Family Support Strategy 2017-2020
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The strategy was informed by a number of practitioners from a range of agencies across the region and thanks to all who contributed, for a full list see Appendix A.

A special word of thanks to the families who contributed to the strategy through the sharing of their personal experiences and offering invaluable suggestions and recommendations.

We would like to thank Ms Sinead Doody of Doody Consultation for facilitating the regional consultation sessions.

Dr. Carmel Devaney, (UNESCO Child & Family Research Centre, NUI, Galway) for her advice, expertise and feedback on the strategy content.

Ms Fiona Walsh (Interim Task Force Coordinator) for her ongoing support and guidance throughout the development of this strategy.

Finally, we would like to acknowledge the members of the Western Region Drug and Alcohol Task Force for their ongoing commitment to this strategy.

A special word of thanks to the families who contributed to the strategy through the sharing of their personal experiences and offering invaluable suggestions and recommendations.
The WRDAT TF welcomes this family support strategy. Substance misuse impacts on the whole family and it is time that policy and practice recognise and reflect that need. Services need to provide support for all family members, whether they are users, carers, parents, siblings or children affected by substance misuse. This strategy is a road map for interagency working in prevention, education, treatment and recovery. If we work together we can ensure that families affected by substance misuse are supported effectively.

I would like to thank Debbie McDonagh (Family Support Training & Development Worker) and OrlaWalsh (Project Development Worker) for developing this strategy and Dr Carmel Devaney for her valuable input and support. Finally, I would also like to thank all those who contributed to this strategy and look forward to enhancing support for families in the Western Region.

Fiona Walsh
WRDAT interim co-ordinator
BACKGROUND

The Western Region Drug and Alcohol Task Force (WRDATF) is a co-ordinating body, providing a multi-agency and regionally appropriate response to substance misuse in the western region (Galway, Mayo and Roscommon). Its overall aim is to significantly reduce the harm caused to individuals and society by the misuse of drugs and drugs through a concerted focus on supply reduction, prevention, treatment, rehabilitation and research. Key objectives include the development of an integrated and well managed response to drug and alcohol problems, propose a range of solutions and service interventions based on the five pillars of the National Drugs Strategy 2009 – 2016 (interim) and ensure that all responses are monitored and evaluated according to best practice and value for money principles.

The WRDATF recognises both the specific needs of families affected by substance use and the fact that family members often require support in their own right. With this in mind the Task Force carried out a regional needs assessment of families in the West and began the development of a four-year strategy (2017-2020), which is informed by a review of the literature, both national and international research and an extensive consultation process. This strategy strives to be a cohesive, integrated and dedicated plan for families lead by the WRDATF and its partners.

This strategy was developed by Ms Debbie McDonagh and Ms Orla Walshe in conjunction with the WRDATF Family Support Working Group. This strategy will become an integral part of the new regional substance use strategy being developed in 2016.
Family Support has been in existence for as long as families have existed. But it is important to clarify what we mean by Family Support when discussing this issue at the WRDATF. Family Support is an approach to working with children, young people, parents and families which is based on a style of work which emphasises prevention, early intervention and a focus on the strengths of family members. It aims to reinforce positive informal social networks and build on individual resilience. The essence of Family Support is captured in its delivery. Family Support can be provided by a range of practitioners working with families with varying levels of need in an effort to respond to their need in a timely and considered manner (Pinkerton et al., 2004; Devaney, 2011; Devaney and Dolan, 2015).

There is considerable literature which highlights the impacts of drug and alcohol misuse on families. In addition to causing distress and threatening the wellbeing of family members, the destabilising effects of living with a substance misuser on a family unit may weaken coping mechanisms including gaining support from others. (Copello et al., 2006; Orford et al., 2010a; 2010b; Schafer, 2011)

The WRDATF acknowledges and advocates that family members are clients in their own right deserving of support, information and other ancillary supports as applicable. Family members include parents, children, siblings, grandparents, extended family, friends and broader social networks.

In 2013 the WRDATF appointed a Regional Development Worker for Family Support, this was a direct response to the identified gap in service provision of addressing the complex issue of substance misuse and its impact on the family.

The role of the Family Support Training and Development Worker (FSW) is to: raise awareness around the needs of and supports available to family members adversely affected by substance misuse; support peer-led family support groups, frontline Family Support workers and other individuals/agencies working directly with families within the western region; support members of the Regional Drug & Alcohol Family Support Network; to participate in a number of regional fora including the WRDATF and its sub-groups; provide training to frontline workers, Family Support programmes/agencies, etc… in relation to the area of addictions and the support needs of family members as per the Regional and National Drug Strategies.
Family Support Needs Analysis

In 2014, the Family Support Training and Development Worker conducted a needs analysis in order to establish the needs of family members affected by drug and alcohol issues and to develop regionally appropriate responses. The aim of the needs analysis was to gain a greater understanding of the ways families affected by substance use seek support. The research sought opinions and recommendations from a service perspective on the availability and effectiveness of supports to families. It was anticipated that the findings and recommendations would form the basis of a drug and alcohol family support strategy for the western region.

An anonymous online survey questionnaire was used to gather research data for the WRDATF Family Support Needs Analysis. Participants were asked a range of questions based on previous and current service provision which captures the recommendations of both the National Drug Strategy (2009 – 2016) and the WRDTF Regional Strategic Plan (2011 – 2014). Specifically, participants were asked questions relating to their perceived need for drug and alcohol family support services, existing provision of such services, referral options, training, information, support needs and recommendations.

The Needs Analysis survey was completed by 158 practitioners (representing 99 organisations) working in service agencies that provide a range of supports to individuals, families and communities in the western region. The key findings and recommendations are listed below.

A full copy of the report is available at http://www.wrdtf.ie/family-support-resources-and-research.php
• Families, young people, and those with mental health/counselling needs were identified as those most in need of support services.

• 86% of survey participants admitted to having little or no engagement with families other than the provision of information/advice and referral.

• Feelings of shame and/or fear of stigmatisation, denial over a relative’s addiction, fear and confidentiality issues were identified as barriers to people seeking outside support.

• Gaps in service provision for families affected by substance misuse were identified.

• Inadequate resources and access for service provision for families affected by substance use.

• Respondents highlighted limitations in service provision for families within addiction treatment services.

• Many organisations do not provide services to family members and substance users with multiple needs.

• Poor co-ordination among support agencies results in inadequate responses to problems and issues which are likely to be embedded in substance misuse.

• Need to create greater awareness of drug and alcohol-related issues and the needs of families in communities.

• Better inter-agency partnership between all relevant stakeholders is required.

Key Recommendations

• Improve co-ordination with all relevant services and utilise inter-agency partnership structures.

• Advocate for expansion of drug and alcohol service provision.

• Publicise family support drug and alcohol services better and increase public awareness and knowledge of substance misuse.

• Establish best practice in drug and alcohol family support and provide regular and appropriate training courses.

• Include service users and family members in development of drug and alcohol family support services.

• Ensure an inclusive approach which includes ethnic and cultural minorities within this development process.
Research Conducted with Families

The Family Support Development Worker conducted a small-scale study with family members who sought support concerning substance misuse within their homes. The overall aim of this study was to gain an insight into the experiences of families who accessed support in the western region and to obtain suggestions and recommendations to enhance and develop supports for families. Eleven family members from across the region participated in this qualitative based research. In depth interviews were held and the data was then thematically analysed. The findings and recommendations from this study as outlined below are incorporated into this strategy.

Key Findings:

• Interviewees recounted an extensive array of emotional, physical and psychological impacts of substance misuse.
• Reducing the stigma and the feeling of family disgrace around substance misuse is paramount to family and societal recovery.
• Significant barriers to support seeking were highlighted such as, poor pathways to referral, lack of coordination and poor communication between services.
• Family members accessed services in an ad-hoc fashion, and it presented as a significant challenge and barrier to support-seeking behaviours.
• Informal and semi-formal supports were seen as largely unhelpful, while formal supports received positive endorsements from family members.
• Positive outcomes as a result of formal support included increased awareness, improved self-esteem, new coping mechanisms and access to informal peer support networks.
• Upon receipt of adequate and appropriate supports, interviewees expressed a desire to reciprocate this.

Recommendations:

• The provision of substance use education programmes including information on support services be made available to students, schools, educators, general public and professionals that work with families
• Greater visibility and increased accessibility for service users is required through promotion and publicity of drug and alcohol services that provide Family Support
• Implementation of the National Drug Rehabilitation Framework could increase co-ordination between services and develop integrated ways of working to enhance drug and alcohol Family Support services.
• A change is needed within our society to remove the taboo of substance misuse. This will require a multi-faceted response from service providers, media, policy makers and communities in order to increase public awareness and reduce the barriers to support for families affected by substance misuse.
• To highlight the harms of substance misuse on the user and the family through a national campaign using television, radio, print media and social media to disseminate information, education, advice and support options are emphasised.
• Lobby local and national government for better commitment and investment in drug and alcohol treatment services in the region.
• This research study highlights the need for further research in the area of drug and alcohol family support. Suggestions include: impacts on siblings of substance misusers; further examination of the relationship impacts between family members; engagement of men in formal support; ADHD and substance misuse; stigma and perceived stigma, and multigenerational substance misuse and early intervention.
Strategy Development

The overall aim of the WRDATF Family Support Strategy is to develop a regional strategic plan to improve and enhance supports for individuals/families living with the drug/alcohol use of a family member, in the western region through collaboration with all relevant stakeholders. Following on from the Regional Needs Analysis Report the Western Region Drug and Alcohol Task Force began the development of a Regional Drug and Alcohol Family Support Strategy to ensure that family support work in the region takes place in a structured and cohesive in variety of settings. The regional needs analysis, review of national and international data and multiple consultations have informed the content and development of this strategy.

The WRDATF recognises that there are limitations to this strategy due to constraints in terms of service provision, budget availability, resources and capacity. It endeavours nonetheless to promote the development of support services for families through existing resources and interagency collaboration.

The Development of the WRDATF Family Support Strategy

* The consultation process was a four-pronged approach. Written submissions were sought from WRDATF staff and associated projects. Three focus groups were held in Galway, Mayo and Roscommon with targeted service providers in the region. Written submissions were also made available to the general public and other relevant parties via the WRDATF website and circulation methods. A comprehensive consultation process was carried out with individual family members within the region.
Strategic Aims

Awareness & Information

- To create a greater awareness of the needs of families affected by substance use, to increase visibility and accessibility of supports available (recognition of families as service users), encouraging families to seek support
- To make information readily available and easily accessible for the public, families and appropriate services

Capacity Building

- To enhance the existing skill set of professionals and practitioners working with families through the provision of training
- To provide appropriate courses, programmes and supports for families, especially family members experiencing substance misuse

Research & Evaluation

- To carry out relevant research on Drug/Alcohol Family Support and to ensure the strategy is monitored and evaluated on a yearly basis with appropriate updates/actions as required

Service Provision & Interagency Working

- To improve and increase accessibility for service provision to families and promote greater interagency co-operation

The following section outlines the goals and actions under each of the above mentioned strategic aims. There are 24 goals in total. Supporting documentation will look at the potential outcomes and measurement tools for each of the identified actions.

Strategic Goals and Actions

Awareness & Information

Aim 1: create a greater awareness of the needs of families affected by substance use, to increase visibility and accessibility of supports available (recognition of families as service users), encouraging families to seek support

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| 1   | Increase awareness of the needs of families by targeting families directly affected by substance use, the public, service providers and other community based organisations. | a) Support events pertaining to Family Support in all regional campaigns  
b) Engage local and regional media on specific topics relating to families  
c) Develop online social media platforms  
d) Host a range/series of public seminars  
e) Support and promote national campaigns  
f) Present to relevant networks and other appropriate fora. |
| 2   | Increase awareness of the supports available | a) Promote existing supports (online, signposting, referral, press releases, community ads, posters, other media/information sources)  
b) Make information on support services available and accessible to family members |
### Aim 2: To make information, materials and resources readily available and easily accessible for the public, families and appropriate services

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| 3   | Increase accessibility of support services | a) Highlight gaps in Family Support to relevant bodies  
b) Advocate for increased service options  
c) Promote multi-agency working, networking and increased collaboration within organisations |
| 4   | Recognise family members as potential service users in their own right | a) Highlight the needs of all family members including grandparents, parents, siblings, children, men, women, youth and travellers  
b) Work with services in the region to identify and respond to the needs of all family members |
| 5   | Promote the National Responding to Drug Related Intimidation Reporting Programme | a) Ensure information on the programme and nominated Garda Inspectors for the region is widely available within the region  
b) Link with national groups on any updates/developments on this programme  
c) Provide information sessions/training on the programme |
| 6   | Lobby for and advocate for policy development regarding families experiencing drug/alcohol related issues | a) Contribute to local, regional and national policy development to ensure family member needs and included in all relevant strategies and policy documentation  
b) Make submissions to relevant organisations and seek inclusion of drug/alcohol family support within policy/strategy |
| 7   | Ensure current and up-to-date information is readily available to both families, general public and service providers | a) Review current information available both regionally and nationally  
b) Develop drug related Family Support information that is evidenced based, current and user friendly  
c) Ensure information is readily available to families and service providers  
d) Utilise public spaces to highlight specific issues pertaining to family support e.g. pregnancy and alcohol  
e) Ensure family member input is sought for all material and resource development |
| 8   | Develop online resources                     | a) Develop new regional drug/alcohol family support website  
b) Ensure relevant articles, links and latest research are available  
c) Explore the possibility of creating a family support app |

### Capacity building

### Aim 3: To enhance the existing skill set of professionals and practitioners working with families

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| 9   | Continue to deliver and expand on current training available regarding Support For Families experiencing drug/alcohol issues | Provide training including the following:  
a) Responding to families affected by substance use  
b) Brief Intervention Skills including Motivational Interviewing & SAOR©  
c) Drug Awareness Courses  
d) Responding to drug related intimidation |
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| 10  | Develop and/or commission new Family Support related training.       | a) Commission or develop new training as identified by relevant stakeholders and approved by the Family Support Working Group  
   b) Courses to be considered include bereavement, women & substance use, parental substance use, alcohol & pregnancy, overdose training  
   c) Assist and promote both evidenced based and accredited training offerings as appropriate to regional needs  |
| 11  | Partner with other organisations to develop drug and alcohol elements to training and/or develop customised training as per request | a) Link with organisations to co-develop/deliver Family Support related training  
   b) Develop modules to complement existing programmes, e.g. parent programmes, children and youth focused programmes  
   c) Develop & deliver customised training on an assessed needs basis  |
| 12  | Work with academic institutions in the region to develop drug/ alcohol modules with emphasis on the needs and supports for families, for relevant courses | a) Assess the need for drug/ alcohol module inclusion within the school of Social Sciences  
   b) Identify potential stakeholder in the region to explore possible training/course offerings within the third-level sector  |

**Aim 4:** To provide appropriate courses, programmes and supports for families, especially family members experiencing substance misuse

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| 13  | Provide universal supports for family members (Prevention & Early Intervention) | a) Continue the roll out of the multi-agency parent drug education initiative across the region  
   b) Continue with current WRDATF offerings such as Teenage Years  
   c) Engage with stakeholders currently involved in the provision of prevention and early intervention supports for inclusion of drug/ alcohol information elements.  
   d) Support the implementation of Hidden Harm National Plan  |
| 14  | Provide information and education for family members | Engage family members through education and information support  
   - Drug and Alcohol Awareness  
   - Drug related intimidation  
   - Parenting teenagers and substance use  
   - Living and coping with substance use  
   - The impacts of parental substance misuse on children | **Bereavement**  
   **Overdose**  
   **Self-care**  
   **Conflict resolution**  |
| 15  | Develop and provide specific programmes for families concerned or dealing with substance misuse; | a) Develop appropriate programmes/modules for existing courses  
   b) Develop stand-alone programmes for family members  
   c) Develop and train facilitators as applicable  
   d) Source and deliver evidenced-based programmes as applicable  |
| 16  | Promote support groups for family members dealing with substance use | a) Provide group facilitation skills trainings for family members interested in facilitating groups in the region  
   b) Provide support for new/established support groups  
   c) Provide peer-support good practice guidelines for family support groups  
   d) Promote and develop groups locally  
   e) Work with existing services to establish groups for family members dealing with substance issues  |
| 17  | Promote the well-being of family members coping with a loved one’s drug and alcohol use | a) Promote self care for all family members  
   b) Arrange wellness events  
   c) Explore respite options and related funding requirements  |
### Service Provision and Interagency Working

**Aim 5:** To improve and increase accessibility to services for families and to promote greater interagency co-operation

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| 18  | Engage services to enhance pathways for referral, access and information | a) Support organisations with Policy Development and Assessment Tools  
    b) Support NDRIC implementation as per national roll-out  
    c) Increase networking opportunities for all services and foster greater interagency co-operation and integrated pathways |
| 19  | Engage with and seek input from family members to identify their needs in terms of service provision and future planning | a) Engage family members in regional Family Support developments  
    b) Work with the WRDATF to acquiring a family member rep seat on the Task Force  
    c) Seek feedback and recommendations from family members for inclusion on strategic plans and policies |
| 20  | Develop an Alcohol/Drug Family Support Forum                         | a) Establish a Family Support forum  
    b) Promote service user involvement on the forum  
    c) Promote networking and partnership working |
| 21  | Link with other Networks and National Events                         | a) Seek membership on relevant regional networks relating to Family Support  
    b) Ensure Western region is represented on relevant national Family Support networks and groups |
| 22  | Links with national organisations                                   | a) Link with the National Family Support Network, Tusla and other relevant national bodies regarding the needs of families experiencing drug/alcohol use |

### Research, Monitoring and Evaluation

**Aim 6:** To carry out relevant research on Drug/Alcohol Family Support and annual monitoring and evaluation of strategy on a yearly basis

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| 23  | Seek funding and if successful commission research on one or more of the following options | Possible research topics identified:  
    a) Intergenerational substance use in families  
    b) Impact of drug/alcohol use in college drop-out rates  
    c) Family Support & rural isolation  
    d) Domestic violence & relationship with alcohol  
    e) Children’s needs relating to drugs/alcohol (hidden harm) |
| 24  | Monitor and evaluate the progress and outcomes of the strategy      | a) Develop a system to track and monitor progression of strategy  
    b) Review on an annual basis  
    c) Produce an annual update |
IMPLEMENTATION, MONITORING AND EVALUATION OF THE FAMILY SUPPORT STRATEGY

The strategy will be overseen by the WRDATF Family Support Working Group and will be reviewed on an annual basis. Work carried out by the WRDATF and its Funded Projects as well as other identified stakeholders will be collated at the end of each year and progression/completion of actions will be noted. The Family Support Working group will have the opportunity at the end of each year of the strategy to prioritise specific actions in the strategy in lines with current trends or identified needs. These priorities will be communicated to the funded projects and other stakeholders as appropriate.

The Family Support Working group will meet regularly and discuss any issues arising, review initiatives under the strategy and offer direction regarding the actions. Any projects (funded by the Task Force) wishing to carry out specific actions in the plan must communicate with the Working Group regarding any new developments to avoid duplication and promote regional working.

A brief report will be issued at the end of each year demonstrating the progress of the strategy and identifying the priority actions for the following year.

In summary this strategy sets out the future direction for the Western Region Drug & Alcohol Task Force regarding its work on Family Support within Galway, Mayo and Roscommon. The Task Force has established its 25 Goals for the next four years and will work with the relevant stakeholders to achieve these goals. This strategy will become an integral part of the Task Forces new regional strategy which will be developed in 2016.

Undoubtedly the impact of substance misuse on family members and families as a whole is very significant and there is a clear need to support families.

References


The publication of this Family Support Strategy by the Western Region Drug and Alcohol Task Force is very welcome. Undoubtedly the impact of substance misuse on family members and families as a whole is very significant and there is a clear need to focus on the needs of the individual involved in drug and alcohol misuse and the support needs of both adults and children in the wider family context. While service providers do need to focus on the needs of the individual involved in drug and alcohol misuse a focus on the support needs of both adults and children in the wider family context is also necessary. This Family Support Strategy provides clear direction to the work of the Western Region Drug and Alcohol Task Force in this regard and will promote a strong emphasis on meeting the needs of families in a supportive manner.

Dr Carmel Devaney, UNESCO Child and Family Research Centre, School of Political Science and Sociology, NUI, Galway
# Appendix A: List of Contributors

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<td>Siobhan Duane</td>
<td>Foroige</td>
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<tr>
<td>Teresa Donoghue</td>
<td>Galway Traveller Movement</td>
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<tr>
<td>Triona NiRinne</td>
<td>Galway Healthy Cities</td>
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<tr>
<td>Vernice Murray</td>
<td>Galway City Partnership</td>
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Family Support is an approach to working with children, young people, parents and families which is based on a style of work which emphasises prevention, early intervention and a focus on the strengths of family members. It aims to reinforce positive informal social networks and build on individual resilience.