



AlcoholAction
Ireland

AAI's response to HIQA PUBLIC CONSULTATION

**Draft National
Standards
for Children's
Social Services**



**Health
Information
and Quality
Authority**
An tÚdarás Um Fhaisnéis
agus Cailíocht Sláinte

21 APRIL 2021

Alcohol Action Ireland was established in 2003 and is the national independent advocate for reducing alcohol harm. We campaign for the burden of alcohol harm to be lifted from the individual, community and State, and have a strong track record in campaigning, advocacy, research and information provision. Our work involves providing information on alcohol-related issues, creating awareness of alcohol-related harm and offering policy solutions with the potential to reduce that harm, with a particular emphasis on the implementation of the Public Health (Alcohol) Act 2018. Our overarching goal is to achieve a reduction in consumption of alcohol and the consequent health and social harms which alcohol causes in society. We are pleased to have the opportunity to contribute to HIQA's consultation on national standards for children's services.

2.0 FEEDBACK ON THE DRAFT STANDARDS

2.1 Please provide feedback on the four principles and how they will apply in practice ¹

- Do you think all important areas have been covered in each standard statement or are there any areas that should be included or excluded?

All children's social and health services and supports should be based on need, evidence, and the development of a continuum of services, from universal to targeted. Alcohol Action Ireland (AAI) very much welcomes the National Standards and the approach taken to ensuring services are underpinned by the rights of the child. Given the wealth of research and knowledge regarding how adversity experienced in childhood can last into adulthood affecting health – mental and physical, all services that work with children must understand the widespread impact of trauma and integrate knowledge about trauma and adverse childhood experiences into policies, procedures, supports and practices. AAI therefore recommends that the concept of trauma-informed services form part of the standards. In order that services are evidence-based, AAI believes that under Accountability, evaluation and on-going training should be a key feature for all persons coming into contact with children.

- Are the features listed sufficient to assist staff working in children's social services to meet the Draft National Standards?

The features listed are comprehensive and rights based. Children's services must be encouraged and enabled to provide safe and nurturing environments not only for children but for staff also. In the context of dealing with children who are by the very nature of their involvement with the services, experiencing any form of adversity, staff must receive training in trauma-specific treatment approaches and any supports being provided. Services must also actively work to prevent secondary traumatic stress in staff as part of ensuring a safe environment for all.

2.2 Please provide your feedback on the standard statements and features set out under Principle 1: A Human Rights-based Approach

AAI believes recognising trauma is a key component of a human rights-based approach.

Trauma-informed care acknowledges the need to understand a young person's life experiences and what has brought them into the service in the first place.

The concept of trauma must be specifically named under this principle or principle 2. What has happened in their early lives is critical to understand in order to properly help the child or young person achieve their potential and overcome the Adverse Childhood Experiences which they have suffered.

2.3 Please provide your feedback on the standard statements and features set out under Principle 2: Safety and Wellbeing

AAI welcomes the inclusion of prevention and early intervention, but it is recommended that it sits under Principle 1. This would reflect the fact that a child's right to health, education, family life, play and recreation, an adequate standard of living and to be protected from abuse and harm, should underpin all aspects of their care and subsequent services/ supports, not just those associated with risk.

2.4 Please provide your comments on the standard statements and features set out under Principle 3: Responsiveness

Service providers need to gather holistic data on the adversities that children face, and services need to be aware of other services and the access routes to them. There must be a multi-agency approach to services and supports.

Services working with young people must be responsive to their individual needs and services working with children and families must be incentivized to become trauma-informed. There is emerging evidence that investments in trauma-focused services and systems can be recouped through reduced healthcare costs in as little as one year.

Children who have parents who are receiving alcohol treatment must be acknowledged in their own right and appropriate services provided to the child. Many children whose parents are not in treatment but who are harmful drinkers are not on any service radar. These children have rights and must be targeted through the implantation of the Operation Encompass Programme in schools. This programme would involve collaboration between An Garda Siochana and educational services.

2.5 Please provide your comments on the standard statements and features set out under Principle 4: Accountability

Alcohol harm affects many aspects of life in Ireland and so has implications for multiple services and supports. As noted in the April 2021 Alcohol Overview Report from the Health Research Board, at least 200,000 children in Ireland are currently living in homes where there is parental problem alcohol use. This Adverse Childhood Experience (ACE) is known to be highly traumatic in itself and. It is also recognised as a gateway to multiple other ACEs such as domestic violence, sexual abuse, loss of a parent etc.

There is a need for timely and better data collection on alcohol harm across many state agencies and bodies so that services that work with children can be better informed about their needs. Ireland needs a policy agenda that fully acknowledges—and responds to—the impact of toxic stress and trauma on the child’s health and well-being. Services must be accountable to children and families as well as their funders. Hearing children’s voices in relation to the adversities in their lives is a vital tool in ensuring that their needs are being met. Services should build Lundy’s voice of the child model into what they do and produce regular reports reflecting this.

In the UK a recent report from the Dept for Work and Pensions, *‘Examination of the links between parental conflict and substance misuse and the impacts on children’s outcomes’* noted the characteristics of services which can help improve outcomes relating to substance use, parental conflict, parenting practices and child development simultaneously.

2.6 Are there any other comments or suggestions on the draft standards that you would like to make?

An extremely robust and consistent body of evidence strongly links childhood adversity to negative outcomes across the lifespan including, mental health problems, addiction, low educational achievement, relationship problems, self-harm and suicide, physical ill-health and early death. This is why it is imperative that services address the role of traumatic life events in their service delivery design.

3.0 GENERAL FEEDBACK

3.1 a) Is the language used in the draft standards clear, easy to follow and easy to understand?

- Yes

3.1 b) Is the content and structure of the draft standards clear, easy to follow and easy to understand?

- Yes

3.2 Please provide any additional comments on language, content and structure of the draft standards

The content and structure of each principle is clear and the language and structure is easy to follow. AAI welcomes the common language describing what high-quality, safe children's social services should look like. This language, though, should include reference to the need for trauma informed and trained services and supports i.e. the service provider must be trauma informed and trained.

3.3 Having read the draft standards, do you have a better understanding of how services can provide care and support to children using children's social services?

- Yes

Any additional comments:

The Operation Encompass programme should be compulsory in all schools. It is every child's right to have their health and wellbeing protected. By implementing the Operation Encompass programme in schools we will help children feel cared for and help education parents at the same time. This will place children experiencing domestic abuse which is an Adverse Childhood Experience on the radar of a professional. Such immediate response to the child will help to mitigate and lessen the harm caused by domestic abuse. Should referral to social services become necessary the professional is well placed to initiate that referral. More children will benefit from this intervention and it will improve outcomes. This will lessen the workload on social services.