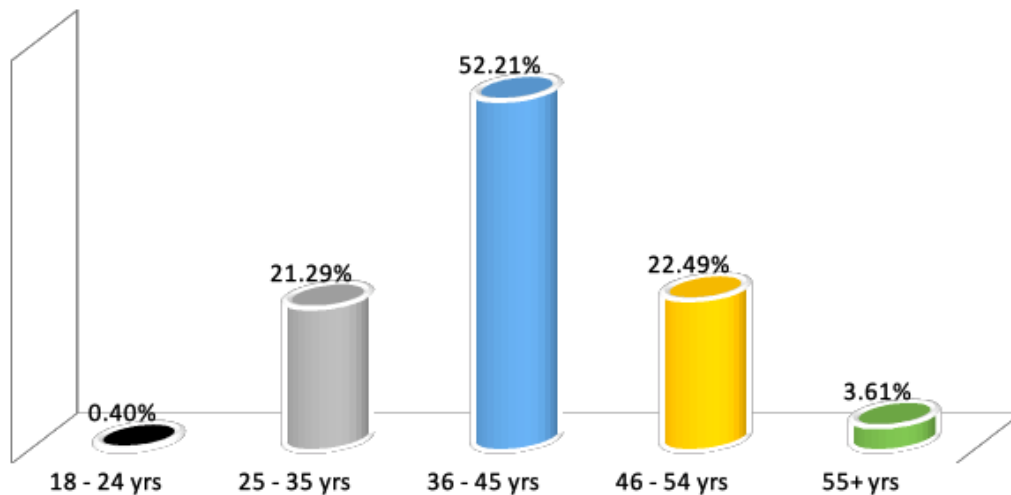
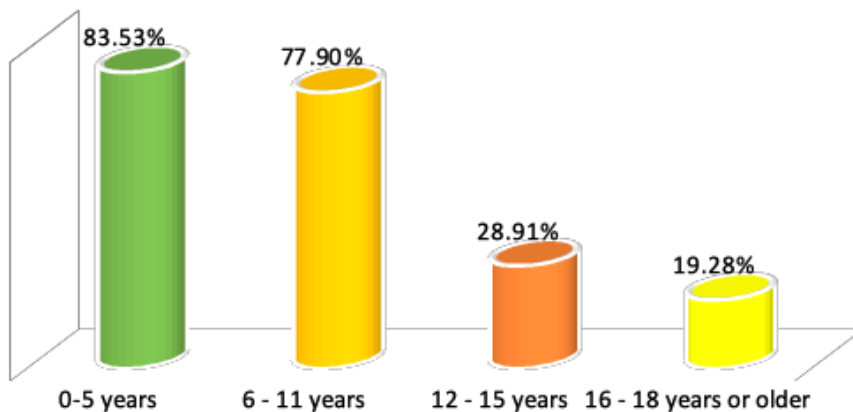As outlined in figure 6 below, the majority of respondents (83.53%) had children in the 0-5 year age group, followed by 77.9% on the 6-11 year age category, 28.91% in the 12-15 year age group and the reminder (19.28%) had children 16-18 years or older.

Figure 6: Children of Respondents by Age Group

83.53%

77.90%

28.91%

19.28%

| 0-5 years | 6 - 11 years | 12 - 15 years | 16 - 18 years or older |

As figure 7 below demonstrates the majority of survey respondents indicated that they had not participated in parenting supports or parenting programmes.

Figure 7:
Percentage of Survey Respondents who participated in Parenting Supports or Programmes

Yes; 45%

No ; 55%
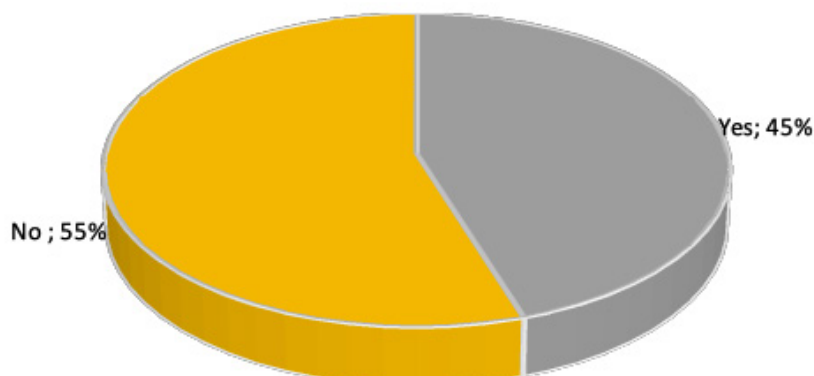
Those respondents who indicated participation in parenting supports or programmes identified a myriad of parenting supports/programmes, with the majority (38.41%) stating participation in Lifestart (38.41%), followed by Family Resource Centre (FRC) programmes (17.39%) and the Parents Plus (16.67%).

Figure 8, shows the range of programmes identified by respondents and reflects the level of service provision available within the catchment areas of Sligo Leitrim.

Figure 8: Survey Respondents Participation in Parenting Supports / Programmes

Programme	Percentage
Other	3.62%
Short Programme	1.45%
Seminar	2.90%
Incredible Years	4.35%
Common Sense Parenting	6.52%
Webinar	8.70%
**Parents Support Group	10.87%
Can't Remember Name of Programme	13.04%
Parents Plus	16.67%
Triple P Positive Parenting Programme	13.04%
*FRC Programmes/Supports	17.39%
Lifestart	38.4

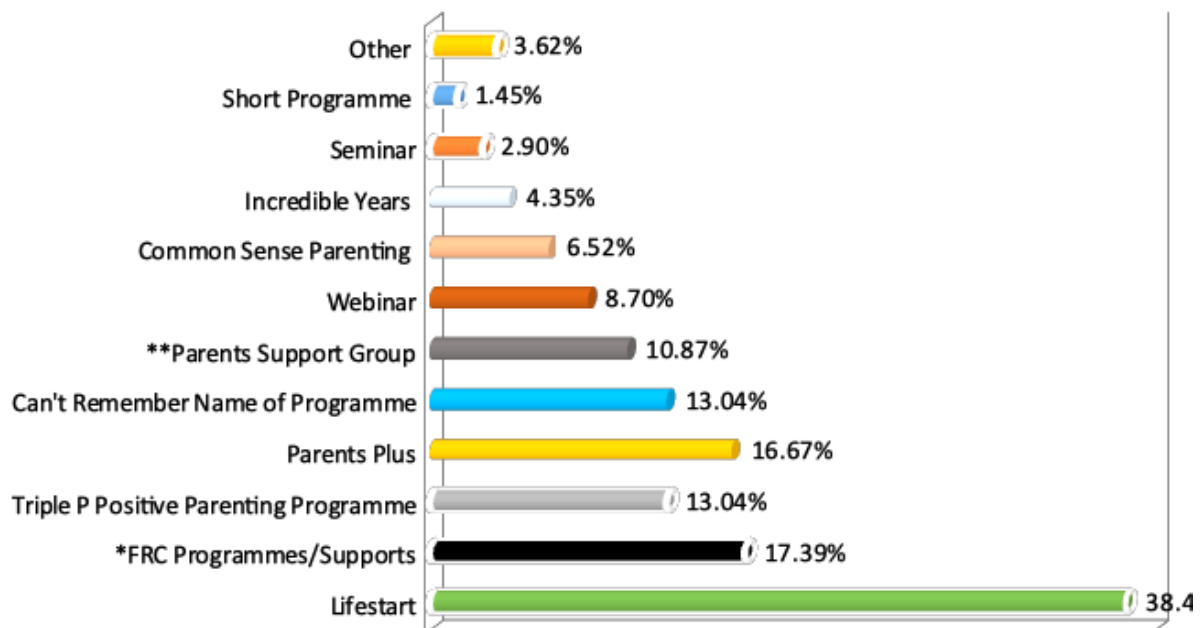Table 5 below indicates the range of supports and programmes identified by respondents who undertook short programmes, FRC facilitated programmes and parent support groups. The most mentioned supports and programmes in these categories included parent-toddler groups and breastfeeding groups/classes, the array of parenting 'courses' delivered by the Family Resource Centre network across the two counties.

Table 5: Survey Respondents: Sample of Parenting Supports and Programmes Undertaken

| Short Programmes	FRC Facilitated Supports/Programmes	Parent Support Groups
• Parenting Programme (Under 6) over 6 evenings • First Aid (Mamogs) • Pernille Burns over 2 Saturdays • Child Development • Baby Boppers Music Class • Lamh • Rainbows	• Parent and Toddler Groups • Play Therapy • Counselling • Parenting Courses • Parenting Talks	• Parent Toddler Groups • Breastfeeding Support Group and Classes • Support Group for Mums

In addition, respondents took part in a range of once-off talks, seminars and webinars led by practitioners and in many cases high profile media personalities. These supports centred on specific topics usually around supporting emotional health and well-being.

On-line survey respondents also identified participation in once off talks, seminars and webinars in more practical subjects such as transition to primary school, transition to second level, sleep issues, supporting a child with dyslexia and internet safety.

4.2 PROFILE OF INTERVIEWEES

Like that of the survey respondents, of the total 51 participants who took part in the phone/zoom interviews the majority were female (n=48). As figure 9 demonstrates in respect to county representation 63% of interviewees came from the Sligo area (n=32) and 37% came from the Leitrim area (n=19).

Figure 9: Profile of Interviewees by County

Sligo; 63% Leitrim; 37%
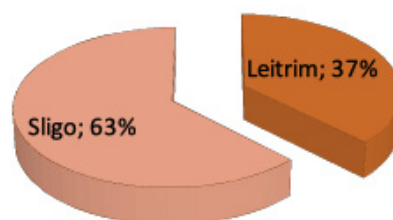
Interviewees were asked to self-categorise their status. The results arising from this question is outlined in figure 10 below. The majority of interviewees (47%) indicated their status as 'parent' (n=24), 17% of interviewees stated that they were 'separated' and a further 12% stated that they were parenting alone. Interviewees further categorise themselves as adoptive parents (4%), kinship parent (2%), foster parent (2%), parent from new communities (6%) and grandparent (2%).

Within these categories interviewees further distinguished their parenting roles as 'carer of a child/adult with a disability or adult with a chronic illness' (19.6%), those who had experienced domestic violence (5.8%), returnees to the area (7.8%), and those experiencing mental health and well-being challenges (5.8%).

Figure 11 below indicates that 43% of those who participated in the interview process were 36 – 45-year age group (n=22), with 31.3% of interviewees in the 25 – 35 years' age group (n=16), and 21.5% in the 46 – 54 years' age group (n=11) and a small sample (3.9%) from the 55+ years age group (n=2).
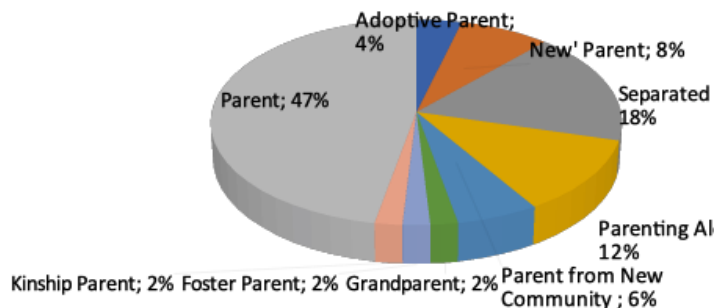
Figure 10: Self-Categorised Status of Interviewees

Figure 11: Interviewees by Age Group
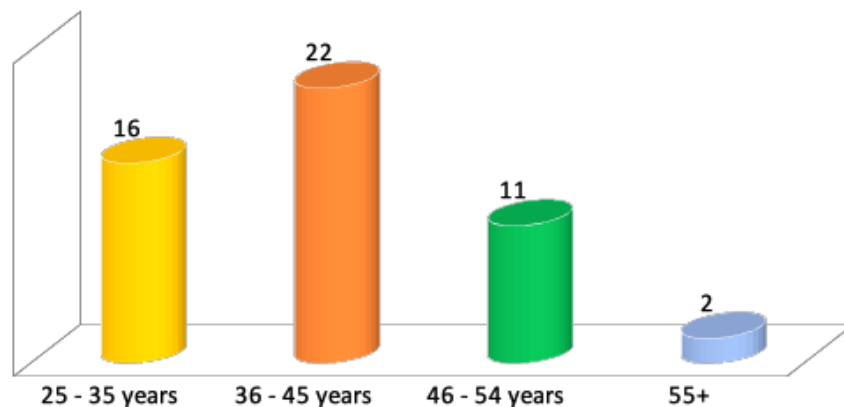
4.3 PROFILE OF SERVICE PROVIDERS

Twenty-eight support organisations took part in one to one phone interviews. The primary focus of these interviews was to facilitate services to identify existing, new and emerging parenting support needs from their own service provision perspective. The interview process also incorporated questions pertaining to the challenges facing them in implementing their activities and/or in offering support services that would best meet the needs of those in parenting roles in the future.

Figure 12 below outlines that the majority of participating organisations in the interview process came from the Family and Community Support cohort (6) followed by deliverers of parenting programmes (5). However, an important caveat is that each organisation while distinct in their own right cross many different support fields and share functions similar to others by the very fact that their service provides supports to children, young people and those in parenting roles – each of which are interlinked.

Figure 12: Profile of Parenting Support Organisations

Bar chart values: ...d Family Support /Wel... = 2, Family and Community Supp... = 6, Diversity/ Ethnic Minority Sup... = 3, Parenting Programmes = 5, Early Years Supports (0-5) = 2, Education and Training Supp... = 2, Children and Youth Support/A... = 5, Health and Wellbeing = 2, Disability Support = 1
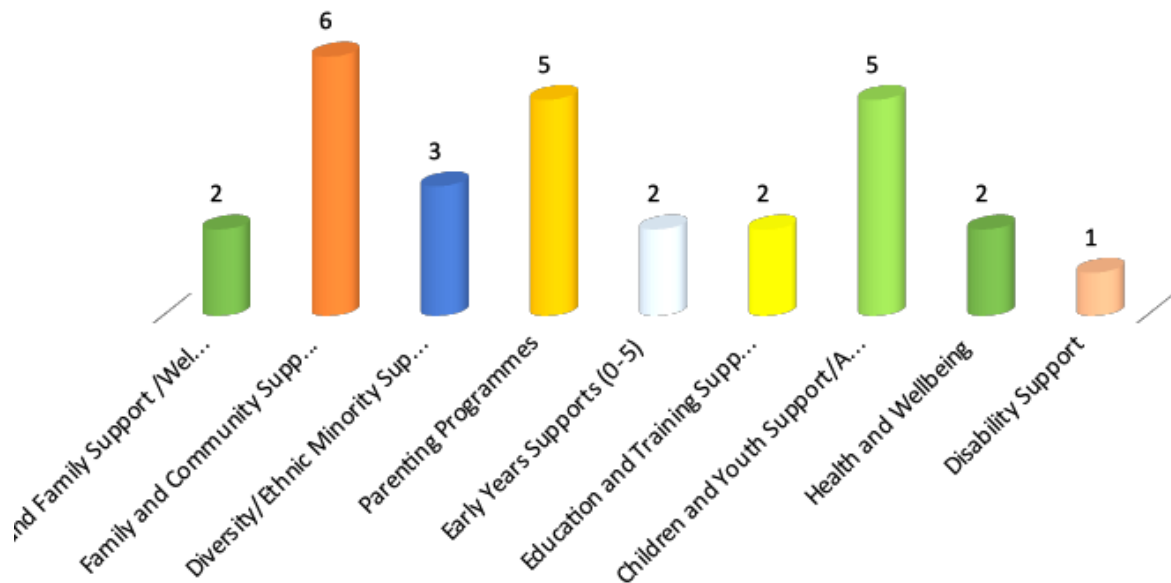
4.4 PROFILE OF CHILDREN AND YOUNG PEOPLE FOCUS GROUP

The profile of the 14 participants in the Children and Young People's Focus Group from across the catchment area comprised 11 participants were from County Sligo and 3 participants were from County Leitrim. The majority were 18 years and over (n=9) and 5 participants were under 18 years. The latter group participated with the written consent of their parents/guardians.

4.5 PROFILE OF FOCUS GROUP PARTICIPANTS

The focus group sessions offered those in a parenting role to come together to articulate their own experiencing of parenting. Of the participants 19 were from Sligo and 14 were from Leitrim. In total 33 participants took part in the focus group sessions.

Again like that of other data gathering methods female participation was in the majority (32) with one male participant. It was from this method that the most diversity of participants occurred with 7 participants from ethnic minority groups or new community groups. The majority of participants were in the 35 to 46 age category (20), and 12 participants from the 25 to 35 age group and one in the 55+ year's age category.

4.6 CONSULTATION FINDINGS: EXISTING, NEW AND EMERGING NEEDS OF THOSE IN PARENTING ROLES

4.6.1 SURVEY FINDINGS

Survey participants who did not participate in parenting support or programmes were asked to indicate their reasons for non-participation. As figure 13 outlines below almost 50% of respondents indicated that they *'did not feel that I needed support'*. However, a significant number of responses did indicate a range of barriers that they felt contributed to their non-participation in support or programmes including *'did not know where to turn for support'* (17.49%), unable to attend due to childcare (16.39%), unable to find a suitable programme "when I needed it" (10.93%) and 7.19% of respondents felt that there was a stigma "about asking for support".

Figure 13: Respondents Reasons for non-participation in Parenting Supports / Programmes
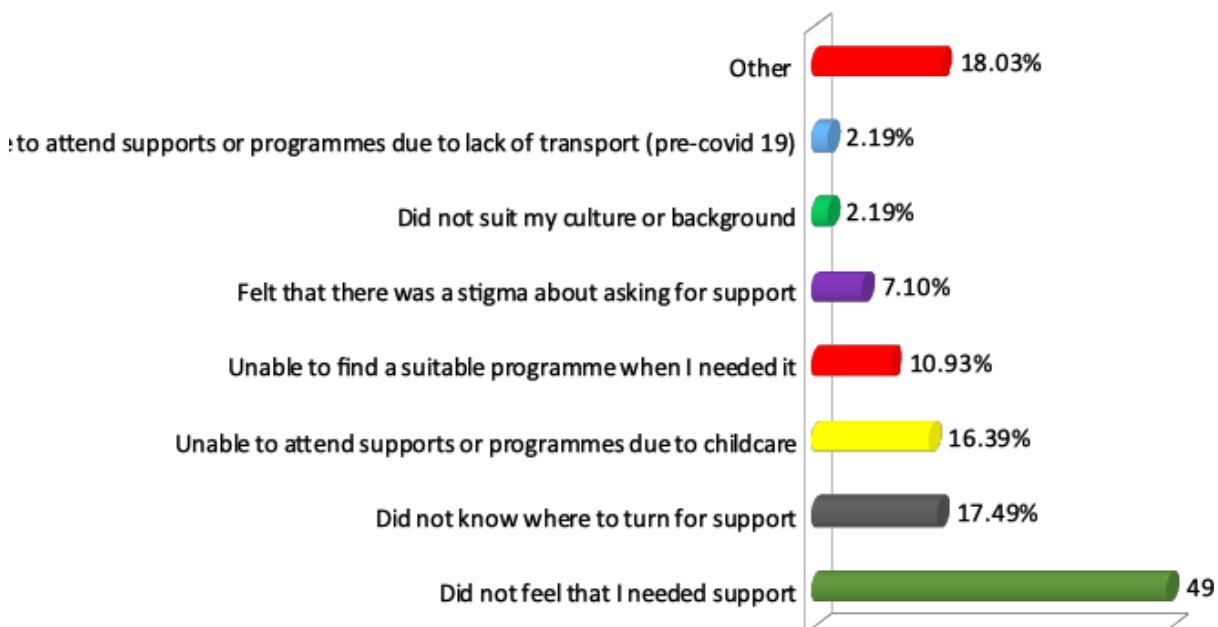
Those respondents who stated other reasons for non-participation in parenting supports / programmes included 33.3% of respondents (n=10). In this cohort a key difficulty was posed by the programmes and supports delivery times coupled with work commitments.

"Difficult at times when working as most activities run during work hours".
"Sometimes courses are started at 5pm in the evening. Maybe it should be 7 or 8pm".

Even when respondents were able to access programmes or supports in the evening childcare could pose a barrier:

"Sometimes the times of the courses doesn't [sic] suit due to work or lack of childcare in the evenings".

Another reason that was somewhat linked to the timing of programmes included some respondents stating that 'having time' or 'doing programmes' after work (n=4) presented barriers.

*"Time is a serious issue for all working parents"*
"Too busy to go looking…"
"A lot of Triple P programmes in Sligo Town and Carrick but journey after work is too

A number of respondents perceived that there were *"no parenting supports available in my locality"* (n=4). Other reasons included the respondents own mental health prevented them from participating in programmes or supports, Covid-19 prevented accessing group/peer supports (n=2), no childcare was again raised by one respondents (under the other category) while the reminder did not specify reasons for non-participation (n=12).

Survey participants were asked what would help most to encourage those in parenting roles to participate in parenting support or programmes. A list of options was presented to survey participants. Respondents were invited to select all options that applied, as well as being provided with the opportunity to identify other needs not suggested. Findings emerging from participants' responses are represented under each category in figure 14 below.

Figure 14: 'What would help most' to Encourage Those in Parenting Roles to Participate in Parenting Supports or Programmes
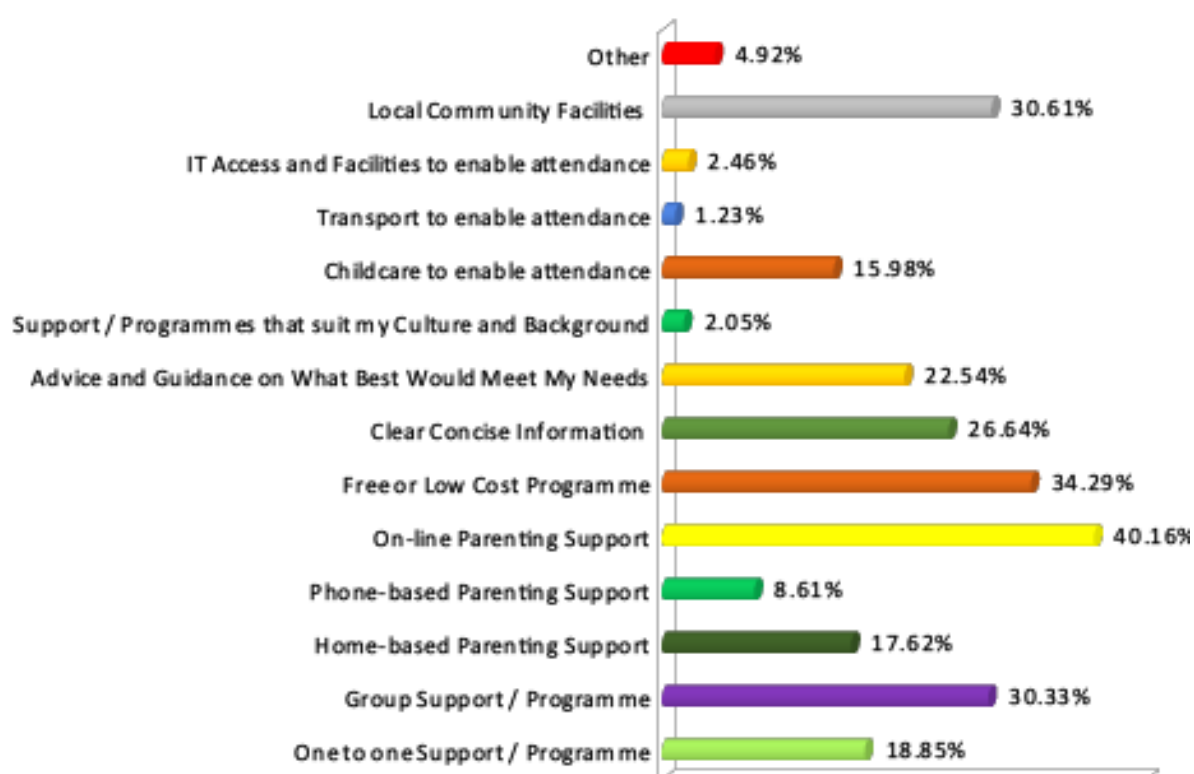
The majority of respondents (40.16%) indicated that on-line parenting supports would help most to support them to participate in parenting supports or programmes, 34.9% indicated that free or low cost programmes, 30.61% indicated local facilities while 30.33% identified group support/ programmes as most helpful.

4.6.2 Future Supports and Programmes

Participants were invited to consider future supports and programmes and were prompted by a list of options. Figures 15 below outlines the programmes identified with the majority of respondents indicating 'promotion mental health and wellbeing' (63.41%), with a substantial number of responses indicating 'internet and social media awareness' (49.59%), 'parenting 0-6 years' and 'understanding child development' (40.42%).

Figure 15: Identfication of Future Parenting Suppoprts and Programmes

Category	Percentage
Other	8.13%
...ting good mental health and well-being in children and young people	63.4
Parenting while caring for others	11.38%
Parenting, budgeting and financial planning for the future	27.24%
Relationship, sexual health and sexuality awareness	27.64%
Internet and social media awareness	49.59%
Addiction, drugs and alcohol awareness	20.33%
Parenting Programme that suits my culture anmd backgroud	4.47%
Parenting Adolescents	41.46%
Parenting 7 - 12 years	36.59%
Early Learning	23.58%
Understanding Child Development	40.24%
Parenting 0-6 years	42.29%
Attachment Support	13.82%

Those respondents who identified 'other' presented a range of future programme needs. The majority of these responses (n=7) centred specifically on disability support programmes, including:

"Helping and understanding of parenting of ASD children".

"Parenting siblings of child with disabilities".

"Support and information on helping your child to understand his/her condition…"

"A workshop for parents with children with disabilities informing them what services are available to them and how to apply for these services".

"Disability supports, tutoring for children falling behind at school, counselling for children and families struggling with behaviour related to Autism, professional supports for Autism, properly developed Autism diagnostic services for homes and schools".

Specific parenting supports identified (figure 16) for future consideration included almost 50% of respondents indicting 'easy access advice and guidance', 'on-line supports and programmes' (47.74%), 'group supports' (41.15%) and 'easy access information (40.35%).

Figure 16: Future Parenting Supports

Support	Percentage
Other	1.65%
Transport to enable access to supports and programmes	6.17%
Childcare to enable access to supports and programmes	18.93%
Internet and IT support to enable access	10.70%
Webinars on specific topic	30.86%
Family focused supports for children and young people with complex needs	14.40%
Peer parenting support/Mentoring programme	15.23%
Fathers support group	20.99%
Intercultural parenting support groups	8.64%
Once-off talks on specific topic	36.63%
On-line supports and programmes	47.
Telephone based support	16.05%
Group support	41.15%
One-to-one home based support	20.58%
Information and sign posting to support in one place	27.98%
Easy access information	40.33%
Easy access advice and guidance	4!

Other supports included social fun activities for children (n=1), how to approach exams without stress (n=1), *"people's circumstances differ and a wide range of access and programmes are needed"* (n=1) or not specified (n=1).

4.7 INTERVIEW PARTICIPANTS

One of the aims of this study was to identify the needs of those in parenting roles across the two countries by giving direct voice to parents to share, articulate their experiences and given the opportunity to point to future strategic actions based on those experiences. This section focuses on giving voice to parent's valued experiences by revealing more in-depth reflections garnered through one to one phone interviews with parents. The data arising from the interviews are also arranged in specific themes as they arose in the data collections process. It should be noted that many of the reflections during these interviews was influenced by the participant's experiences and anticipated outcomes of living with the impacts of the Covid-19 pandemic.

Therefore, throughout the reflections their experiences and perceived impacts of Covid-19 are referred to throughout the following reflections.

4.7.1 PEER SUPPORTS AND CHILDCARE SUPPORTS

'Parent and toddler' groups were raised as a *"really good support"* for parents (pre covid-19), allowing parents to talk and share parenting experiences with "those in similar circumstances".

> *"I used to go to parent-toddler groups in different places*
> *on different days…it was great!"*

However, for some interviewees, parent and toddler groups were unavailable to them due to the distance required to travel and/or lack of transport but also due to lack of awareness of their existence in the local community or nearby. Additionally, a key issue that was raised by those who had returned to paid employment after maternity/paternity or other forms of leave and who had participated in parent and toddler groups during this period of leave felt the absence of that support:

> *"when you go back to work or your kids start school, there isn't the option to participate… leaving you feeling isolated a bit. You go from having this good support network to nothing…"*

The most striking observation to emerge from interviewee's reflections related to the absence of locally-based parenting supports due to Covid-19 pandemic (e.g. parent toddler groups) to enable connection with each other. Additionally, interviewees made reference to the absence of supports to enable children and young people to connect in a time of restricted movement.

Interviewees also raised the issue of lack of childcare facilities across the two counties. As well as some parents especially in the 25 – 35 years' cohort indicating that when there were places available they do not always coincide with working hours. The following statement from one of the interviewees outlines the complexity of accessing childcare especially where the parent has to work around the childcare facility as opposed *"to working around my work times"*:

> *"they opened at 9 and closed at 6…that didn't give me time to travel to and from work, I had to get a babysitter to do that and then she couldn't do it herself when her kids started secondary school…"*

A perhaps emerging complexity for childcare facilities raised by a number of interviewees is the impact of Covid-19 and the resultant increased *'working from home'* phenomenon has had and will continue have. Interviewees anticipated that there will be increased need for flexible childcare and that there appears to be no future plans in place to address this, as one parent outlined:

> *"I went to look at a hub (in town), it was grand for work purposes…as I could work there for the (transatlantic) hours I needed but there is no drop-in childcare and there are no childminders here (where I live)… what do I do? How did they not think of this when they were planning the hub…it should be in the planning permission…"*

4.7.2 PERCEIVED STIGMA OF SEEKING PARENTING SUPPORTS

The most consistent theme to emerge from the interview process and which appeared to a lesser degree in comments attached to the on-line survey for parents was the issue of the perceived stigma among parents in seeking parenting supports. A phrase replicated consistently during the interview process when this issue was probed further was a fear of judgment that *"I have failed as a parent".* Interviewees expressed concerns as represented by the following participants view that:

> *"people judge you for doing this parenting course or that parenting course…it's like they think that you have failed because you are getting a little help….I don't see it that way but I still free a stigma…so I've stopped saying what I'm attending".*

There was a strong recommendation arising from the interview process that there is a requirement to 'normalise' parenting supports from the very start *"from the pre-natal classes…so you don't feel that there is something wrong with you as a parent if you go to a parenting class".*

4.7.3 SUPPORT SERVICE DELAYS

The most significant concerns expressed by interviewees related to support service-delays, limiting service-users' access to services in particular disability support services and mental health and well-being support services across both counties.
Forty per cent of the interviewees raised issues and service gaps in respect to disability support services, either directly experienced by themselves or their peers or other family members.

Interviewees referred to a broad range of disabilities in which one or more family members/ peer group has a disability including physical, intellectual, emotional, sensory, psychological or due to chronic illness. There was a common articulation of the deep frustration, isolation and as one parent summed it up *"a sense of abandonment"* by disability services and the 'State'.

In addition, all families spoke about having to access *"private supports"* especially around diagnosis which appears to have impacted significantly financially. A number of parents spoke about the impact of supporting their child/children and *"fighting for every support"* had on their family life and in three cases contributed to marriage breakdown.

General Practitioners (GP's) were seen in polarised terms with some positive experiences being shared by interviewees however the majority of interviewees in this cohort expressed experiences of poor support and *"disinterest…like it was too much trouble".*

Similarly, interviewee's perspectives on the support they received from schools presented for the majority a negative picture. There was general agreement across the interviews that *"schools perhaps haven't the capacity to support children with disabilities".* The capacity that interviewees referred to included time, resources and expertise. For a minority of parents in this cohort there was a deep sense that *"the school simply did not want to know".* Parents indicated that they had to find support information themselves, usually through on-line resources, but not always with positive outcomes, as one participant outlined:

"I had to look at websites in Australia and Canada, but when I brought these suggestions to the school they simply didn't know how to include in my sons learning".

The role of local medical teams and schools in supporting parents and their children with disabilities was highlighted by interviewees. (However, it must be stated that this theme also arose in different data sources throughout the study). In respect to the local medical teams usually comprising of the local GP and public health nurse, interviewees felt that in respect to parent supports these *"were hit and miss"*. For some parents their public health nurse was central to their parenting support needs especially at the early stages however for most interviewees the following statement represents their experience:

"I saw her when she (my daughter) was born and that was it, it was a different one for the developmental checks...it was like they are checking a box and not listening to me".

The impacts on parenting of these experiences have resulted in increased stress, worry and anger and as one interviewee articulated *"being an angry parent isn't so good"*. The impact on siblings was also raised by parents in this cohort expressing concern that "all my energy goes into fighting for him, trying to get what he needs and I know they aren't getting my full attention, it really hard balancing it all…".

4.7.4 EXPERIENCES OF THOSE PARENTING ALONE

While resilience was observed by the interviewer single-parent households with children articulated feelings of stress, loneliness and isolation. Coupled with these experiences interviewees reflected on their parenting capacity, and their consistent questioning of how best to parent especially without the support of another person to discuss, seek support and advice on the best approach:

"I'm both mother and father, and while the situation we left wasn't good for them (the children) you do think all the time - am I saying or doing the right thing in my parenting?"

The added trauma and its impacts arising from separation or divorce on parenting appeared a significant theme amongst this cohort of parents who again articulated the loneliness and isolation experienced by them in supporting their children through the trauma of change caused by the absence or increased distance of another parent:

"it's' only me… it's hard to talk to friends about what's the right thing to do with him, the trauma of the separation was hard on him, he is acting out and I really don't know where to turn…"

4.7.5 EXPERIENCES OF THOSE CARING FOR OLDER ADULTS

Five interviewees raised the issue of caring for older adults e.g. their own parents/parents-in-law etc. Interviewees articulated that care responsibilities as a parent coupled with caring for older family members *"is a hidden issue and a time bomb"*. Participants in the interviews felt that there was very little recognition of the challenges of this 'sandwich generation' and agreed that it had or currently is impacting on their parenting of their own children.

"You are expected to do it…especially in a rural area and they are just down the road. But, it is so hard trying to have the energy to bring up my own kids well and deal with their medical and care needs".

There was a clear consensus among the interview participants and reinforced by focus group participants that these situations of taking care of children and the older generation is increasing and that there is appears to be very little recognition or supports of the issues it poses especially for parenting of children and young people.

4.7.6 MENTAL HEALTH SUPPORTS

Mental health supports were raised by interviewees with concerns centring on the "the current inadequacy of local mental health supports". Interviewees spoke about the length of waiting times in accessing clinical supports such as CAMHs. Interviewees suggested referrals to other supports was a common process as a way of *"holding parents while they wait"* specifically for diagnostic services.

Interviewees articulated that *"this waiting"* resulted in extreme emotional, mental, financial stress and had a negative impact on their ability to parent and family life in general. There was a consistent theme arising from parents' reflections around fear at the possibility that children/young people may be *'aged out'* before receipt of support:

"while counselling helps it doesn't help us understand or support him with his mental health, he needs (a) firm diagnosis so he knows and we know what we are dealing with…he will be too old for CAMHs at the rate it's going…but maybe that is what they want.."

The mental health impacts of Covid-19 restrictions, as reported by interviewees, appear wide reaching. All interviewees identified existing, new and emerging mental health needs (due to Covid 19) including:

Increased levels of loneliness and social isolation experienced by both themselves and their family members resulting in observable anxiety, stress and increased worry:

"My daughter is 13 and while she would always have been sensitive because she has been away from her friends she seems to have become increasing anxious and fearful of things and withdrawing into herself".

Expressions of depression were articulated by a high percentage of interviewees in the course of their interviews and they expressed concerns as to how this was affecting this

parenting with one parent expressed *"that I can't even get together with friends now to talk about it and what I should do".* A clear theme arising from the majority of participants who articulated feelings of depression, low mood and anxiety was an expressed need for counselling or therapy and *"supports around my parenting".*

A significant reflection by interviewees was increased behavioural difficulties among children and young people. Again, for many of the parents who took part in the interviews there were some who had experienced behavioural issues in their families pre covid-19 but expressed that *"covid restrictions have exasperated these, and I am worried how to manage this…".*

In this context again interviewees highlighted either inadequate or reduced mental health supports as impacting on their mental and wellbeing, which the majority stating *"this was there before covid, but is and will be even worse now…"*

These issues appear to be compounded by service-delays, preventing parent's access to existing services and a greater reliance on services being provided online or not at all, thereby reducing parents' and families' direct face-to-face engagement with service-providers. While the interviewees indicated that on-line support worked especially if *"you don't want or can't travel"* or *"you don't have to participate too much…like talk in groups…get to know others too deeply"* and it can *"give you anonymity".* However, for others especially those in deeper crisis mode, the access to on line supports was not as helpful to their situations:

"It really doesn't work for me, I need hands on, face to face support with a human being that will tell me it will be ok and this is how you can support yourself and your child".

4.7.7 ECONOMIC INSECURITY

A significant issue articulated by participants in the interviews was the impact of economic insecurity on their parenting due to increased loss of employment especially Covid-19 induced temporary or permanent closure of local employers. Additionally, increased stress and anxiety arising from economic impacts of Covid-19 was cited by 21% of the interview cohort.

A notable observation from the data suggests that concern around economic security appears to affect women in particular as a number of participants in the interviews spoke about *"losing my job, I know it was only part time but this is worrying me a lot…our income is a lot less than it was before Covid 19".* Interviewees also cited concerns about meeting basic costs of food, heating, clothing, education costs and rent/mortgage, again presenting these issues as having a negative bearing on their ability to parent.

"There is no doubt I'm more concerned now than a year ago about meeting our household costs…and this worry means we have to cut back I have to think about what I buy for the kids lunch and I'm concerned how all this that affects the kids".

4.7.8 PERCEIVED PARENTING SUPPORT GAPS

Like that of the on-line survey participants, interviewees were asked to identify parenting support service gaps. As outlined in figure 16 below, the majority of responses were in line with those raised by the on-line survey respondents.

As previously indicated limited mental health and well-being supports for both their children/young people and themselves, perceived poor linkage between parents and the education services (especially in the case of families living with a disability) and the need for more flexible childcare options and increased peer support options. In addition, supports to enhancing the role of fathers in parenting, a clear concise information source that is accessible and provides *"a clear route to supports"* was clearly articulated as the key gap in support for interviewees:

Figure 16: Perceived Parenting Support Gaps: Interview Participants
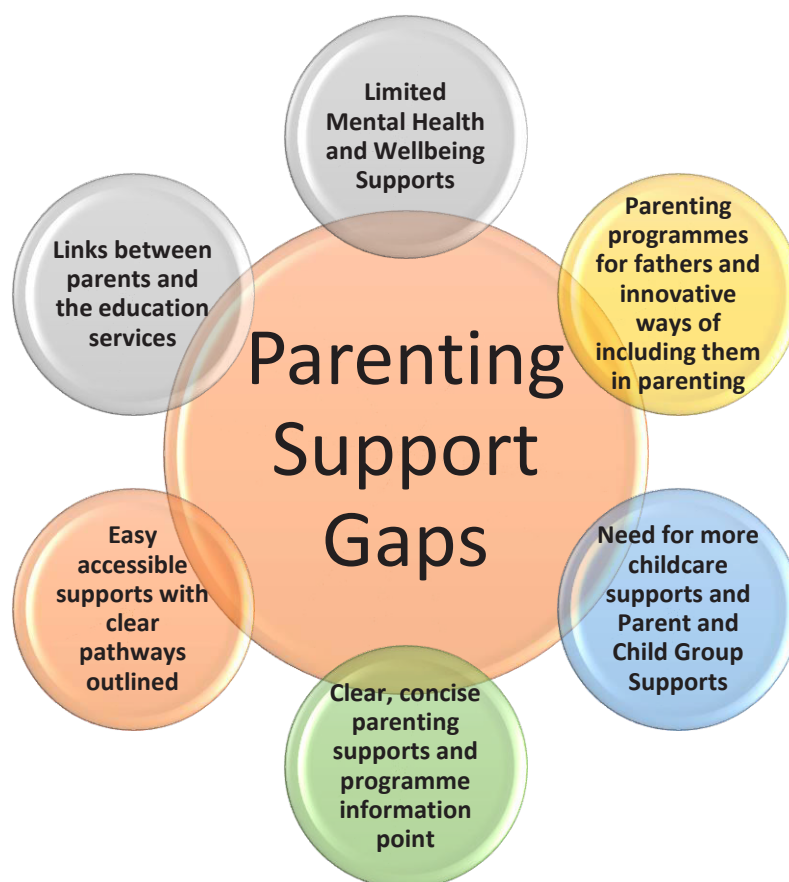
4.8 FOCUS GROUPS PARTICIPANTS PERSPECTIVES

Focus group participants raised a myriad of parenting supports needs based on a wide range of experiences. For the most part participants reiterated that which arose in the on-line survey and individual interviews.

4.8.1 SUPPORT SERVICE DELAYS

There was a common sense from this cohort of participants that some parents are worn out *"trying to do everything for all the family"*.
This was especially evident for parents with children with disabilities who reiterated much of what other data sources in the study reflected:

"…you are always fighting for supports, services are haphazard, you have to question all the time are you looking in the right place, will my kids have aged out by the time they get to them?"

Parents articulated experiences of having no direct pathways to services or going the wrong pathway, being treated as an over anxious parent or being *"a fussy mother"* when raising issues with medics or in the school environment. Like that of other stakeholders in the study parents felt frustration with the waiting times they experienced in accessing support services:

"waiting for an assessment for (my) child... for diagnosis, feel we have been left alone on a waiting list...".

The impact on their capacity to parent their children/young people as a result of living *"with these frustrations, worries and fears…"* are considerable. Focus group participants talked about the isolation their felt and their limited support networks available to them around their parenting skills

"The 'know-how' to parent goes completely out the window and then everyone is in a heap…I question what is right and wrong, what is the right thing to do and say at the right time".

4.8.2 PEER SUPPORTS AND PARENTING SUPPORT PROGRAMMES

A similar theme to what arose during the one to one interviews with parents was the need for more 'parent-toddler' groups at a local level which parents identified as *"a lifeline, and often gave me direction to supports"*. For those parents that participated in parent-toddler groups they reflected that they found them to be invaluable sources of information and support in their parenting roles *"as well as a social connection with other mothers that you wouldn't have otherwise in those early days"*. However, as observed in the other data sources participants reflected "that support goes when they go to school".

A reflection that arose across all focus groups was the need for parenting supports and programmes to *"keep up will what is coming down the line"*. While participants who had participated in parenting programmes were complementary of the programmes themselves they felt that there was a need to focus and embed information in preparation for the next stage of the child's or young person's development in programmes.
"If you are aware of the particular challenges or needs of that age group you would be more prepared in advance, maybe lessening the problems or even preventing them".

4.8.3 EXPERIENCES OF THOSE CARING FOR OLDER ADULTS

The theme of caring for older adults or those with a chronic illness within the family was again raised during the focus group session. Like that of the individual one to one interviews it was highlighted as *"something that isn't talked about enough and its becoming more and more common"*. Participants felt deeply that implication on their parenting was significant:

"I just can't always find the time for the kids, or I'm tired emotionally and physically…

I really don't know how to manage it all".

4.8.4 SOCIAL ISOLATION AND ECONOMIC INSECURITY

Thirty-three per cent of focus group participants specifically expressed having previously experienced or are currently experiencing social isolation. Social support can act as a protective and in preventative capacity, and as a stress-buffering factor by bolstering a parent's self-esteem and sense of efficacy. Participants described social isolation as a debilitating factor in their parenting contributing to attachment difficulties and compromising opportunities for information exchange not just in respect to parenting but the parent's own well-being. It must be stressed when reviewing those parents in this cohort the majority were living in an urban area and not as is often supposed a rural environment.

The economic pressures posed by in part Covid-19 but also by long standing financial pressures within families were raised across all focus groups. Participants indicated that parenting in a *"poor"* economically family situation is *"a difficult job"*.

4.8.5 GENDERED PERCEPTION OF PARENTING

There was a clear sense amongst focus group participants that much of the parenting in a family still falls to the female:

"he is a great dad but he goes off to work and when he comes home there is little time for parenting, I've been doing it all day…there needs to be a way to get fathers more involved, maybe through devising fun programmes…"

But participants also articulated their opinion very clearly that fathers and their role in parenting are often neglected particularly by service providers. Interviewees all gave example of these situations with the most common being that of schools corresponding *"more one than not with the mother",* or the expectation that the female parent will bring the baby for its development check, or expecting *"dad to leave the room during the post-natal home visit".*

4.8.6 PARENTING NEEDS WITHIN THE TRAVELLER COMMUNITY

A specific focus group was facilitated with the Traveller community in County Sligo. Reflections from the group members clearly articulated that there were significant 'other' needs that impacted on parenting with the community. Amongst those berries to accessing parenting supports identified included poor accommodation, a high level of poor mental health and wellbeing challenges, difficulties in accessing services due to limited direction to supports and the Traveller community's enduring experience of discrimination and the barriers to their engagement in the education system. Table 5 below summaries some

examples how these issues impact on the Traveller community and how they may present addition challenges to parenting and the provision of parenting supports.

Table 5: Challenges to Parents in the Traveller Community

Issue	Impact on Parenting
Accommodation	Homelessness, overcrowding, substandard conditions on sites and group housing. Additionally, lack of access private rented accommodation. Impact on parent s ability to meet the basic needs of their families.
Mental Health and Wellbeing	High rate of suicide, lack of physical activity, limited emergency service out of hours affects all age groups but like that of the wider community impacts on parent s confidence in their parenting skills.
Difficulty in Accessing Services	Perceived unfriendly services , 63 fear of services (e.g. social workers, family support workers etc.) or like that of some of the wider population the Traveller community are not always not aware of parenting support services or not sure 63 where to go due to lack of signposting by services . Challenge for Traveller families to seek support from outside their extended family where they may be afraid to ask for support and culture of thinking that 63 you can help yourself impacts negatively on accessing services.
Discrimination	This overarching issue permeates through all issues experienced by the Traveller community but exclusion from social life activities (not being part or feeling part of community activity) has an effect on health and wellbeing and exasperates social isolation, including for instance opportunities in seeking supports from peers through parent and toddler groups in the wider community.

Reference was made by participants in the focus group to establishing fully early year's supports to the Traveller community including *"getting information"* to families, antenatal information and supporting young and 'new' mothers in their parenting role. A focus on improving parenting information and access to services was suggested with the Traveller community themselves (e.g. the Traveller Community Health Workers) acting as a bridge between Traveller community and Health Service/family support services. It was recommended that Traveller groups should focus on continuing to work with staff and decision makers through the established structures to achieve advancement in parenting supports such as the Traveller Community Health Programmes.

4.8.7 PERCEIVED PARENTING SUPPORT GAPS

In respect to perceived parenting support gaps focus group participants articulated similar theme to those identified by other stakeholders in the study. A key theme arising include parent's uncertainty that services are for them or for parents in crisis and uncertainty as to what each of the services offer to parents. Supports during periods of transition for their children and young people were emphatically articulated by parents who took part in the focus group session. All the participants pinpointed key stages *"of huge change"* in their children's lives and in their parenting journey as particularly stressful as they did not know

what to do to prepare for or deal with these significant periods of change e.g. pre-school to school, primary school to secondary school etc.

Figure 17 below summarises the themes identified by the focus group participants in respect to the perceived gaps in parenting supports across the two counties:

Figure 17: Focus Group Participants: Perceived Parenting Support Gaps
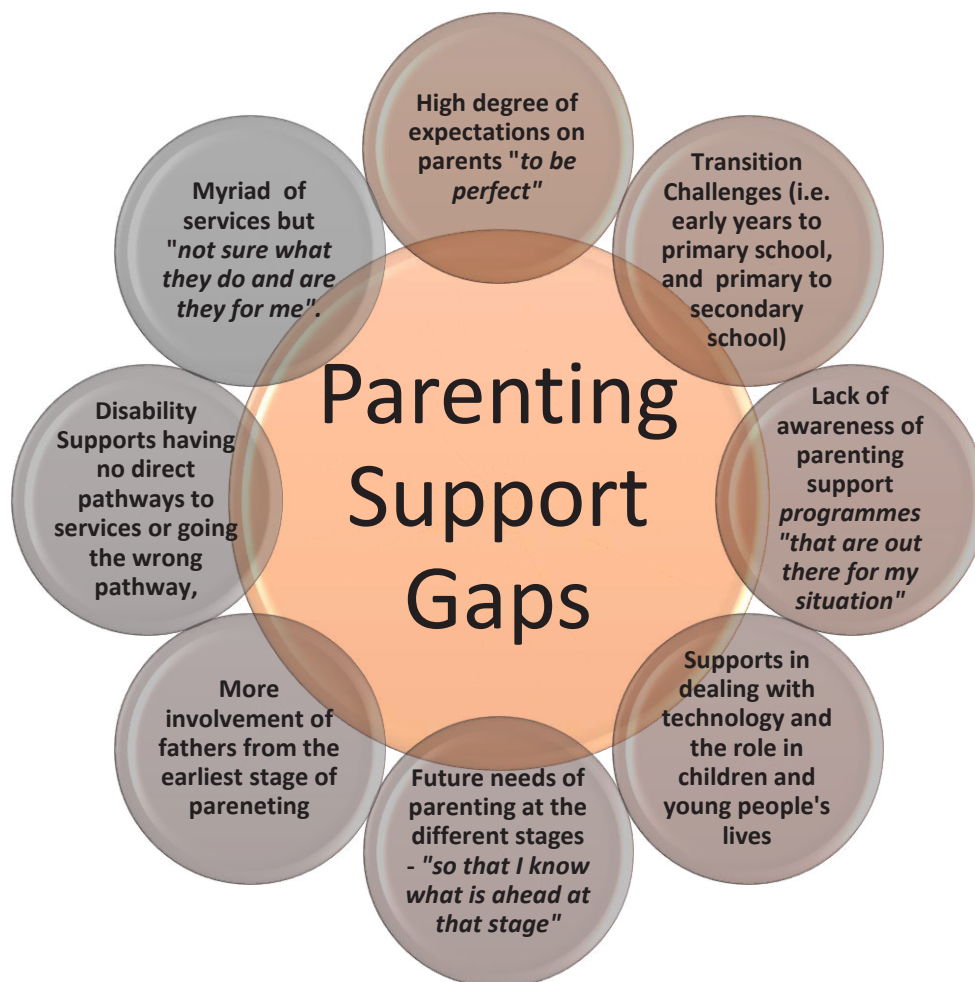
4.9 YOUNG PEOPLE'S PERSPECTIVE'S OF PARENTING SUPPORTS

The present study aims to explore the parenting support needs of those in a parenting role in Counties Sligo and Leitrim. This study was carried out against the backdrop of changing trends in Irish society, most notably, the recognition that the voices of children and young people are of significant importance in pursuing policy and/or practices changes. At a local level the established CYPSC structures are continuing to drive this approach and with service providers seeking to fully embrace this concept in their delivery of supports. However, few studies undertake a gathering of children and young peoples' perspective on what they feel those in a parenting role require in order to support them in their parenting. Thus, this study sought to explore a sample of children's and young people's perspectives on parenting support needs.

Children's and young people's views on parenting needs are best understood within the social and cultural context in which they are generated. The young people who took part in

the focus group revealed their current experiences of isolation and stress due to Covid-19 (and for some the grief and loss of loved ones) and distance from their friends. However, despite this, the young people who took part in the focus group were very clear that their perspectives on parenting were well established pre-Covid 19.

The young people revealed their views of 'parental roles' as providing emotional and financial support, nourishment, protection, monitoring and regulating behaviour, guiding and teaching, advocating for and facilitating children's and young people's confidence, independence and autonomy but also enforcing limits and boundaries.

A number of themes emerged pertaining to what the young people would most like to see in those in a parenting role included:

Trust in parent-child relationship: The young people's narratives in this sample emphasised the importance of trust in parent–child relationships. Young people expressed the view that parenthood is difficult because of the high levels of responsibility involved in the lifelong obligation to care for and protect children. They emphasised the need for their right to privacy to be balanced with parents' right to monitor and regulate their actions, but that parents *"have to learn to trust us more… to do the right thing"*. The young people stressed the importance of good communications and emotional support in building trust between the parent and child thereby facilitating increased autonomy and independence. This led to the second key theme arising from the focus group discussion.

Communication: Open communication was seen as vital by the young people who took part in the focus group which they defined as *"by both sides opening up to each other… that strengthen the relationship"*.
However, the young people felt that that communication becomes more complex when parents felt that they had loss of control of a situation or were frustrated. The young people felt that communication in the parent-child relationship often centred on or *"resorted"* to power-assertive communication such as the removal of privileges, or expressions of disappointment with the intention of inducing feelings of regret for misbehaviour. The young people felt that they would like to experience better communication ability in those in a parenting role:

"…like to see more open conversation, it can be hard to bring things up, you just want a parent to ask you..."

"Listen to what we are saying".

Two further recommendations in respect to communication were voiced by the young people. Firstly, that parents and parent support programmes *"need to focus on better communication skills starting from the toddler stage right up…"*.
Secondly, the need to improve parent-school communication was raised as an important point to support parents and in turn their children/young people *"We spend so much time there (school), communications have to be better between the two"*.

Mental Health and Well-being: The young people felt very strongly that those in parenting roles needed to recognise that counselling and therapy takes time. They articulated the feeling that parents *"expect after 6 months of therapy that you will be back to yourself"*. The participants voiced the opinion that that parents grew up in a generation where there was a "massive stigma" attached to counselling/therapy and that they did not really understand that it is not just for crisis intervention but a way *"just to take care of yourself…they need to be reassured that it's not really a bad thing to happen"*. They further emphasised that those in parenting roles needed to *"understand that things change a lot in a young person's life"* and *"not to dismiss a problem"*.
Participants articulated strongly and with consensus that young people required from those in a parenting role should not ignore their children's mental health and well-being especially

when they may be struggling and which needs to be taken into account by those designing and delivering supports for parents:

"Parents should recognise that they don't always have to have the answer…sometimes we just want to get it off our chest…just listening helps a lot".

"(parents) should not to be dismissive when we say something is wrong, want them to be more open about it... not just say it will be alright".

"They should become more familiar with the warning signs of (poor) mental health".

"They think that by not talking about it or not saying it that they are protecting you".

Following on from these reflections the focus group participants further recommended that advice should be available to parents on how to support children and young people when their children were experiencing particular mental health and wellbeing challenges: "How to approach a subject" and "To help them to ask how to support me…".

Participants in the focus group concluded the discussion in respect to mental health and well-being needs suggesting that parents need:

"Access to mental health and well-being support themselves to be a good support for their own children".

Part of this support identified by the young people in respect to parents own mental health and well-being was the young people recognition that there is a need to lessen parent's own isolation by engaging with other adults including their own peer group:

"Not seeing other adults and (they) are weighted down with problems that they have no one to talk to about…"

"Go to talk to other parents…it would be helpful to talk to parents in similar situation".

In the context of young peoples' perspectives on parenting supports that they felt those in a parenting role required the following:

Information on Supports and Resources Available: The focus group participants felt that parents did not always know what and where supports are available and they needed to *"know what's out there".* A key message to emerge was that there was a perception among the young people that "*there are very little resources locally… you have to go to Sligo".* The young people recommended that "there should be local support as much as possible" with schools in particular being pinpointed as a resource space to provide support to those in parenting roles especially for those living in a rural area:

"(For example) like mental health talks…how to help children and young people".

They recommended that there should be age relevant supports for parents from "toddlers to teenagers":

"(They) constantly have to learn new things as children (and young people) change".

Transitions: Transition from primary to secondary school was identified as a key moment for young people who participated in the focus group and they suggested that parents need to *"understand that these transitions can be difficult for children and young people".*

Role of Technology in Young People's Lives: The young people further emphasised that parents need to recognise that that technology is an important and sometimes "*it is the only connection to our friends (during Covid 19)…and parents need to be more understanding and trust us more with its role in our lives".* The young people felt that parents needed to be educated on how to use technology correctly and "*how it works and not blame u-tube for everything!"*

Chapter 5 Outcomes of the Parenting Support Consultation: Service Provider's Perspectives

This section of the report focuses on the perspectives of support services for parents, children and young people in Counties Sligo and Leitrim. It will first look at the information that emerged in the interviews reflecting the views of service providers on the parenting support needs across the two counties under specific themes. Finally, it will report on the suggestions of services as to how parenting support needs can be addressed in a time-bound strategy.

Across Counties Sligo and Leitrim there exists a wide variety of parenting supports, services and programmes. As stated in Part I of the study it is possible to group parenting support provision on the basis of whether the services are oriented to all parents, or have parent support/family supports embedded in the provision, with some further analysis on whether they aim at empowerment, skills and resource building for all parents or whether they are targeted at parents and families facing difficulties.

A striking observation is the collective manner in which services across Sligo and Leitrim work together, collaborate and attempt to integrate actions where possible. Much of this process is supported by CYPSC structures. Services providers acknowledged that CYPSC facilitated *"organisations to come together, to work together"*. Joint working initiatives under CYPSC structures appears to have forged inter-professional relationships and contacts, and securely grounded actions in the principles of participation, empowerment, partnership and capacity building and the active involvement of services, as one service provider summed it up:

"We always had fairly good working relationships in the region; however that has been truly cemented and grown by CYPSC".

The co-ordinated CYPSC approach and its resulting inter-agency initiatives appears to have further encouraged a uniform response to parenting supports across the region and service delivery, promoting interventions across the key domains of children's and young people's lives and further supporting parenting initiatives to increase this impact.

There was a clear articulation of an overarching theme arising from the interviews with the support organisations and services. All services reflected that successful parenting models depends on an array of interlinked policy dimensions – family support policy, housing policy, educational policy, social security and health care - all contribute to creating a favourable environment for parenting.

Services indicated that the promotion of socio-economic measures and policies is an important aspect of supporting parents and their parenting experience and that poverty can be a barrier to positive parenting and tackling poverty is part of an appropriate response. However, service providers also observed that policy is often demarcated and notoriously stand-alone thereby creating challenges for future parenting supports and strategies which *"could be burdened with the expectation of meeting all needs and any resulting parenting strategy needs to avoid this" (service provider).*

5.1 CROSS CUTTING THEMES

While all the existing parenting support services were considered beneficial, gaps and weaknesses were identified by service providers. There was a striking uniformity in the themes that emerged across service providers regardless of their focus. From analysis of the service provider's interviews, six critical cross cutting themes evolved from the findings.

Communication and marketing of parenting support initiatives was consistently raised by service providers as a challenge. All acknowledged that the parenting support offer in Sligo and Leitrim was expansive, diverse and impactful for many of those in parenting roles. However, there was a clear consensus that support services need to be provided to parents at the point they need them, and not *'when services are ready to receive them'*. Service providers indicated that there needs to be more *"reach out to parents, rather than expecting to reach in to us"*. The key factor in this process was identified as the need to improve communication and marketing of the parenting support offer across the two counties.

While the parent's hub and a range of other linked support sites were identified as important and useful to support services, a consistently question arose as to *"how useful they are to (a) parent seeking information, support advice or crisis intervention?"* and *"are we bombarding parents with services?"*. Linked to this communication and marketing of parenting supports concern was the need for greater co-ordination of parenting support provision to reduce the possible risk of duplication of services/overlap of delivery and several services carrying out the same function in the same place:

"it would be great to really tie down who is doing what and when…we are better at it but there are still issues with services not sharing what they are doing and when"

"some support services are hovering around the same space…and it must be quite confusing for parents, there is a lot of information out there but does it really say clearly who does what and why? How do we interlink? If we can't work that out how can parents?"

Support services spoke about the need to "normalise parenting" and *"recognising at different stages there may be a need for help"*, themes that were also reflected strongly in the consultation with parents.

"Start early…integrate into the ante-natal… that support"

The key reflection for all service provides was the need for a 'one door' approach in communicating and marketing of supports by *"simply stating in one place what [parenting supports] are available"* and when through the development of *"a pre-planned calendar of events…for example, have a number of parenting programme every spring in Sligo and every Autumn in Leitrim"*. A clear point raised by services for inclusion in a parenting strategy was to address the need for improved co-ordination through the practical resourcing of a co-ordinating service:

"Level of service are huge but it needs to be co-ordinated …needs a co-ordinator"

Service providers constantly referred to the low threshold of participation by parents. For some service provides there was a consistent debate as to 'what should the focus be – parenting support services aimed at all parents and are resource rather deficit orientated? Should parenting supports be universal or focused? It was felt by service providers that a centre point of information would indicate what is most in need for parents seeking support over time, allowing for tracking the existing as well as the emerging needs thereby tailoring the offer based evidence of need.

Skill and expertise retention within services in particular the community and voluntary sector organisation was raised by numerous interviewees:

"huge [staff] expertise leaves because the conditions are better elsewhere, here they don't have pension entitlements, low recognition and valuing of the supports they provide…the impact on parents is that support and those providing the supports can be inconsistent and lack of value is placed on the work they [family/parent support workers do".

Others referred to the potential for "*burn out among staff*" and the lack of acknowledgement of amount of work that goes on behind the scenes: "*It's immense for every project…there is twice as much administration*".

Additionally, one state service talked about when a person goes on leave he/she is not replaced *"leading to inconsistency in support to parents or no service at all"*.

Encouraging parenting skills within new communities and ethnic minority groups was identified as a significant challenge by services. Interviewees were clear in the identification of significant barriers for new communities and ethnic minority groups including poor language skills, lack of interpreters ("*children speaking for their parents*"), experience of trauma, poor literacy skills (in their own language), social isolation, absence of basic resources including adequate housing/accommodation, discrimination and the patriarchal nature of some ethnic group. Poor equipment and access resources that potentially would support increased engagement in parenting supports were highlighted as a particular barrier:

"90% have phones that don't work well… how are people going to access websites when they don't have the technology, the skills or the local knowledge".

A number of services supporting parents from new communities indicated that "*you have to start where they (new communities) are at, they need to be understood, gently take by the hand and shown…*".

The poor knowledge of local services amongst new communities was a common theme:

"I came from France and it took tears for me to find out how services work"

A key signpost for strategic action arising from the interviews included the development of peer support similar to the community workers support model delivered by Traveller Support Groups as "*they (new communities) are more likely to go to one of their own community or an elder or a priest than a service like Tusla…*".

A small number of support organisations felt that there is "*lethargy in services that don't recognise the considerable needs of [new communities and the Traveller community] and some require cultural training*".

"Each person comes with a different culture, if you don't take each person as an individual they are lost, in this case one size does not fit all".

In respect to the Traveller community interviewees were in agreement that challenges of communication and co-operation exist between the community and services. In addition, as the interviews with the Traveller community demonstrated key issues of basic need such as accommodation prevent and delay focus on parenting as one service provider articulated:

"If the basic needs are not met, how can you focus on other things like parenting…?"

A point of note within Sligo and Leitrim is the absence of an Integration Strategy despite *"Sligo having the highest proposition of asylum seekers per proposition of population"*. However, the development of a parenting support strategy may encourage the development of such a strategy to ensure the inclusion of new communities into the future.

In terms of signposting actions to be considered under the strategy there was considerable agreement that increasing locally community peer-to-peer based initiatives should be explored to support parent exchange of information, advice and guidance as well as diminishing social isolation and indeed based on points raised in the previous section inclusion of different ethnic and minority groups.

"Parent-toddler groups are cost effective initiatives and have great benefits for parents and children".

The study's focus on the development of a parenting support strategy allowed interviewees to concentrate on the significant gaps in supports that exist in the region such as the need for enhanced supports for parents of children with disability and mental health and well-being reflected much of what parents themselves articulated. Service providers further articulated delayed or late diagnosis, waiting lists, poor support post-school years, limited parenting supports or programmes to support parents own empowerment and advocacy skills, poor support for transition for children and young people living with complex needs and lack of peer support for parents. Pointing to the parenting support strategy service providers stated that:

"All these pressure on parents lead to stress, anxiety, upset and in some cases hopelessness, a strategy needs to take account of this and really focus on supporting parenting skills"

Supports for parents who are separated or are going through a separation: Services agreed that *"coming out from separation increases anxiety and negative effects on children"* as well as negatively impacting in parents own emotional wellbeing and requires particular attention. Separation, for instance, may have impact on a child's functioning, their ability to make friends and socialise, and the child's sense of responsibility for other family members, the child's perception and experience of the separation all putting extreme *"pressure on parenting for the parent the children live with"*. Encouraging parents to attend parenting programmes for those who have experienced separation was identified as crucial, as one interviewee stated "everyone should be made to go…it is so important for parents and their children".

Encouraging fathers to participate more in parenting supports: This was a consistent theme across all interviews. Service providers voiced their concern about *"how do we get fathers to participate more in parenting programmes?"* Service providers talked about the need to target fathers in a parenting support strategy by focusing at the very early stage (*"focus on ante-natal classes"*) or devise fathers-only groups and focus on delivering "even one off talks specifically for fathers".

The impact of the Covid-19 pandemic raised concerns amongst service providers similar to those raised parents. Social isolation and loss of connection in community were identified as some of the negative effects of the Covid-19 restrictions, particularly within the context of families' and individuals' diminished capacity to interact directly with family, friends and neighbours. Services feel that social isolation has been exacerbated by the fact that many supports and services have been delivered online in some communities which, already has considerable gaps in IT coverage and skills. The absence of group-based community activities, were also highlighted as increasing social isolation and hampering community connection between parents.

Concern was also expressed by service providers that the public health measures had resulted in significant economic impacts on parenting and families. From an economic

viewpoint, many households had experienced loss of employment. Similarly, service-providers noted that families were increasingly unable to meet the costs of basic necessities, including food, heating, rent/mortgage and other common bills. In the context of learning and development, service providers noted that poorer families were being placed at further disadvantage in educational settings, largely because of an inability to meet costs associated with digital learning. All these pressures within household has seen an increase in parents and children's anxiety and stress levels *"which will impact on an increased need for parenting supports over the next few years"*.

A significant rise in negative mental health impacts amongst parents were noted by service providers. Loneliness and isolation were highlighted in particular as major contributing factors in this increase is negative mental health and wellbeing, while service-providers also highlighted parent's expressions of depression and need for counselling/therapeutic support. Similarly, the stress and anxiety associated with the financial implications of the Covid-19 pandemic were identified as were substantial increases in mental health concerns were compounded by perceived reductions and/or delays in mental health services in the community. Service providers suggesting that supports like CAMHs *"is overwhelmed by referrals"*.

Growing levels of child welfare and domestic violence concerns were noted as high level needs. While it may be considered erroneous to assume that parents who have experienced domestic violence show greater deficiencies in parenting than their non-abused counterparts, at the very least living with an abusive partner takes its toll on a parent's psychological wellbeing. Living with domestic violence is commensurate to living in a constant state of anxiety and fear. Continued abuse can affect a parent's relationship with their children and can negatively impact on their ability to parent them. Service providers felt a significant parenting support programme is required to address both the pre-Covid rate of domestic violence and the added complexities that covid-19 has imposed. These concerns were coupled with additional concerns about child-parent violence – *"there has been an increase over Covid and this is very worrying"*. Over 70% of services talked about the impacts of the covid-19 pandemic on family life and child welfare needs. Some participants expressed concerns that with covid-19 that *"there were fewer eyes on the child, and the effects of DV, mental health and addition issues will surge after all this…"* and

"more parenting supports will be need to address these issues as well as pre-existing ones, maybe the strategy needs to think about this".

Interviewees also made reference to increased behavioural difficulties amongst children and young people, excessive use of IT and gaming facilities and deterioration of communication in households.

Figure 18 below summarises the perceived gaps identified by service providers during the consultation process.

Figure 18: Service providers Perspectives: Perceived Gaps
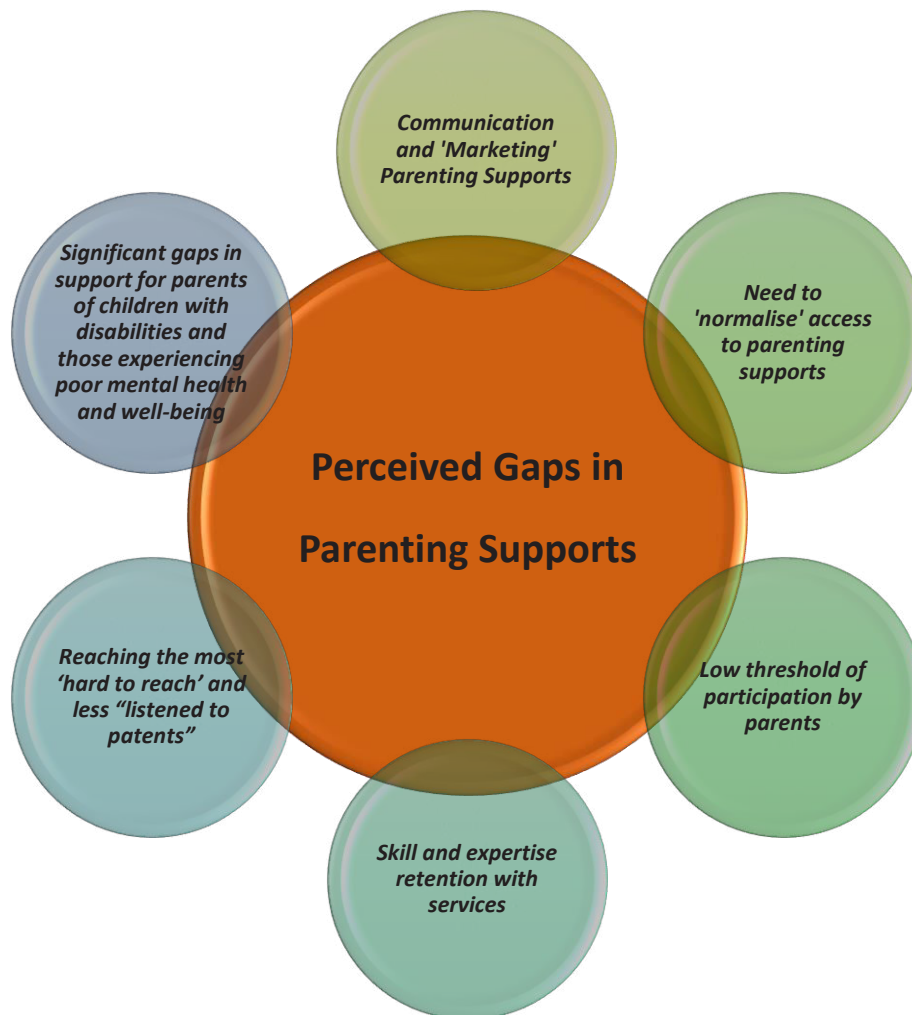
The concluding chapter indicates the implications of the study findings and presents recommendations regarding or the future strategic focus based on the consultation outcomes.

Chapter 6: Summary and Future Strategic Directions

The purpose of this section of the report is to draw together a number of conclusions from the survey findings presented in Sections 4 and 5 above as they relate to the support needs of parents.

While the essence of this study involved identifying existing, new and emerging parenting support needs, the study also sought out participants' views on the protective factors available to them. This was an important element of both the interviews and focus groups with those in parenting roles. Placing this study in the context that positive parent, family or community assets exist and that could be drawn upon to address or overcome the needs that are identified in previous sections of this document. Not all of those in parenting roles who took part in the study have had totally negative experiences of the parent support and family services in Sligo and Leitrim. Programmes such as Triple P, Parents Plus, Lifestart and the activities of the network of Family Resource Centres consistently came in for positive mention. Based on parental experiences it is important to highlight that some of the protective factors that exist include:

- Available, accessible and responsive parenting support services provided by statutory, community and voluntary agencies. The mapping of supports and services supports this view with a wide ranging, innovative, collaborative focused organisations.

- Parent, family and community resilience. Parents and guardian own acquired skills, learning and ability to seek supports and knowledge for themselves.

- Family and social support networks exist within the area no more so than the social and parental supports gained by participants who stated that they were part of 'groups' be it parent and toddler groups, breastfeeding groups etc.

- Faith-based supports were identified as important particularly for new Irish communities, offering them the opportunity to connect with their community and share supports including a range of parenting supports and information.

The data from this consultation, which reflected the views, of parents, services providers and young people, affirmed many of the international and national findings in the literature review. The inclusion of the direct experiences parents in the consultation process brings a unique perspective to the strategic planning process undertaken by the Sligo Leitrim CYPSC Learning and Development Working group on foot of this consultation. The parenting support needs and concerns of parents were clearly articulated and demonstrated the challenges for parents in obtaining support services "when they needed them".
The data from service providers added further insights into the parenting support needs across Sligo and Leitrim and the challenges of providing interventions currently and into the future. The following section synopsises the common themes across all stakeholders in the consultation process.

Communication and Marketing of Parent Support Initiatives: Diversity is a characteristic feature of provision in that parenting support in Sligo Leitrim is the subject of a wide variety of projects and initiatives which have given rise to a large range of services and actions. This means that no single model of service provision prevails.

There is a myriad of organisations providing parenting supports, either with the specific focus of delivering parents support or are part of a menu of support options. However, the consultation data especially from parent's points of view suggests that "there seems to be several different organisations. Not sure exactly which group offers what support."

There are clear issues of access to information about parenting supports that exist: "there are a lot of supports out there but not many parents know this. I feel there is not enough advertising". However, the efforts made by service providers to 'advertise' programmes have been energetic and certainly have reached parents. There is a perception among parents of a scattergun effect - "Are they for the families in trouble or run of the mil families who aren't having issues just trying to survive each day". Therefore, the future strategic for Sligo and Leitrim must return to who are the programmes aimed at and are they universal or focused in their 'advertising'.

How best to reach parents must be a central focus for the parenting support strategy and while the consultation outcomes recognised that on-line parenting supports are of value and work well (especially during the Covi-19 pandemic) there still remains a need for face to face supports. The uniqueness of the challenges of what some parents experience has been well documented in this study especially for those experiencing mental health and those supporting their children and young people living with disability challenges. There exists a specific informational requirement that clearly map a pathway to support that is relevant and applicable to their lives.

"For me, I have one child with dyslexia and the other with adhd [sic] and I would love information on support in those areas"

"Very little for children with disabilities,
I've tried to find support or help and can't find anything in Sligo [sic]".

The co-ordination of parenting supports was a consistent theme arising from service providers who seek to ensure no overlap, duplication or confusion for the end user occurs. Service providers pointed to two recommendations for inclusion in the strategy.
Firstly, the need to develop a space that explicitly states the parenting support that are available to parents and secondly seek to co-ordinate the planning of delivery of such supports to ensure the most reach of resources possible and target supports where most needed.

The placing of parenting supports and at what stage of parenting were key themes arising from the consultation across all groups. The need to 'normalise' parenting supports early and with 'new parents' was a key recommendation from all stakeholders coupled with parenting supports should be provided at significant stages and transitions in a child life.

"Marketing and awareness gap...these courses are not widely known to parents. This info[sic] needs to be given at anti-natal classes in hospital when parents to be have time to research these things and by GP at 6- week check-up or by PHN..."

A key recommendation linked to this was parents need to "know what is coming down the line [at the next stage]".

"You do one course but it doesn't tell you what to expect at the next stage…I keep saying as I hit each stage if only I knew!"

The pressure on parents to be 'perfect' and the 'stigma' of seeking parenting supports was raised by parents during the consultation phase. This perception that parenting supports are only for 'failing parents' as opposed to bolstering parents' confidence ("should be normal to have help") was very evident. Again how programmes and supports are communicated and marketed and when have a role to play in addressing this perceived stigma.

Mental Health Supports for Parents and for children/young people experiencing mental health and well-being issues. There are a number of notable points from the data centred on this theme. The mental health impacts of Covid-19 restrictions, as reported by participants in the study, appear wide reaching and considerable deteriorations of pre-existing conditions were noted by participants in the study. Study participants highlighted either inadequate or reduced mental health supports as impacting on their mental and wellbeing and on their ability to parent. These issues appear to be compounded by service-delays, preventing people's access to existing services and a greater reliance on services being provided online, thereby reducing parents' and families' direct face-to-face engagement with service-providers.

In addition, the following summarises the issues arising from Covid 19 or compounding issues already existing related to mental health and well-being and parent's ability to parent their children:

- Increased levels of loneliness/social isolation (pre-Covid a common feature among new communities, returnees to local communities and those parenting alone).

- Observable anxiety/stress/worry.

- Expressions of depression.

- Increased parental addictions and/or misuse of alcohol substances (reinforced by service provider data).

- Expressed need for counselling or therapy.

- Increased behavioural difficulties among children, young people and other family members.

In addition, the impact of economic insecurity on parenting due to increased loss of employment, greater number of families struggling to meet basic costs of food, heating, clothing, education costs, rent/mortgage and increased stress and anxiety were apparent across all data sources, accolated by the Covi-19 pandemic. The prevalence of these themes across all stakeholders in the consultation process points to a need for a parenting support strategy to be conscious these issues and themes.

The most striking observation to emerge from respondents' feedback related to the limited availability of locally-based parenting/peer support groups (both pre and post Covid) to enable connection with each other. Even when parents have experienced the positive impact of participation in peer support group return to work, lack of access to childcare, transport barriers etc. intervenes with continued participation in the groups. Service providers and parents identified peer supports as "ideal" parenting support as they can provide information exchange, advice and guidance and opportunities and conduit for the introduction to 'expert' advice.

Impact of family status on parent's ability to parent was apparent from the data gathered and points to a need to focus specific resources and encouraging and supporting the development of parenting skills and resilience, including:

- Families with several child dependents due to stress, juggling, and "dealing with one at the expense of another".

- Families in which dependents other than children are living (e.g. an older parent). The latter was a significant discussion point during focus groups.

- Single-parent households with children and their experience of greater demands

on their parenting skills and knowledge.

- Trauma arising from separation, DV and parent child violence (the latter reinforced by service providers' reflections).
- Families in which one or more family members has a disability (including physical, intellectual, emotional, sensory, psychological) or chronic illness.

The need to improve the capacity of local community level resources to deliver parenting supports as part of the 'whole' service was a recurrent theme. These resources of support include schools and local medical/social teams based in communities throughout the region. The linkage between schools and parents in particular appears remote. Beyond meeting the educational needs of children and as data from parents alludes to that itself can be problematic where a child is experiencing challenges, schools presented a 'hands' off approach to parenting. Childcare facilities and the availability of flexible arrangements to facilitate work, and respite for parents was apparent gap in supports:

*"Access to affordable community based childcare,
encouraging parents to access supports"*

Arising from the consultation process the inclusion of specific groups for particular focus in the parenting support strategy was recommended by all stakeholders, including:

- Fathers: "I think supporting Dads to feel that they have the power to ask to be more involved in children's upbringing and enabling them to have confidence to do this..."
- Traveller, Roma and New Irish Communities: Specific barriers exist that prevents parents from accessing and participating in parenting supports including basic unmet needs, cultural challenges and discrimination. Specific actions to encourage participant in parenting support in the development of the strategy may include reviewing the role of peer support and enhanced services capacity to delivery culturally sensitive supports.

The emerging parenting support strategy should seek to include the themes outlined above, in so far as it is possible within the programmatic guidelines of all organisations. While certain outcome areas require prioritising, it is neither possible nor appropriate to pigeon-hole parenting support needs into only one or two categories. Though standalone themes in their own right that have clearly emerged from the findings of the consultation process so to have inter-related themes therefore success in addressing one issue may result in benefits in addressing others.

There are a number of important points to highlight in the context of the development of a parenting support strategy for Sligo and Leitrim strategy outlined below namely:

- A parenting support strategy for Sligo Leitrim has the potential to address only some of the cross cutting needs outlined in the pages above. Put simply, the parenting support organisations involved in this study do not have the resources or organisational capacity to meet the breadth of needs outlined through the consultation process especially in respect to broader policy issues such as housing and accommodation, poverty etc. these remain the remit of state bodies.

- Additional resources are required by organisations, to implement whatever

strategy that may develop.

- Mindful of the breadth of parenting support issues identified, a core feature of the work of the organisations involved in the strategy must involve supporting, developing and co-ordinating parenting and family supports across all levels of need.

- Given organisations strategic involvement in CYPSC, there exists both an opportunity and an imperative to develop a wider collaborative strategy for the area, inclusive of a greater array of local services. A number of key decision-makers consulted during this study emphasised the need for a multiagency strategy, as key to maximising resource availability and resource impact in the area.

- Promotion of parenting supports among groups can result in feelings of alienation by members of ethnic minorities when engaging with a parenting programme devised within the majority culture. Therefore, the involvement of these communities in the design and implementation of specific actions related to parents within these communities require members of the communities' direct and equal involvement.

- Enhance parenting supports and wellbeing by providing capacity building through signposting, information and public information (and education) programmes.

A final observation arising from the consultation process that services should continue to ensure that the voices of children, young people and their parents are captured and meaningfully inform actions that have a real impact on children, young people and their families and ensuring as much access as possible. However, one apparent less developed aspect of the initiatives and collective working in Sligo and Leitrim is the limited evaluation and review informed, and documented initiatives. Any strategic focus arising from the consultation undertaken must include substantive evaluation and review mechanisms to ensure that actions the needs of parents in Sligo-Leitrim.

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