CYPSC

CHILDREN & YOUNG PEOPLE'S SERVICES COMMITTEES

Wexford Children and Young People's Services Committee

Children and Young People's Plan 2017 - 2019

Contact

The Wexford Children and Young People's Services Committee welcomes comments, views and opinions about our Children and Young People's Plan.

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Copies of this plan are available on: www.cypsc.ie / www.wexfordcypsc.ie

Contents

Foreword

Section 1: Introduction

- Purpose of Children and Young Peoples Services Committees……..5
- Background to Children and Young Peoples Services Committees……..6
- Children and Young Peoples Services Committee in Co. Wexford……8
- Who we are……9
- Achievements to date……11
- How the Children and Young Peoples Plan was developed……12

Section 2: Socio Demographic Profile of County Wexford……14

Section 3: Overview of Services to Children and Families in County Wexford……41

Section 4: Local Needs Analysis County Wexford……46

Section 5: Summary of Children and Young Peoples Plan for County Wexford…….57

Section 6: Action Plan for County Wexford Children and Young Peoples Services…..59
Committee

Section 7: Monitoring and Review……84

Section 8: **Appendices**

Appendix 1: Terms of Reference Wexford CYPSC……..85

Appendix 2: Equality & Human Rights Statement……..89

Appendix 3: Hardiker Model……93

Appendix 4: Composition of Wexford CYPSC Working (Sub) Groups……94

Appendix 5: Glossary of Terms……98

Appendix 6: References……99

Foreword

It is with great pleasure that I introduce the first Wexford Children and Young Peoples Plan. It is the result of much hard work and commitment from CYPSC members and Working Groups who have used their expertise to inform the contents of this plan. The contribution of the children and young people who participated in the consultation process is also gratefully acknowledged. This plan would be meaningless without their input.

All those who have contributed to the plan and have been involved in the CYPSC process are committed to the delivery of the actions contained herein.

The Department of Children and Youth Affairs Cross Departmental Framework "Better Outcomes, Brighter Futures" is the bedrock for this plan. The framework outlines a vision for children and young people in Ireland as being;

"Ireland to be one of the best small countries in the world in which to grow up and raise a family, and where the rights of all children and young people are respected, protected and fulfilled; where their voices are heard and where they are supported to realise their maximum potential now and in the future".

In practice, the Framework means that all agencies funded by Government are charged with working towards this vision. Wexford CYPSC members are committed to achieving best outcomes for children, young people and families in Co. Wexford through the implementation of actions in this initial plan.

As the plan is rolled out, we will face many challenges as we respond to the evolving needs in the community. We are committed to responding to these needs using an evidence-based and inter-agency approach. I look forward to chairing the CYPSC over the duration of this plan and to the consolidation of working relationships among CYPSC members.

Vincent Daly,
Wexford CYPSC Chairperson

Section 1: Introduction

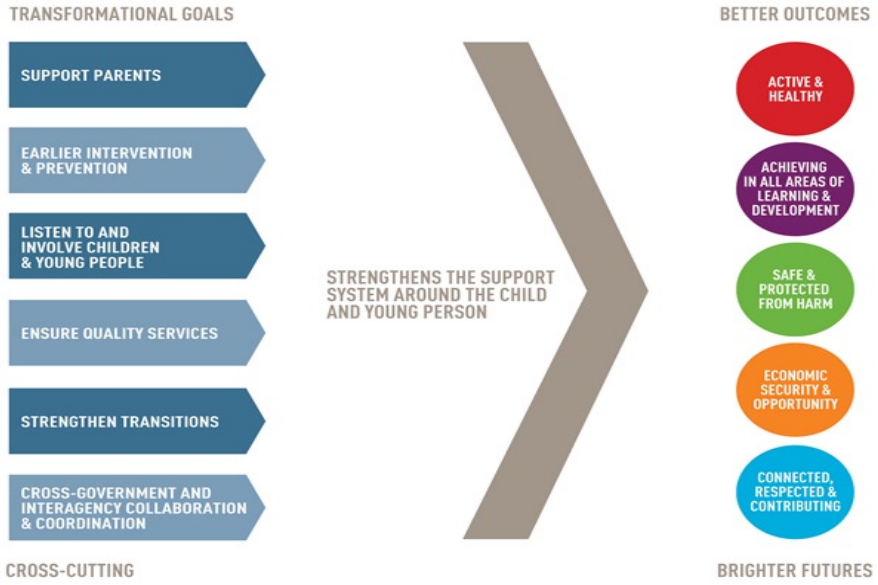
Purpose of Children & Young Peoples Services Committees

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.

CYPSC's work towards achieving the five national outcomes for children and young people in Ireland as outlined in "Better Outcomes Brighter Futures", which is the first overarching national policy framework for children and young people (aged 0-24 years) in Ireland. The purpose of the framework is to coordinate policy across Government to achieve better outcomes. The framework also 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 (see figure 1 below). The five national outcomes are that children and young people;

1. Are active and healthy, with positive physical and mental wellbeing
2. Are achieving full potential in all areas of learning and development
3. Are safe and protected from harm
4. Have economic security and opportunity
5. Are connected, respected and contributing to their world

Figure 1: Better Outcomes Brighter Futures Cross Departmental Policy Framework.



Source : Better Outcomes Brighter Futures, DCYA

Background to Children and Young People's Services Committees in Ireland

The Office of the Minister for Children and Youth Affairs (OMCYA), now the Department of Children and Youth Affairs, 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's have increased incrementally 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's bring together a diverse group of agencies across the statutory, community and voluntary sectors in local county areas, to engage in joint planning of services for children and young people. All major 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 integrated planning and improved service delivery. Each committee is responsible for the development of a local three year Children and Young Peoples Plan.

The development of Children and Young Peoples Services Committees has been shaped and informed by a number of major Government Policies over the last number of years;

⇨ **The National Childrens Strategy (2000)**

The National Childrens Strategy : " Our Children Their Lives" (2000), set the vision for an Ireland "where children are respected as young citizens with a valued contribution to make and a voice of their own; where all children are cherished and supported by family and the wider society; where they enjoy a fulfilling childhood and realise their potential". The strategy sought to establish a "whole child" perspective at the centre of all relevant policy development and service delivery. It set out three national goals that reflect the context of children's lives and the "whole child" perspective;

1. Children will have a voice in matters which affect them and their views will be given due weight in accordance with their age and maturity.
2. Children's lives will be better understood; their lives will benefit from evaluation, research and information on their needs, rights and the effectiveness of services.
3. Children will receive quality supports and services to promote all aspects of their development

⇨ **Towards 2016: Ten Year Framework Social Partnership Agreement (2006-2015)**

"Towards 2016" provided an overarching framework to address key challenges using a lifecycle approach. It focused on the needs of children and young people and the importance of integrated service delivery in order to ensure best outcomes. The document also made a number of commitments regarding Childrens Services Committees, the precursor to CYPSC's.

⇨ The Agenda for Childrens Services: A Policy Handbook (2007)

"The Agenda for Children's Services: A Policy Handbook" (2007), set out the strategic direction and key goals of public policy re: children's health and social services at that time. It applied the principles of the first National Childrens Strategy (2000) to the implementation of policy through service delivery. At the core of The Agenda, was the promotion of good outcomes for children. It advocated a "whole child – whole system" approach to meeting children's needs, with a clear focus on achieving better outcomes for children and families through the promotion of inter-agency work. The Agenda was also responsible for identifying the seven outcomes that have been adapted to become the five National Outcomes that inform the work of CYPSC's today.

⇨ Report of the Commission to Inquire into Child Abuse, Implementation Plan (2009)

The Implementation Plan which was developed following the publication of the Report of the Commission to Inquire into Child Abuse (also know as the Ryan Report), specifically refers to Childrens Services Committees. The Report identifies that interagency, multidisciplinary work is vital to the promotion of good child protection practice and to the provision of good and safe service delivery to service users. It also states that "the purpose of CSC's is to ensure that agencies work together strategically to achieve intended outcomes for children and families and value for money". Furthermore it explains that "they have been set up specifically to enhance interagency communication and are working in partnership to meet the needs of vulnerable children and families" (p.45).

⇨ Report of the Task Force on the Child and Family Support Agency (2012)

This report examined a number of key themes such as leadership, multi-disciplinary engagement, interagency working and change management that would lead to better outcomes for children and young people. It emphasised that universal and targeted services provided by the Child & Family Agency, together with services for children and families provided by other government departments or agencies and those provided by NGO's, must be co-ordinated and joined up on the ground where children and families live. The Task Force identified that "CSC's should be the mechanism for doing this at local level. It is crucial that the committees work to an overall national strategy and plan". (P.V).

⇨ Better Outcomes Brighter Futures (2014)

"Better Outcomes Brighter Futures": The National Policy Framework for Children and Young People, is a whole of government policy that emphasises the importance of everyone working together for the development, to their maximum potential, of children and young people in Ireland. This policy identifies the five national outcomes for children and young people and recognises CYPSC's as the key vehicle for inter-agency work and development of local Children and Young Peoples Plans. Although "Better Outcomes Brighter Futures", is the most recent policy document in relation to CYPSC's, its views were influenced by the previous policy documents.

Children and Young People's Services Committee in County Wexford

Wexford CYPSC had its initial meeting on February 18th 2014. In May 2014, the CYPSC engaged an external facilitator to assist members to develop core operating principles and working methods. These were further embedded by the Working Groups.

An induction day for members of the CYPSC Working Groups took place in September 2014. Following this, five Working (Sub) Groups were established and began to meet and prioritise their actions. The five Working Groups are as follows;

- Education
- Health and Diversity
- Information and Resources
- Prevention, Partnership & Family Support (PPFS)
- Young People and Mental Health

Wexford CYPSC also supported an application to "The Wheel" in December 2014 for training to "Integrate Equality and Human Rights into Organisational Policies, Plans, Procedures and Practices". The application was approved and several members of Wexford CYPSC have taken part in the training which began in March 2015 and concluded in March 2016.

Wexford CYPSC developed an "Equality and Human Rights Statement" in 2015, with a view to developing the capacity of the committee to have regard to equality and human rights in its work. See Appendix 2 for details.

Mapping of services for children, young people and families took place in 2014 and a consultation process was undertaken during Q.3 and Q.4, 2015 to inform the contents of the Wexford Children and Young Peoples Plan.

Who We Are

Membership of Wexford CYPSC (Jan 2017)

Chair : Tusla Child & Family Agency*	Jim Gibson (Jan 2014 – April 2016) Vincent Daly (April 2016 – present)
Deputy Chair : Wexford County Council**	Elizabeth Hore (Jan 2014 – March 2017)
An Garda Siochana	Graham Rowley
Barnardos	Catherine Joyce
Educational Welfare Services	Marian Heeney
Family Resource Centres	Lynda Stacey
FDYS (Ferns Diocesan Youth Service)	Sean Cooke
Health Service Executive	Mary B. Finn Gilbride
Health Service Executive	Liz Kinsella
Irish Primary Principles Network	Pat Gately
Probation & Welfare Service	Michele Weir
Roma Community Project	Ramona Sain
Tusla Child & Family Agency	Greg Mullan
Wexford County Childcare Committee	Lindsay Malone
Wexford Local Development	Clare Ryan
Wexford Rape & Sexual Abuse Support Service	Clare Williams
Waterford and Wexford Education and Training Board	Martin Fitzgerald
Wexford Womens Refuge	Pauline Ennis
Youth New Ross	Louise O'Byrne
CYPSC Co-ordinator	Thelma Blehein (Jan 2014-December 2015) Sheila Barrett (December 2015 – Present)

* Area Manager Child & Family Services, Wexford and Waterford, Tusla Child and Family Agency.

** Senior Executive Officer, Housing and Community Department, Wexford County Council.

CYPSC Working Groups

The CYPSC has five Working Groups as follows;

- Education
- Health & Diversity
- Information & Resources
- Prevention, Partnership and Family Support (PPFS)
- Young People & Mental Health

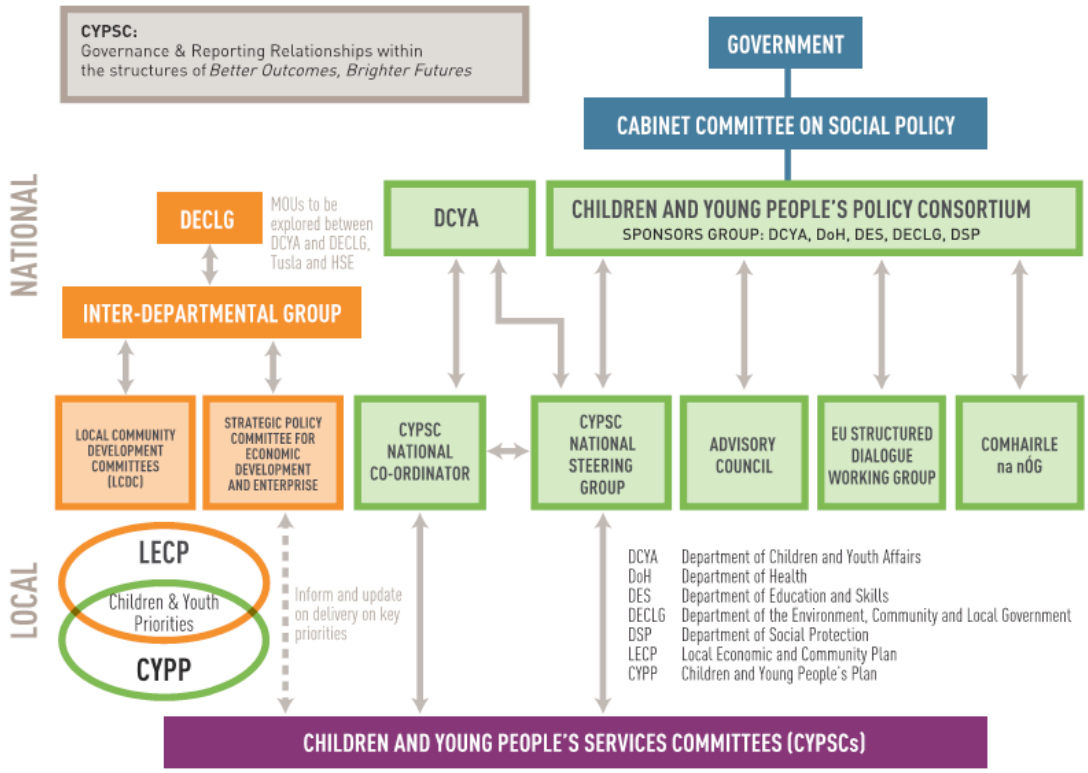
The Working Groups had an essential role in identifying key local needs and designing actions in response to those needs.

⇨ **Synergy with other county-level structures;**

The CYPSC is continuing to enhance its relationship with the Local Community Development Committee. CYPSC was involved in the Local Economic Community Plan (LECP) consultation and the CYPSC actions have been included in the LECP. The Vice-Chairperson of the CYPSC is also a member of the Local Community Development Committee (LCDC).

The CYPSC is also consolidating existing links with the local Comhairle Na nOg. The CYPSC Co-ordinator represents the CYPSC on the Comhairle Steering Group and also attends the Comhairle AGM. Both structures are committed to on-going consultation and participation during the life-time of the CYPP to ensure that the plan remains relevant to the needs of young people in Co. Wexford.

Figure 2: **Governance and Reporting Relationships within the structures of "Better Outcomes Brighter Futures"**



Achievements to Date

- Active participation of agencies on CYPSC Committee and Working Groups.
- Formation of five Working Groups.
- "Principles for Inter Agency Working" and "Principles for Working with Children and Young People" were developed.
- Consultation with children and young people completed.
- Development of Action Plan.
- Formulation of Wexford CYPSC Equality & Human Rights Statement.
- Successful application for Equality & Human Rights Training. Thirteen people completed the training course which ran over the course of one year.
- Wexford Restorative Practice Partnership was established. Two information sessions were held which were attended by 35 people and a conference took place in October 2016 which was attended by 60 people.
- Establishment and official launch of Wexford CYPSC website www.wexfordcypsc.ie.
- Successful applications for Seed Grants from DCYA and Tusla Child & Family Agency.

How the Children and Young People's Plan was developed

From its initial meeting in January 2014, Wexford CYPSC members have been anxious to work in a spirit of collaboration in order to achieve best outcomes for children and young people. A facilitated session was held with CYPSC members in May 2014. As a result, a set of "Principles for Working with Children and Young People" and "Principles for Inter-Agency Working" were developed. These were later incorporated into the Terms of Reference for Wexford CYPSC (Appendix 1). Over the coming months, the committee consolidated and in September 2014, Working (Sub) Groups were established on 5 key themes. The Working Groups were populated by CYPSC members and by individuals with particular expertise who were co-opted onto the Working Groups.

⇨ **Mapping / Needs Analysis;**

Simultaneously, a mapping exercise of services and supports for children, young people and families in Wexford was conducted during Q.3 and Q.4 2014. This helped to identify gaps in services and contributed towards the needs analysis.

⇨ **Consultation;**

While recognising the need for a consultation process with children and young people, the CYPSC members were conscious of the "consultation fatigue" that might have resulted from the large number of other consultations/research that had taken place in Wexford in recent times (Local Economic Community Plan, Rape and Sexual Abuse Support Service etc.). A conscious decision was made to utilise these findings where relevant, to increase our knowledge base for the Children and Young Peoples Plan (CYPP). In particular, the Wexford Socio-Economic Baseline Report (AIRO, 2015), proved to be an invaluable source of information for this plan. In addition, the expertise of CYPSC Committee and Working Group members was acknowledged as a valuable source of information and the learning from the CYPSC and Working Groups also helped to inform the Needs Analysis.

To decipher local needs for the CYPP, members of Wexford CYPSC and its Working Groups conducted a consultation process with children and young people in Q.3 and Q.4 2015. The aim of this process was to identify the main issues affecting young people in their area, to find out what they considered to be the good and bad things and to see what would make life better in the future. Questionnaires were created and administered to the following groups;

⇨ **General Population (0-24 years):** Using the standard questionnaire, consultations were carried out with 625 young people. This included consultations with individuals, mixed sex and single sex groups. Respondents came from all over County Wexford and showed a good rural / urban balance. Respondents came from the following target groups: Early School Leavers, Traveller girls, School Completion Programme participants etc.

⇨ **Seldom Heard Young People (13-24 years)**: The CYPSC was conscious that a general consultation may not capture the needs / issues of seldom heard young people. The Young People & Mental Health Working Group therefore agreed to specifically target this cohort of

young people. They amended the standard questionnaire to ask more specific questions about young peoples worries / concerns and targeted 13-24 year olds. Questionnaires were administered through diverse youth groups that predominantly engage with young people in non-formal settings. Organisations and groups were encouraged to engage with young people and adults who would be considered hard to reach and who may not in general have an opportunity to engage in consultations around their needs. In total, 265 young people from the following target groups participated in the consultation: Travellers, Roma community and Early School Leavers.

⇨ **Comhairle Na nOg:** A consultation took place with Comhairle Na nOg during their AGM. Once again the standard questionnaire was used. 48 valid questionnaires were returned and the findings in terms of the main issues affecting young people were broadly in line with those returned through the general consultation. Key issues emerging were Mental Health, Bullying /Cyber-Bullying and Alcohol abuse.

⇨ **Pre-School Age (ECCE Age)**: The consultation with Pre-School children was conducted by Wexford County Childcare Committee at a later date and was incorporated in the Needs Analysis in June 2016. Each of the 134 Preschools in Co. Wexford were sent a consultation pack. The pack contained information about Wexford CYPSC, information on the purpose of the consultation and three questions to be considered by the children. Early years providers were invited to carry out the consultation in the manner that they felt best suited the children in their services. Due to the age range (3-5 years), providers were invited to use language that they felt was appropriate for the age group. Examples of how early years providers carried out the consultation included: circle time, large group discussion, art activities and projects. WCCC provided a stamped addressed envelope to return the consultation documents to promote involvement in the consultation. Twenty services participated in the consultation, giving a 15% response rate. When broken down geographically, 9 respondents were from urban based preschools and 11 were rural based.

⇨ **Draft Actions**

Throughout the latter half of 2015 and early 2016, CYPSC Working Groups identified their priority areas of work and began to formulate specific actions in relation to these.

⇨ **Facilitation**

A second facilitated session was held with an external facilitator in May 2016, to review the consultation findings, the socio-economic profile and the draft CYPP actions. The "Principles" documents were reviewed and draft actions were refined. At this session, a "CYPP Advisory Group" comprising Chairpersons of the Working Groups was formed and met with the Co-ordinator periodically to support the development of the CYPP.

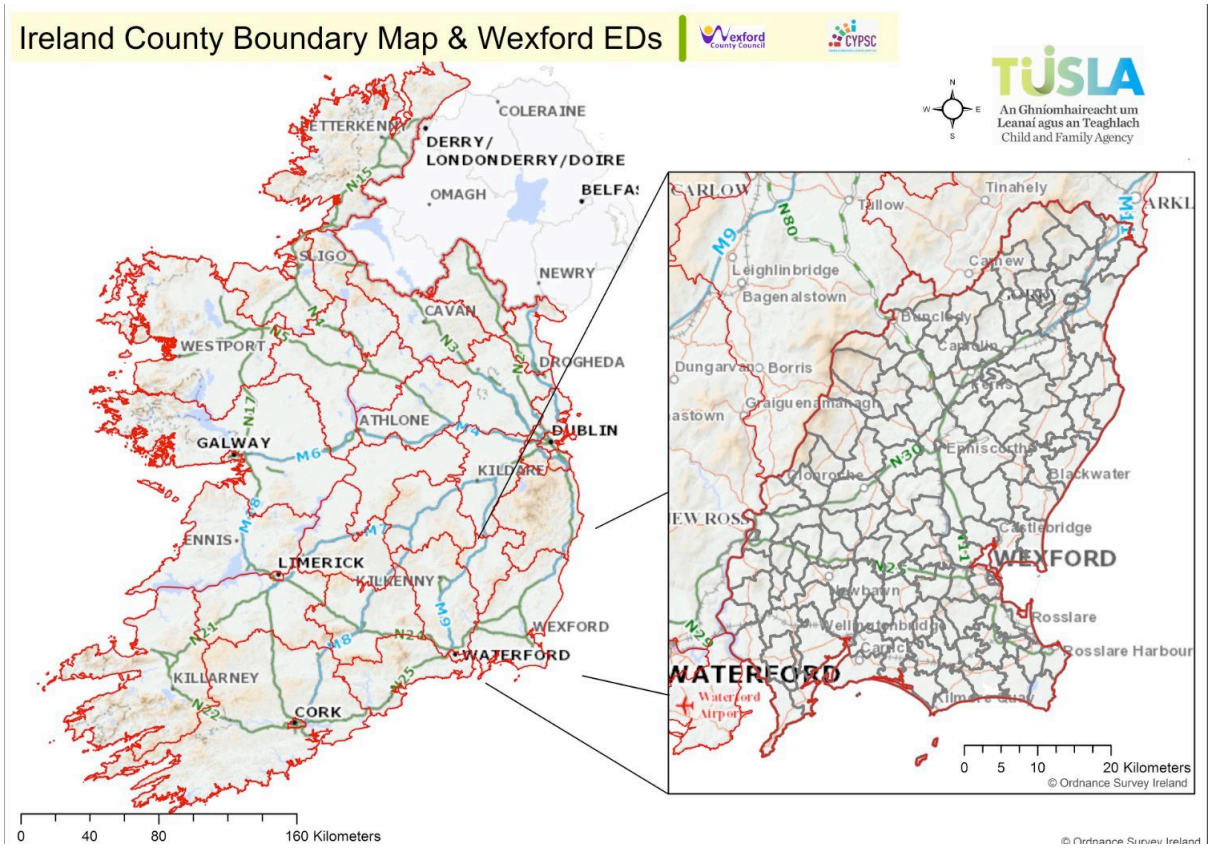
Section 2: Socio-Demographic Profile of County Wexford

Location and Geography

Co. Wexford is located in the South East of Ireland. It is in the province of Leinster and part of the South East region. The population according to the last Census in 2011 is 145,320. Preliminary results from the 2016 Census show an increase of 4,285 persons or an increase in population of 2.9% between 2011 and 2016. With an area covering 236,685 hectares, it is the largest of Leinsters' 12 counties and it has the 4th largest population in the province. In the national context, it is the 13th largest of Irelands 32 counties and the 14th largest in terms of population.

It is bounded on two sides by the sea – on the South by the Atlantic Ocean and on the East by St. Georges Channel and the Irish Sea. Adjoining counties are Waterford, Kilkenny, Carlow and Wicklow. Wexford is home to Rosslare Euro Port. It is also linked to Dublin by the M11/N11 National Primary Route and by the National Rail Network.

There are four main urban centres: Wexford Town, Enniscorthy, New Ross and Gorey. Wexford Town is the County Town and administrative centre for the county. Wexford is a county with many positive attributes. It has a landscape rich in natural beauty and it also possesses a rich cultural heritage. There are several theatre groups and the National Opera House is located in Wexford Town.

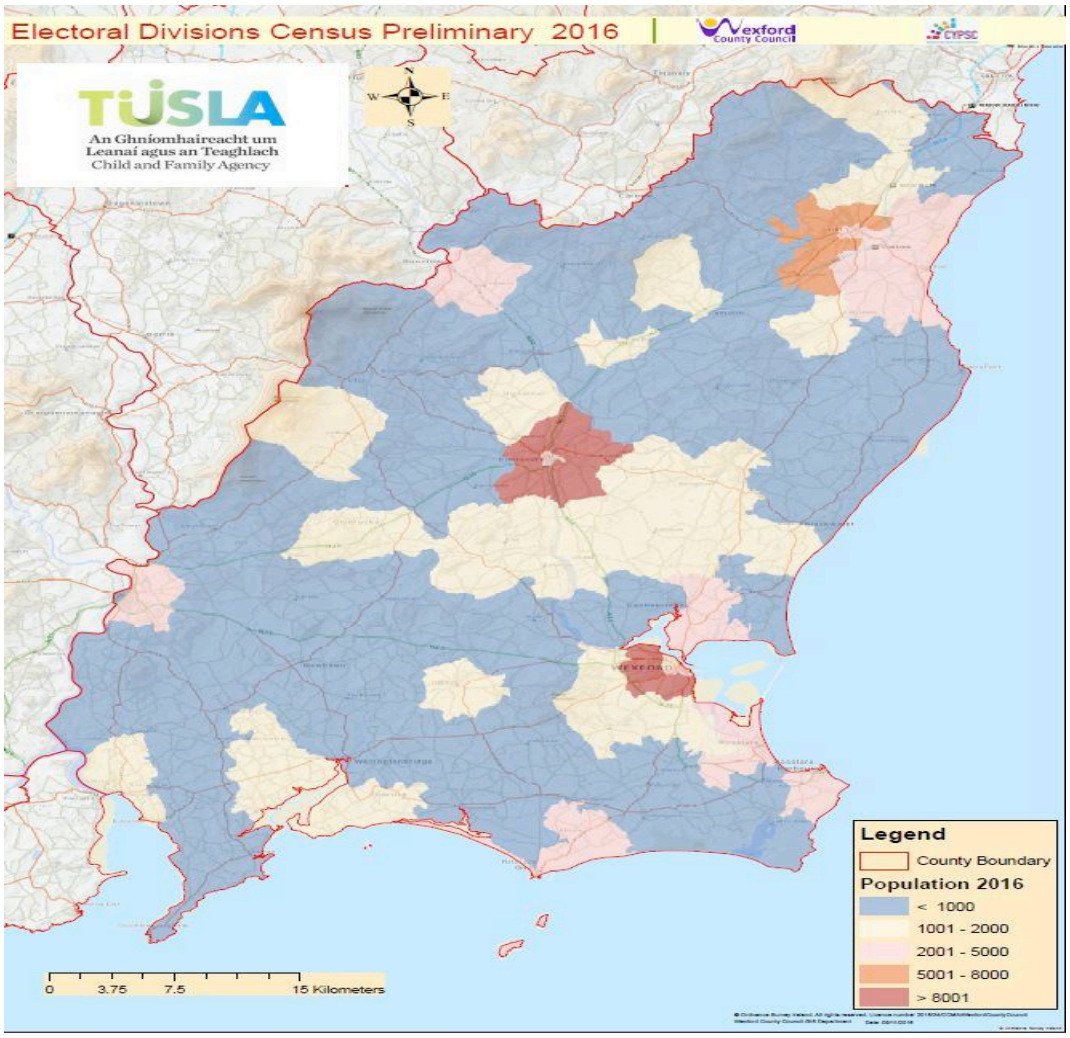


Source: Wexford County Council

This section draws on a number of documents to outline the socio-demographic structure of Co. Wexford. At the time of writing the plan, the 2011 Census is still the most complete source of information. Some preliminary findings from the 2016 Census are available on key issues such as population change, migration and housing and these are included where relevant. In addition, Wexford County Council have committed to updating the AIRO report with the 2016 census information when it is fully available and this will form a valuable resource for the CYPSC going forward.

Key Facts: Wexford

- ⇨ **1,988**: the number of births in Co. Wexford in 2015.
- ⇨ **971**: the number of deaths in Wexford in 2015.
- ⇨ **817**: the number of marriages that were celebrated in Wexford in 2015.
- ⇨ **5**: the number of Civil Partnerships that were registered in Wexford in 2015, out of a total of 354 in Ireland.
- ⇨ **15.7%:** the suicide rate in Wexford in 2013 compared to the National rate of 10.3%.
- ⇨ **54.8%**: the Wexford dependency rate – the 7th highest in the State and much higher than the State average of 49.3%.
- ⇨ **39,189**: the number of families living in Wexford – the 12th highest number in the State and accounts for 29.7% of the total families living in the South East.
- ⇨ **7,300**: the number of lone parent families living in Co. Wexford – represents 26.4% of total families living in Co. Wexford. This rate is the 9th highest rate in the country.
- ⇨ **53**: the number of teenage pregnancies in Wexford County in 2015.
- ⇨ **1,501**: the number of Travellers living in Co. Wexford in 2011 – the highest in the South East.
- ⇨ **380**: the number of Roma people estimated to be living in Co. Wexford in 2016.
- ⇨ **20.9%**: the percentage of those who have completed education to "third level" in Co. Wexford – the 3rd lowest rate in the country.
- ⇨ **1,554**: the number of young people in Co. Wexford (under 25 years) on the Live Register in November 2016 – out of a total cohort of 12,543 (all age groups).



Source : Wexford County Council

Preliminary Key Facts: 2016 Census – Wexford*

⇨ The Preliminary Census Results of Census 2016 reveal that the population has increased from 145,320 in 2011 to 149,605. This represents an increase of 4,285 persons or 3%. This can be broken down into an increase of 1,723 males (2.4% increase) and 2,562 females (3.5%).

⇨ The estimated net migration figure per 1,000 of average population between 2011 and 2016 has decreased by 1.8%.

⇨ The number of housing stock has increased by 487 units from 68,569 in 2011 to 69,056 in 2016.

⇨ There is a marginal reduction in the housing vacancy rate of 1.8% from 20.9% in 2011 to 19.1% in 2016.

*Figures for 2016 Census are preliminary only.

Wexford: Key Facts & Figures for Children & Young People

Indicator & Source	Description	Wexford	% State
Total Population CSO Census 2011 CSO Preliminary Census 2016	The total population of Co. Wexford	**145,320** **149,605** (3% increase)	4,588,252 4,757,976
Child Population CSO Census 2011 CYPSC County Level Data Sheet	The number of children under 18 living in Co. Wexford % of total population	**38,164** **26%**	1,126,919 25%
Young Adult Population (County Level Data Sheet)	The number of young people aged 20-24 in Co. Wexford % of population	**7,799** 5.4%	297,231 6.5%
Infant Mortality CSO Vital Statistics Yearly Summary 2014	The number of deaths of infants under 1 year of age per 1,000 live births classified by the area of residence of the mother in 2014.	**6**	249 Rate = 2.9%
Neonatal Mortality CSO Vital Statistics Yearly Summary 2014	The number of deaths of infants under 28 days old per 1,000 live births classified by area of residence of mother.	**6**	184 Rate =2.9%
Child Mortality County Level Data Sheet Wexford	The number of deaths among children under 18 in 2012	**27**	416
Sexual Health and Behaviour/ Children Born to Teenage Mothers CSO Vital Statistics	The number of births to mothers under 20 years of age in 2015	**53**	

Indicator & Source	Description	Wexford	% State
Traveller Children SONC 2014	The number of Traveller children in Co. Wexford *Rate per 1000 children*	**663** **17.1**	14,245 12.4
Foreign National Children SONC 2014	Number of foreign national children in Co. Wexford *Rate per 1000 children*	**2,704** **70.9**	93,005
Children with Disabilities SONC 2014	The number of children with a disability *% of total child population*	**2,502** **6.4%**	66,437 5.8%
New Births CSO Vital Statistics Yearly Summary 2015	The number of new births in Wexford in 2015	**1,988**	65,909
Number of Teenage Referrals to SHIP SHIP, Wexford	The number of referrals for 16-18 year olds to SHIP in 2015	**35** (total referrals = 233)	
Suicides NOSP - HSE	Suicide Rates for all persons, males and female per 100,000 population	**18.9%** (Male /Female combined	11.8%
Education SONC 2014	Percentage of pupils who completed second level school in 2014 Percentage of Post Primary pupils absent for 20 days or more	**91.7%** **20.3%**	90.56 18.4%

Indicator & Source	Description	Wexford	% State
Number of Referrals to Social Work Tusla C&F Agency Wexford	The number of child protection referrals to the Social Work Department in Wexford in 2015	**1609** : Total **738** : Emotional **315** : Physical **290** : Sexual **266** : Neglect	
Children in Care Tusla C&F Agency, Wexford	Number of children in Wexford in the care of Tusla Child & Family Agency in 2015	**202** : Total **14** : Residential Special Care **137** : General Foster Care **49** : Relative Foster Care **2** : Other Care Placements	
Referrals to Garda Juvenile Diversion Programme SONC 2014	Number of children in Wexford aged 10- 17 years referred to Garda Juvenile Diversion Programme	**365**	12,246
Probation Probation & Welfare Office Wexford	Number of young people aged under 25 years referred to the Probation Service Wexford in 2015	**64** : Total **42** : first time referrals **7** : repeat referrals	
Children in Lone Parent Households SONC 2014	Number of children living in a lone-parent household in Wexford *% of total child population*	**7,337** (19.22%)	202,444 18%

Indicator & Source	Description	Wexford	% State
Childhood Immunisations Health Profile Wexford 2015, HSE	The % uptake of immunisations among children at 24 months of age	**97%** (3rd 6 in 1) **97%** (MMR1)	95.6% 93.3%
Breast Feeding SONC 2014	% of infants who are breastfed (exclusive or combined) on discharge from hospital in Wexford	**51.2%**	55.7%
Number on Housing Waiting List Wexford County Council Housing Dept.	Number of people on Social Housing Waiting List Per District as on 18th January 2016	**3,927**: Total Jan 2016 **817** : Enniscorthy **988** : Gorey **695** : New Ross **1427** : Wexford No. of Social Housing Applicants on housing list as single adults with one or more children (child may not reside with adult) = **1113**	
No. of Clients Receiving Treatment for Substance Misuse HSE Substance Misuse Treatment Data 2013	Number of people receiving substance misuse treatment in 2013 who gave a Wexford address. Males : 66% Females : 34%	**776** : Total All Ages 2013 <18 years = **38** 18-24 years = **179** (23% of total cohort)	

Indicator & Source	Description	Wexford	% State
No. of Teenagers referred for Counselling	Number of young people referred for counselling; FDYS : 249 (10-24yrs) RSASS : 18 FRC's : 12	**279**	
Admissions of children to Psychiatric or CAMHS Units SONC 2014	Rate of admissions of children under 18 yrs to Psychiatric Hospital / Child & Adolescent Unit per 100,000 children	**48.9**	36.9
Youth Unemployment CSO	Number of young people (under 25yrs) signing on the Live Register in Wexford County in November 2016	**1,554** : Both sexes **867** : Male **687** : Female	

Sources :

- Central Statistics Office, 2011 Census
- SHIP : Self Harm Intervention Programme
- SONC : State of the Nations Children, Ireland 2014. Department of Children and Youth Affairs
- HSE Child Health Office, Wexford
- HSE Social Inclusion Unit
- County Level Data Sheet, Children & Young Peoples Services Committee National Office, Department of Children and Youth Affairs.
- Wexford County Council, Housing & Community Dept.

The following section gives a more detailed breakdown of demographics in Co. Wexford and draws heavily on the Wexford Socio-Economic Baseline Report (2015) prepared by the All Island Research Observatory, NUI Maynooth on behalf of Wexford County Council for the Local Economic Community Plan.

Population

According to the last Census conducted in April 2011, Wexford has a population of 145,320, consisting of 71,909 males and 73,411 females.

Between the years 2006 and 2011, Wexford County experienced an actual increase of 13,571 persons from 131,749 to 145,320. This represents a 10.3% increase in population. The population residing in Wexford is now equal to 3.16% of the State total (4.58 million). (**Source**: Census 2011: Population of each Province, County & City with Actual and Percentage Change, 2006 and 2011).

The breakdown of population across the age groups is shown in the table below.

Table No.1: General Population Wexford by Age Break-Down 2011

Total	All Ages	0-4 yrs	5-9 yrs	10-14 yrs	15-19 yrs
Wexford	145,320	11,539	11,025	10,500	9,026
Gender Breakdown					
Male	71,909	5,877	5,728	5,318	4,500
Female	73,411	5,662	5,297	5,182	4,526

Source: Census 2011: Population by Sex, Province, County or City, Age Group and Census Year

Dependency Ratio

The total dependency rate is the population aged 65 years+ (retired) and the population aged 0-14 years (children) expressed as a percentage of the population aged 15-64 years (most economically active cohort). Based on the 2011 census, Wexford has a dependency rate of 54.8%. This is the 7th highest rate in the State and considerably higher than the State average of 49.3%. This indicates that there is a very high proportion of the population dependent on the economically active population.

Furthermore, it is possible to further break down the figures into an “old age” dependency rate of 19.6% and a “youth” rate of 35.2%. These are the 10th and 11th highest rates respectively in the country.

The following section details the age structure of children and young people in Co. Wexford.

Children in Wexford: Age Structure

This section on age structure draws heavily on the Wexford LECP Socio Economic Baseline Report 2015 which was produced by AIRO.

This section provides an analysis of four broad age cohorts within and across Wexford that relate to the age group addressed by the CYPSC;

- Population aged 0-4 years (Preschool)
- Population aged 5-12 years (Primary School)
- Population aged 13-17 years (Secondary School)
- Population aged 18-24 years (Early Adult)

In general, Wexford has a higher rate of young people (Preschool and Primary School) and a higher rate of elderly population than the State average. See "Age Dependency" section for more information.

⇨ Population Aged 0-4 (Preschool)

According to the 2011 Census, the total population aged 0-4 years within Wexford is 11,539. Wexford has the 12th highest "0-4" population of all the Local Authorities and the highest in the South East. The "0-4" cohort living in Wexford is equivalent to 3.2% of the State total 356,329), 29.9% of the South East (38,575) and 4.5% of the South and East (258,334).

The "0-4" cohort now represents 7.9% of the total population living in Co. Wexford. This rate is the 16th highest in the country.

Since 2006, the "0-4" cohort in Wexford has increased by 1,514 representing a population increase of 15.1%. Within the South East, Wexford recorded the 2nd highest rate of increase, marginally below that of Kilkenny at 18.3%. The rate in Wexford was also well below the State average of 17.9%.

When the distribution of the "0-4"years cohort is examined across the Electoral Divisions, a varied spatial distribution can be observed. Higher rates are generally to be found in north Wexford with Gorey MD (8.9%). Parts of Gorey Town, north Enniscorthy and the environs of Wexford Town and New Ross exhibit very high rates for this age cohort (greater than 13%).

Highest numbers at ED Level are Wexford Rural (997), Enniscorthy Rural (800), Gorey Rural (713), New Ross Rural (434) and Ardamine (321).

Highest rates at Electoral Division level are: Dunmain (14.2%), Gorey Rural (11.6%), Ballyellis (11.5%), Harperstown (11.5%) and Ballynestragh (10.9%).

⇨ Population Aged 5-12 (Primary School)

The 2011 Census records the total population aged 5-12 years within Wexford as being 17,405. Wexford has the 12th highest "5-12" population of all local authorities and the highest figure in the South East. The Primary School age cohort in Wexford is equivalent to 3.5% of the State total (504,267), 30.3% of the South East (57,430) and 4.8% of the South and East (360,486).

The Primary School age cohort represents 12% of the total population living in Co. Wexford. This is the 10th highest rate in the country and higher than any other counties in the South East. The 2011 rate is higher than the South East average (11.5%), the South and East (10.8%) and the State (11%).

Since 2006, the "5-12" age grouping in Wexford has increased by +2,055 representing a population increase of 13.4%. This rate increase was marginally above the State average of 12%.

There is a varied spatial distribution of the "5-12" age cohort across Wexford ED's. Again the highest rates can be observed in the Gorey Municipal District (12.7% and in parts of Wexford Towns immediate catchment area.

Highest numbers at ED level are to be found in Wexford Rural (1,320), Enniscorthy Rural (1,138), Gorey Rural (787), New Ross Rural (540) and Ardamine (422).

Highest rates at ED level are: Huntington (18.2%), Glynn (17.9%), Forth (17.3%), Oldcourt (16.3%) and Harperstown (16.1%).

⇨ Population Aged 13-17 (Secondary School)

The total population aged "13-17" years in 2011 was 9,898. The "13-17" age cohort is equivalent to 3.4% of the State total (288,091), 29.6% of the South East (33,403) and 4.8% of the South and East (205,516).

The "13-17" age cohort now represents 6.8% of the total population living in County Wexford. This rate is the 8th highest in the country and is also higher than the South East average (6.7%) the South and East (6.1%) and the State (6.3%).

Since 2006, the "13-17" cohort in Wexford has increased by a moderate +422 representing a population increase of 4.5%.

An examination of the distribution of the "13-17" age group across Wexford E.D's shows that in general the rates are highest in areas with close proximity to the main urban centres of Wexford Town, Gorey and Wexford with rates then lower in the west and more peripheral areas of the county. Highest numbers at E.D. level are Wexford Rural (739), Enniscorthy Rural (674), Gorey Rural (368), New Ross Rural (266) and Wexford No. 2 urban (260). Highest rates at E.D. level are Forth (10.7%), Kilpatrick (10.1%), Rossminoge (9.9%), Tomhaggard (9.4%) and Ballymore (9.3%).

⇨ **Population Aged 18-24 (Early Adult)**

According to the 2011 Census, the total population aged 18-24 years within Wexford is 11,047. Wexford has the 15th highest "18-24" population of all local authorities and the highest in the South East. The Young Adult population is equivalent to 2.7% of the State total (411,153), 27.6% of the South East (20,078) and 3.6% of the South and East (306,549).

The "18-24" cohort now represents 7.6% of the total population living in County Wexford. This rate is the 7th lowest in the country and the lowest rate in the South East region. The 2011 rate is considerably lower than the South East average (8.1%), the South and East (9.2%) and the State (9%) and can be attributed to lack of access to local third level education opportunities and recent high levels of emigration of young Wexford residents.

Since 2006, the "18-24" cohort in Wexford has decreased by -870 representing a population decrease of -7.3%. Within the South East, Wexford recorded the 2nd lowest rate of decrease marginally below that of Kilkenny at -5.9%. The rate in Wexford was also well below the State average of -10.8%.

An examination of the distribution of the "18-24" age cohort across the Wexford E.D's shows that the highest rates are in the Enniscorthy and New Ross Municipal Districts with more rural and peripheral areas tending to have lower rates. There are also some pockets of high rates in areas close to Courtown, Wellingtonbridge and North Bunclody.

Highest numbers at Electoral Division level are Wexford Rural (974), Enniscorthy Rural (898), Gorey Rural (475), Wexford No. 2 Urban (341) and New Ross Rural (326).

Highest rates at E.D level are Barrack Village (13%), Carrickbyrne (11.3%), Rosbercon Urban (11.3%), Moyacomb (11%) and Kilbride (11%)

Deprivation;

Affluence and Disadvantage

The main measurement of affluence and deprivation in Ireland is based on the Pobal HP Deprivation Index (Haase & Pratschke, 2012). This index is based on three dimensions of Affluence / Disadvantage: Demographic Profile, Social Class Composition and Labour Market Situation. The Absolute HP Index Score can be used to demonstrate comparisons over time. It can show the level of overall affluence and deprivation in 2006 and 2011, using identical measurement scales.

Ireland as a whole has seen a decline in the Absolute HP Index score by 6.6 points between 2006 and 2011. During the same time period, Wexford experienced a decline of 8.1 points. This was the 5th highest decline in the country. In effect, this means that Wexford has experienced an increase in terms of the levels of deprivation experienced in the county. By comparison, Dublin City declined by 3.8 points, Cork City by 4.1 points, Limerick City by 6.2 points, Galway City by 4.9 and Waterford City by 5.8 (AIRO, p.161).

The Relative Index Score is a useful tool to demonstrate affluence or disadvantage at a given moment in time. Based on the Relative Index Scores for 2011, Wexford is now the 3rd most disadvantaged local authority in the country with a score of -5.1 (marginally below average). As a result of the economic downturn, Wexford has slipped from the 7th most disadvantaged in 2006 to the 3rd in 2011.

A closer look at disadvantage at Electoral Division (ED) level reveals that the vast majority of Wexford ED's are classified as "marginally below average" (80.6%), with the remaining ED's classified as "marginally above average" (12.9%) and "disadvantaged" (6.5%).

Key Information from the Pobal Deprivation Index;

⇨ **Electoral Division (E.D) and Municipal District (M.D) Level;**

- The vast majority of Wexford E.D's are classified as "marginally below average" (80.6%), with the remaining E.D's classified as "marginally above average" (12.9%) and "disadvantaged" (6.5%)
- 6 of the 124 E.D's in Wexford are classified as "disadvantaged": Taghmon, Enniscorthy Urban, New Ross Urban, Wexford No. 2 Urban, Newtownbarry and Ferns.
- There are no E.D's in Wexford classified as Affluent, Very Affluent or Extremely Affluent.
- At M.D. level all 4 Wexford M.D's are classified as "Marginally Below Average" with New Ross being the most disadvantaged with a score of -6.47. This is marginally below the Enniscorthy score of -6.21. Wexford M.D. is the least disadvantaged with a score of -3.78. This is slightly higher that that of Gorey M.D. with a score of -4.56.

⇨ **Small Area (S.A) Level;**

- At the Small Area Level (SA), almost 80% of Wexford S.A's are classed as "Marginally Below Average".
- 17.5% (110) of S.A's in Wexford are classed as "Disadvantaged" and account for a population of 25,520 and 2.9% (18) are classed as "Very Disadvantaged" and account for a population of 4,199.
- 7 S.A's are in the "Most Disadvantaged" 300 Small Areas across the country with the most disadvantaged being in Clonroche (33rd most disadvantaged).
- The most disadvantaged S.A's are all within the following E.D's: Clonroche, Wexford No.2 Urban, Wexford Rural, Taghmon, Newtownbarry, Enniscorthy Rural, Gorey Urban, Gorey Rural and New Ross Urban.
- There are only 5 S.A's in Wexford that are classed as "Affluent" and they are located in the E.D's of Bree, Courtown, New Ross Rural, Kilpatrick and Carrick.

Ethnic Population

The Census provides us with a breakdown of the usually resident population by place of birth and nationality. Non-Irish nationals accounted for 9.4% of the population of Wexford compared with a national average of figure of 12%. UK nationals (4,604 persons) were the largest group, followed by Polish (4,010) persons.

The Census also indicates that the number of foreign national children (0-17 yrs) residing in Wexford is 2,704. (Source: Outcomes and Indicators, Demographics from 2011 Census of Population, Child & Family Agency).

There are two ethnic minorities which are particularly significant in the Wexford context: the growing Traveller and Roma communities.

⇨ **Traveller Population**

The results of the 2011 National Census revealed that Wexford has the highest population of Travellers (1,501) in the South East and the fifth highest population in the country. Analysis of the national census also indicates that the number of Travellers in Co. Wexford in the age cohort 0-24 years is 851.

Table No. 2: Traveller Population (Both Sexes) in Co. Wexford

Age Group	No. of Persons (Both Sexes) Wexford	No. of Persons (both Sexes) State
0-4 Years	214	4,676
5-9 Years	192	3,905
10-14 Years	165	3,554
15-19 Years	152	3,279
20-24 Years	128	2,772
All Ages	1,501	24,495

Source: Census 2011, CSO

Wexford Local Authority also conducts its own annual count of Traveller families in the county. The latest figures available are from November 2016. The results indicated that at that time there were 704 Traveller families residing in Co. Wexford. This represents an increase of 1 family from the previous year. The table overleaf indicates the number of Traveller families with and without accommodation living in County Wexford. The table also illustrates that the highest concentration of Traveller families reside in Enniscorthy (237), followed by New Ross (236), Wexford (120) and Gorey (111).

Table No. 3: Annual Count of Traveller Families in Co. Wexford, 2016

	Enniscorthy	New Ross	Wexford	Gorey	Total	2015 Difference
Total Families with Accommodation	207	211	105	79	602	+3
Total Families *Without Accommodation	30	25	15	32	102	-2
Overall Totals	**237**	**236**	**120**	**111**	**704**	**+1**

Source: Wexford County Council. *Without Accommodation = Sharing with relatives, unauthorised sites, transient sites, roadside caravans, no fixed abode.

⇨ Roma Population

The Roma people are part of an ethnic minority group that originated in India and migrated to Europe. E.U institutions use "Roma" as an umbrella term for people who self-identify as belonging to Roma, Sinti, Ashkali, Manush and other groups with a nomadic tradition. Collecting data on the Roma population is challenging and it is widely accepted that the number of Roma across Europe is underestimated. Ethnic identity is currently not included on the Census form and there is reluctance among some to identify as Roma due to fears of racism. Pavee Point Traveller and Roma Centre estimates that there are up to 5,000 Roma currently living in Ireland with the majority coming from Romania and Slovakia.

There is a growing population of Roma people in Co. Wexford. The HSE Social Inclusion Office estimated the total Roma population in the county to be 380 in 2016. This represented an increase of 42 individuals on the previous year. Geographically, the majority of the population are residing in Enniscorthy (population 10,838 at 2011 Census).

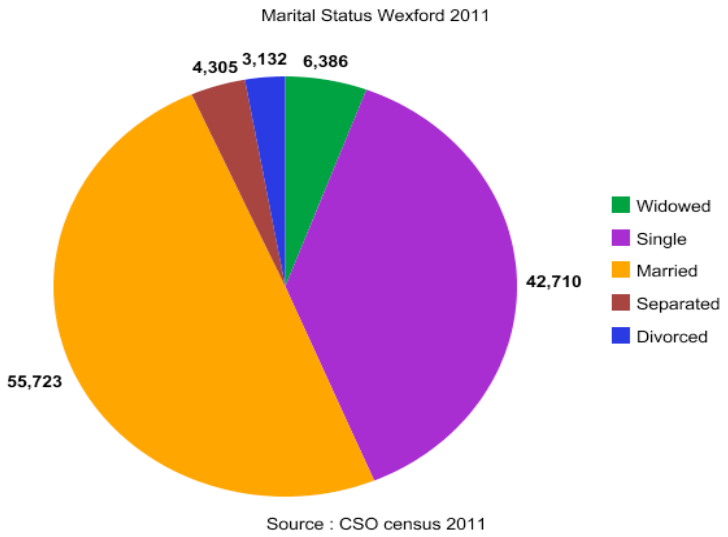
Pavee Point highlight that in Ireland, many Roma people report experiencing disadvantage in accessing education, health services, good quality housing and employment opportunities. The Roma community have lower life expectancy and education participation levels than the general population and a higher incidence of infant mortality and poverty. As the Roma population continues to increase, these issues, particularly in relation to Roma children and young people will become more prominent in Co. Wexford.

Family Structure

⇨ Marital Status

According to the 2011 Census, there were 112,256 persons aged 15 years and over. 42,710 of this cohort were single, 55,723 were married, 4,305 were separated (including deserted), 3,132 were divorced and 6,386 were widowed.

Graph 1:



The results of the 2011 Census revealed that there is a higher rate of marital breakdowns in Co. Wexford than in neighbouring counties in the South East with the exception of Co. Wicklow which is marginally higher. This has implications for families in terms of emotional and financial stress and for those families with children there are additional issues to be considered such as access arrangements etc.

Table No 4: Marital Status in Wexford - Number of Divorces and Separations in 2011.

	Population	Divorce	Rate per 1000 Population	Separation (including Desertion)	Rate per 1000 Population
Carlow	54,612	1,094	20	1,515	27.7
Kilkenny	95,419	1,639	17	2,284	23.9
Waterford	113,795	2,323	20.4	3,216	28
Wexford	**145,320**	**3,132**	**21.5**	**4,305**	**29.6**
Wicklow	136,448	2,955	21.6	3,991	29
Leinster	2,504,814	48,856	19.5	66,415	26.5
State	4,588,252	87,770	19.1	116,194	25

Source: CSO, Census 2011

⇨ Family Cycle

There are 39,189 families living in Co. Wexford. Those families with children from pre-school age to adolescents amount to 18,549. 3,431 families are in the "pre-family" stage. Statistically, Wexford has the highest rates in the South East for the 0-4 years (Pre-School) and 5-12 years (Primary School) cohorts. They represent 9% and 12% of the total population in Co. Wexford respectively. The increasing levels in these young age cohorts is a positive sign for Co. Wexford but indicates that greater levels of social and educational services will be required to meet their needs in the future. See table below for further details of family cycle.

Table No. 5: Families in Wexford by Family Cycle

Family Cycle	Number of Families	Number of Family Members
Pre-Family	3,431	6,826
Empty Nest	4,611	9,222
Retired	3,457	6,914
Pre-School	4,359	13,632
Early School	4,646	17,602
Pre-Adolescent	4,606	18,511
Adolescent	4,938	19,969
Adult	9,145	32,123
Total	39,189	124,835

Source: Census 2011, Central Statistics Office

⇨ Lone Parents

An examination of family composition in Co. Wexford indicates that there are 7,300 "lone parent" families living in the county (2011 Census). This majority of these families are "lone mother" (87%), with the remainder (13%) being "lone father". Lone parent families represent over one quarter (26.4%) of the total families living in Co. Wexford. This is the 9th highest rate in the country and is significant given the additional economic and social demands placed on this section of the community compared to the general population. Statistically, lone parent families (classified as 1 adult with children aged less than 18 years) are at higher risk of poverty than other household compositions. The risk of poverty has also increased year on year for this cohort of the population. See table overleaf.

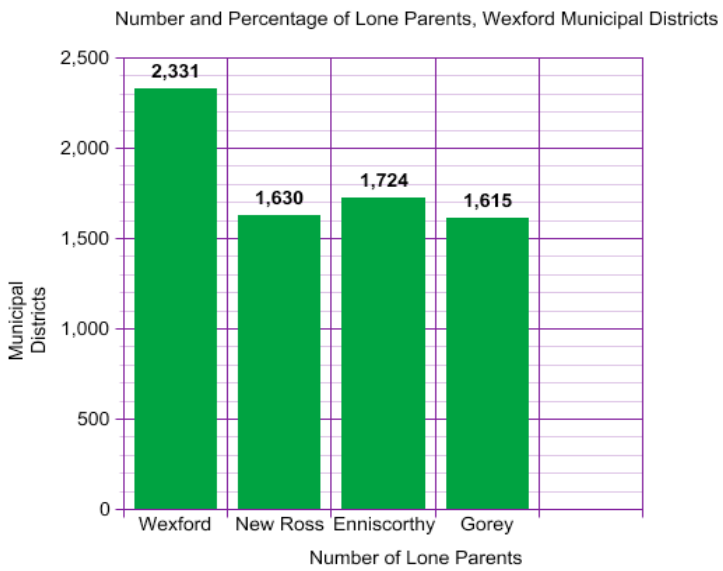
Table No. 6: "At Risk of Poverty" Rate by Demographic Characteristics and Year.

	2010	2011	2012	2013	2014
1 adult aged 65+	8.0%	9.1%	12.9%	12.8%	13.7%
1 adult aged <65	19.2%	24.3%	27.1%	27.2%	25.7%
2 adults, at least 1 aged 65+	8.6%	8.9%	13.0%	8.7%	10.7%
2 adults, both aged <65	12.6%	12.5%	12.4%	11.2%	10.6%
3 or more adults	8.8%	11.7%	13.4%	11.1%	15.9%
1 adult with children aged under 18	**24.7%**	**28.4%**	**29.1%**	**31.7%**	**32%**
2 adults with 1-3 children aged under 18	14.3%	14.6%	13.9%	11.1%	12.8%
Other households with children aged under 18	20.6%	21.2%	21.5%	24.7%	23.4%

Source: CSO

The spatial distribution of Lone Parent families is highest across all the urban centres of Wexford Town, Enniscorthy, New Ross and Gorey. However, higher than average rates for lone parents can also be observed in some smaller areas such as Courtown, Taghmon, Kilmuckridge and Ferns.

Graph 2.



Source : Wexford Socio-Economic Baseline Report, 2015

⇨ Children in Care / Aftercare

There were 202 children in care in Co. Wexford in 2016. This includes children in residential special care, general foster care, relative foster care and other care placements. In addition, as of November 2016, there were 53 young adults (over 18 years) in Aftercare in Wexford. The CYPSC is mindful of the additional needs of children within the care system particularly in relation to their requirements for counselling, psychology, transitional accommodation and co-ordinated supports.

Education

The AIRO Report highlights that there is a significant difference between education attainment levels in Wexford and the State. In general, attainment levels in Wexford have a much higher proportional share in the lower education levels ("No Formal Education" or "Primary" and "Lower Secondary") and as a consequence a lower proportional share in higher education (Third Level). In fact, Wexford has the third lowest rate in the country for educational attainment at Third Level.

See overleaf for a break-down of the highest level of educational attained for those aged 15 years + in Co. Wexford. Figures are based on the 2011 census and are extracted from the AIRO Report.

Rates of Educational Attainment in Co. Wexford

No Formal / Primary: The 2011 Census recorded 17,984 people in Wexford as having "No Formal / Primary Only" education. This represents **18.5%** of those who have completed education in the county. It is higher than the figure for the South East and it is also higher than the State average (15.2%)

Lower Secondary: For roughly one fifth **(20.1%)** of the Wexford population, "Lower Secondary" is the highest level of educational achievement. This is also higher than the South East (19.8%) and State (16.6%) averages.

Upper Secondary: **20.7%** of the Wexford population completed education with "Upper Secondary Education". This is broadly in line with the South East (20.6%) and State (20%) averages.

Technical / Vocational / Apprenticeship: For **15.8%** of the population, the highest level of education completed is at "Technical/Vocational/Apprenticeship" level. This is broadly in line with the South East average (15.9%) but is higher than the State (20%) average.

Third Level: In total, **20.9%** of those who have completed education, have a "Third Level" qualification. **This is the third lowest rate in the country.** It is also lower than the South East average (23.1%) and the State (29.1%) average.

⇨ School Attendance

Tusla Child & Family Agency generates a report on School Attendance Data from Primary and Post Primary Schools. The most recent figures available relate to 2013/2014. They show that at Primary Level, Wexford is on a par with other counties for the number of student days lost, 20 day absences, expulsions and suspensions. However, when these elements are examined at Post Primary level, Wexford is one of the counties that show higher figures. In general, suspensions are much more common at Post Primary than at Primary level and Dublin and Wexford demonstrate higher rates for suspensions than the rest of the country.

⇨ Access to Post Primary School Places

Access to Post Primary School places has also been highlighted as an issue of concern in Co. Wexford, with the problem being most acute in Wexford Town. The five Post Primary schools there are oversubscribed. This has led to a situation where some parents find themselves enrolling their children in schools in other towns such as New Ross, Enniscorthy or Gorey.

An Irish Times article on the topic of access to secondary school places (26 Feb 2016), listed Wexford Town as one of the key areas in the country where parents report lengthy pre-enrolment waiting lists. The demographics for the county indicate that access to secondary

school places will continue to be a major issue in the future. The county has the 12th highest rate of 0-4 year olds (11,539 persons) and 5-12 year olds (17,405) in the country. The article also refers to research commissioned by Wexford County Council which indicates that there is an immediate shortage of 500 places in the county.

⇨ **Progression Rates from Primary to Post Primary School**

Among the general population, progression rates from Primary to Post Primary education are within the national average. However, the progression and retention rates for the Traveller community are considerably less favourable. The figure for non-transferral in 2016 was 16 children. The extent of the challenge is demonstrated by the following figures. The Education Welfare Service received 203 referrals in 2015 from Wexford. 55 of these referrals were in relation to the attendance of Traveller children. This represents 27% of all referrals in the county. Currently (November 2016) the EWO's in Wexford are working 94 open and active cases and 40 of these children are from the Traveller community. At 42% of active cases, this is a disproportionate figure and a multi-agency response is required to ensure that educational outcomes are improved for these children.

⇨ **Progression Rates from Post Primary to Third Level**

The Irish Times Feeder Schools Report (2015) provides information on progression rates (those who sit the Leaving Cert and progress to 3rd Level) from all Post Primary Schools to 3rd Level institutions. According to the 2015 results, Wexford recorded a progression rate of 74% and was one of the lowest rates in the country. This rate is below neighbouring counties such as Kilkenny (76%) and Waterford (79%). The report also highlights significant differences in progression rates from Deis[1] and Non-Deis schools. Deis schools had a progression rate of 28% - 79% while non-Deis schools had a progression rate of 59% - 98%.

Housing

National Census results reveal that here has been a 1.9% decrease in the proportion of local authority housing in Ireland over the past 20 years from 9.8% in 1991 to 7.9% in 2011. In Wexford, there has been a marginal decrease from 10.3% to 8.4%. At ED level, the highest concentrations of local authority housing are found in New Ross Urban (20.8%), Ferns (18.2%), Kilmokea (17.9%), Taghmon (17.3%) and New Ross Rural (15.7%). These figures are still considered low compared to other towns and cities. (**Source**: The 2011 Pobal HP Deprivation Index, Area Profile for County Wexford - Feline Engling, Trutz Haase. February 2013).

A particularly significant issue in terms of housing in Co. Wexford is the high rate of dependency on Rent Supplement payments in the county. The number of people receiving long-term Rent Supplement has grown incrementally over recent years, rising from 36.3% in

[1] DEIS : Delivering Equality of Opportunity in Schools focuses on addressing and prioritising the educational needs of children and young people from disadvantaged communities from preschool through second level education (3-18 years).

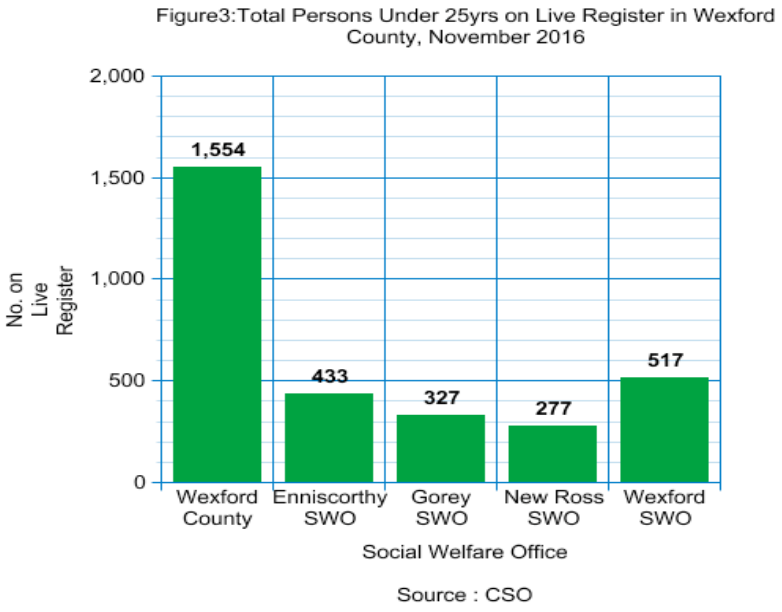
2009 to 65.3% in 2013. This demonstrates the high level of dependency on State support for housing and creates pressure in terms of the availability of Social Housing (AIRO, p. 328),

Economy

⇨ Unemployment

In 2011, the total population classified as unemployed (both unemployed and seeking first job) in Co. Wexford was 16,170. This represents an unemployment rate of 24% of the total labour force. This is considerably higher than the national average of 19%. The unemployment figures in Co. Wexford increased significantly (+180%) in the interim period between the 2006 and 2011 Census. This may be attributed to the economic crash and the associated negative impact on the construction, manufacturing and trade sectors. The impact was felt more acutely in Co. Wexford given the higher than average dependence on employment in the traditionally lower end sectors. (AIRO P. 178)

The Live Register is not specifically designed to measure unemployment as it includes part-time, seasonal and casual workers. However, an examination of the Live Register can give an insight into unemployment trends in the county. In November 2016, there were 12,543 individuals of both sexes and all ages signing on the Live Register in Wexford County. 1,554 (12%) of this cohort were under 25 years of age. 867 were male and 687 were female. The total number of recipients under 25 years of age can be broken down across the four local Social Welfare Offices. See graph 3 below.



The most recent figures for young persons (under 26 years of age) in receipt of Jobseekers Allowance, Jobseekers Benefit and Credits by County are available for 30th April 2016. 1770 young people in Wexford were in receipt of Jobseekers Allowance, 119 were in receipt of Jobseekers Benefit and 9 were in receipt of Credits only.

Health & Wellbeing

⇨ Mental Health / Suicide & Self Harm

The recently published "Connecting for Life: Wexford Suicide Prevention Strategy" provides a clear insight into the issue of suicide in Co. Wexford. The report outlines that similar to the rest of Ireland, the majority of people in Wexford state that they are in good health (88.3%), with only a slightly higher than average number (Wexford is 1.6% compared to national figure of 1.5%), stating that they have bad health. Wexford is within the national range for many health indicators, with the exception of suicide. Admissions to hospital or respiratory illness, and death rates from heart attack, stroke and blood pressure are all around the national average (Connecting for Life, p.7).

However, the rate of suicide in Wexford is above the national average. The National Office for Suicide Prevention (NOSP) in their Annual Report 2014, provide "three year moving averages" for suicide rates since 2004, which show that Wexford consistently has a higher rate than the national average. The NOSP shows that based on the most recent data available, suicide rates were highest in Limerick City, Cork City, Kerry and Wexford. As illustrated in the table below, the suicide rate in Wexford in 2013 was 15.7% compared to the national rate of 10.3%.

Table No. 7: Suicides and Suicide Rates Nationally and in Co. Wexford

	ALL PERSONS SUICIDE RATE			MALE			FEMALE		
County	2013	2012	2008	2013	2012	2008	2013	2012	2008
Ireland	10.3	11.1	11.3	17.4	18.2	17.2	3.4	4.1	5.3
Wexford	15.7	21.2	12.9	24.8	35.9	22.9	6.8	6.8	2.9

Source: Connecting for Life: Wexford County Suicide and Self Harm Prevention Plan, 2016-2020.
Quality Matters, 2015

Also of concern are the self-harm rates in Co. Wexford. There is a strong relationship between suicide and prior self-harm; people who are treated for self-harm are far more likely to die by suicide compared to people in the general population and repeated deliberate self-harm is one of the strongest risk factors for death by suicide. In terms of presentations of self-harm to hospitals, Wexford ranked in the top 30-40% of self-harming rates nationally for men and women (CFL, p.8).

⇨ Teenage Pregnancy

Wexford has the highest rate of teenage pregnancy in the South East. In 2015, 53 teenage girls became mothers. In the three years from 2012 to 2014, Co Wexford had 209 teen pregnancies, County Waterford had 121 (population 113,795), Kilkenny/Carlow had 148, (population 150,031) and South Tipperary had 95 (population 88,432). Source: CSO.

Table No. 8: Teenage Pregnancy Statistics, South East 2001-2016

	'01	'02	'03	'04	'05	'06	'07	'08	'09	'10	'11	'12	'13	'14	'15	'16
Carlow	38	51	52	40	38	37	42	24	32	38	35	29	23	21	22	23
Kilkenny	44	41	52	32	37	34	35	43	34	38	35	22	31	22	22	21
South Tipperary	63	47	55	49	53	37	51	37	47	40	26	36	33	26	24	21
Waterford City	37	50	52	40	45	39	53	47	36	23	20	29	19	19	16	14
Waterford County	15	26	38	35	30	38	20	27	20	27	26	15	21	18	19	7
Wexford County	**130**	**101**	**116**	**108**	**97**	**94**	**96**	**106**	**91**	**76**	**77**	**87**	**67**	**55**	**53**	**59**

Source: CSO Vital Statistics. Table 9: Births Registered, Classified by Area of Residence and Age of Mother (<20 years).

The rate of teenage pregnancy in Co. Wexford is significant given the implications in terms of social issues. Teenage parents have a higher chance of experiencing poverty and social exclusion. The National Youth Council of Ireland has found that teenage parents may face social isolation, negative social attitudes, stress, anxiety and low self-esteem (Access All Areas, P.4). They may also miss out on education and employment opportunities. They may have problems accessing quality and affordable housing with many waiting considerable lengths of time for local authority accommodation and living in over-crowded situations or in the high cost private-rental sector in the interim.

In many cases, teen mothers are also lone parents and lone parent households remain the single most deprived household group in Ireland with poverty rates for lone parent families being much higher than for other groups. In 2014, this group experienced a 32% rate of being "at risk of poverty". See section on Family Cycle (Lone Parents, p. 30) for more detail.

⇨ Children with Disabilities

In 2011, the census recorded that there were 2,502 children with a disability in Co. Wexford. This represented a rate of 64.4 per 1,000 children in the State / County. This was higher than the national rate of 57.8. Wexford CYPSC is committed to building relationships with the disability sector and supports the roll-out of "Progressing Disability Services" to ensure that there are clear pathways to services for children and young people with disabilities.

⇨ Substance Misuse

Drug / Alcohol Treatment

The following information is extracted from the Health Research Boards National Drug Treatment Reporting System (NDRTS). The NDTRS is a health information system that collects anonymous data about people in drug and alcohol treatment from general practitioners, low threshold services (that provide low-dose Methodone or drop-in facilities only), outpatient and inpatient services. Data is valid as of 3rd August 2016. Please note that items with less than 5 entries have been removed from the Reporting System.

It can be observed in the table that for the "under 18" and "18-34 years" age groups, Cannabis is the most misused drug in Co. Wexford. For those in the "18-34 years" category, misuse of Benzodiazepines is also prominent.

Table No. 9 : Treatment Data Table Re: Drugs in Co. Wexford 2014

	Cannabis	Cocaine	Opiates	Amphetamines	Benzodiazepines	Others
All Ages	Total* = 157 M = 122 F = 35	Total = 30 M = 26 F = 0	Total = 112 M = 81 F = 31	Total = 115 M = 83 F = 32	Total = 139 M = 94 F = 45	Total = 26 M = 17 F = 9
Under 18	Total = 30 M = 22 F = 8	Total = 0	Total = 0	Total = 0	Total = 0	Total = 0
18-34 years	Total = 113 M = 88 F = 25	Total = 23 M = 19 F = 0	Total = 89 M = 61 F = 28	Total = 91 M = 62 F = 29	Total = 104 M = 69 F = 35	Total = 19 M = 12 F = 7

Source : National Drug Treatment Reporting System. * All genders.

Information from the NDTRS indicates that a low number of individuals under 18 years in Co. Wexford received drug and alcohol treatment in 2014. National research by the Health Research Board indicates that in 2015, half of all those in treatment for problem alcohol misuse, commenced drinking alcohol at or before the age of 16 years. It is important therefore that as a harm reduction measure, the age of initial alcohol consumption is delayed.

Table No. 10 : Treatment Data Table Re: Alcohol in Co. Wexford 2014

	Under 18yrs	18-34yrs	All Ages
Male	0	80	223
Female	0	41	116
All Genders	6	121	339

Source : National Drug Treatment Reporting System. **Note**: Items with less than 5 entries have been removed from the Reporting System.

The following table gives a national overview of the number of cases treated for alcohol misuse by CHO area of residence. The number of cases fluctuated for all CHO's over the period 2009 – 2015. However, by 2015, 5 out of 9 CHO's reported a decrease in the number of cases treated for alcohol use. This is the case with Co. Wexford, which has decreased from a high of 1815 cases in 2011 to 1348 cases in 2015.

Table No. 11 : Number of Cases treated for Alcohol Misuse, by CHO Area of Residence

	2009	2010	2011	2012	2013	2014	2015
All Cases	7993	8033	8876	8607	7817	7760	7616
CHO 1	1123	1213	1135	1290	864	765	869
CHO 2	542	460	502	484	449	400	430
CHO 3	481	543	494	391	456	504	489
CHO 4	1209	1555	1784	1675	1613	1617	1365
CHO 5	**1631**	**1528**	**1815**	**1665**	**1411**	**1311**	**1348**
CHO 6	307	270	284	255	318	345	314
CHO 7	1004	1002	1014	1079	1028	976	873
CHO 8	925	640	942	961	844	971	880
CHO 9	610	670	730	585	673	707	852
Other /Unknown	161	152	176	222	161	164	196

Source: Health Research Board (2017). Alcohol Treatment in Ireland, NDTRS 2009-2015

Note: CHO 5 includes South Tipperary, Carlow / Kilkenny, Waterford and Wexford

⇨ Youth Justice

Within the Wexford Division, there are three Juvenile Liaison Officers (JLO's) who are specifically trained to work with underage offenders (under 18 years). They deal with young people and their families in relation to crime prevention and other areas related to young people and the criminal justice system. They play a key role in the operation of Youth Diversion Projects of which there are three in Co. Wexford. In 2016, there were 411 referrals to the Juvenile Diversion Programme in county Wexford. 94 referrals came from the Wexford District, 143 from New Ross and 174 from Enniscorthy (which includes the Gorey area).

Table No. 12 : Number of Children aged 10-17 referred / referrals to the Garda Diversion Programme, by Region and Division(2014) and rate (per 1000) in State / County (2011)
- Extract of Co. Wexford data

	Total Number of Children Referred	2014 Referral Rate Per 1000 children Aged 10-17 in 2011 Census	Total Number of Referrals	2014 Referral Rate	Average Ratio of Referrals to Number of children Referred
Wexford	251	15.4	474	29.1	1.9
South East	1,191	19.1	2,102	33.7	1.8
Total	9,991	21.2	19,854	42.1	2.0

Source : State of the Nations Children 2016

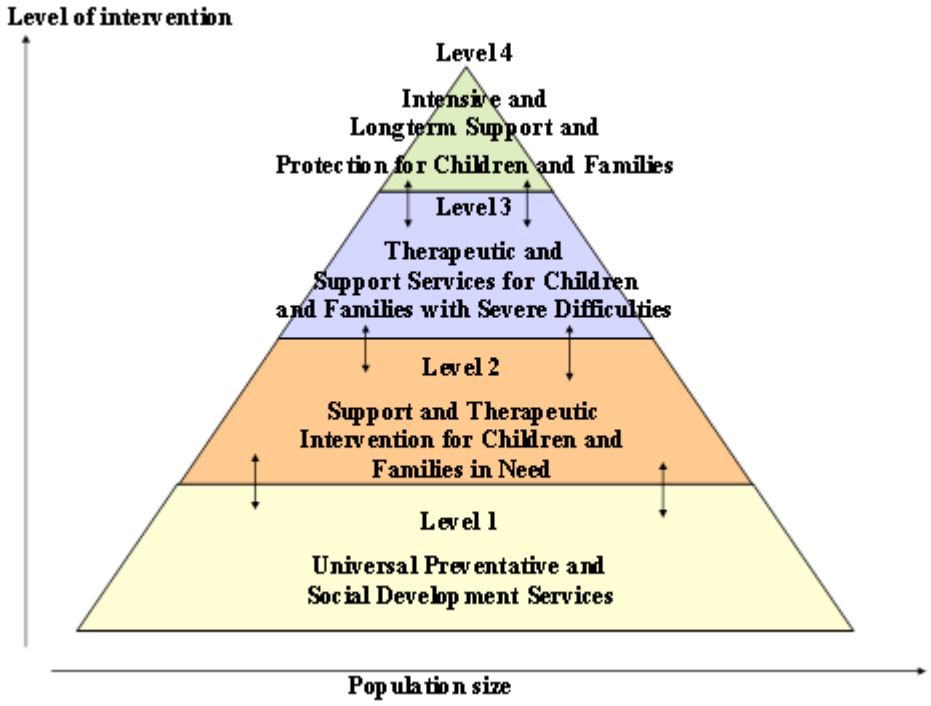
Conclusion

County Wexford has a growing population, with a particularly high proportion of children under 12 years of age when compared to the rest of the country. It features a mixture of rural and urban centres spread around the county. Co. Wexford has the largest Traveller population in the South East and a growing Roma population which is particularly concentrated in the Enniscorthy area. There are high levels of deprivation evident throughout the county and this poses challenges for children, families and young people across a number of indicators including poverty, levels of educational attainment, unemployment and high rates of teenage pregnancy as well as higher than average levels of suicide and self-harm.

Section 3: Overview of Services to Children and Families in County Wexford

In the 1990's in the U.K., a model was developed to help understand different levels of need within a population (Hardiker et al, 1991). This became known as the Hardiker Model. It is now widely used and has been a useful planning tool for both UK and Irish Governments. See Appendix 3 for more information. The model outlines four levels of intervention as illustrated in figure 3 below.

Figure 3: Hardiker Model



This section provides an overview of service provision which was compiled following an audit of all services for children and families in Co. Wexford. Services that are provided by statutory, community and voluntary providers are listed. The overview indicates at which level of the Hardiker Model services are being provided and whether services are universal, targeted or both.

Overview of Services

The table below provides an overview of the principal services provided to children, young people and families in Co. Wexford and the level of provision based on the Hardiker Model. For more information on services and supports available in Co. Wexford see www.wexfordcypsc.ie.

Organisation / Agency	Service	Statutory or Voluntary	Universal or Targeted or Both
HSE Community Services & Primary Care Teams **No. PCTs in Development in Wexford (16)**	Area Medical Office Audiology Services Child Psychology Community Schemes Dental Service G.P Out of Hours Service (Contracted) Early Intervention Team (Disability) Health Promotion Immunisations Occupational Therapy Orthodontic Ophthalmology Physiotherapy Public Health Nursing Speech & Language Therapy	Statutory	Universal and Targeted 1-3
HSE Mental Health	CAMHS (Child and Adolescent Mental Health Service) SHIP (Self Harm Intervention Programme)	Statutory	3-4 3
Substance Misuse	Needle Exchange Methodone Treatment Clinics Community Based Drugs Initiative Project Workers x 2 Aiseiri Treatment Service Cornmarket Project	Statutory Community	Targeted Levels 2-4
HSE Social Inclusion	Traveller Health Project x 2 (North and South) Homeless Services LGBTI County Wexford Roma Health Advocacy Project Intercultural Health/New Communities Substance Misuse (as above)	Statutory (also provides funding to Voluntary orgs)	Universal and Targeted 1-3
Education	Primary Schools – 106 (20 Deis) Post-Primary Schools – 22 (8 Deis) Special Schools - 2 School Completion Programmes x 5 (Bridgetown, Bunclody / Enniscorthy, Gorey, South West Wexford, Wexford)	Statutory Community / Voluntary	Universal 1 Targeted 1-2 Targeted & Universal 2-3

	National Education Psychology Service (NEPS) Wexford Campus Carlow I.T Education Welfare Service, Tusla; Education Welfare Officer x 2 WTE 1 – Wexford Town .5 West Wexford .5 North Wexford. Waterford and Wexford Education and Training Board (WWETB) - Adult & Community Education - Adult Education Guidance Service - Adult Literacy - Back to Education Initiative - Community Education Programme - VTOS - Youthreach Youthtrain Access 2000	Statutory Statutory Statutory Statutory Community	Targeted 3 Universal 1-2 Targeted 2-3 Universal & Targeted 2-3 Targeted 2-3
Tusla Child and Family Agency	**Social Work;** Child Protection Social Work Team Fostering & Alternative Care Adult Assessment Team Adoption Aftercare	Statutory	Targeted 3 & 4
	Family Support; PPFS - Meitheal - Child & Family Support Networks x 4	Statutory	Universal & Targeted 1-3
	Preschool; Preschool inspection	Statutory	Universal
Family Support Services	FRC's x 5 (Gorey, Raheen, Southend, South West Wexford, Taghmon) Barnardos; - Family Support - Teen Parent Support Programme Youth New Ross Family Support Project	Community Voluntary	Universal & Targeted 1-3 Universal & Targeted 2-3

Services to Support Youth Mental Health	CAMHS Counselling in Primary Care (CIPC) NEPS Psychology SHIP Suicide Resource Office School Guidance Teachers Youth Services Counselling Service - FDYS	Statutory Voluntary	Targeted 2-4 Targeted 2-3
Policing & Justice	Gardai Garda Juvenile Liaison Officers x 3 Garda Youth Diversion Projects x 3 - Safe Project (Wex Town) - Slaney (Enniscorthy) - Treoin (New Ross) Probation Services	Statutory Statutory Community Statutory	 Targeted 2-3
Youth Services	**FDYS;** - Bunclody Traveller Project - Afterschool - Childcare - Drop In / Café x 2 (Wexford Town, New Ross) - Community Youth Projects x 3 (Coolcots, Enniscorthy, Gorey) - Local Voluntary Youth Club Network - Risk & Resilience Project - Young Womens Project - Youth Counselling - Youth Diversion Project (Enniscorthy) - Youth Information **Foroige** x 9 clubs **Gorey Youth Needs Group;** - Youth and Community Services - Community Childcare Facility - Local Training Initiative **Youth New Ross;** - Family Support Project - Youth Project - Youth Diversion Project	Community Community/ Voluntary Community Community	Targeted & Universal 2-3 Universal 1 Targeted & Universal 2-3 Targeted 2-3

Early Childcare Services	Wexford County Childcare Committee No. Childcare Providers - 134 No. Community Providers – 44 No. Private Providers -90 No. School Age Only Services - 7 No. Offer ECCE – 128 No. Special Needs Preschools – 4 (Wexford, Gorey, Enniscorthy & New Ross) No. Parent & Toddler Groups – 34	Community & Private	Universal 1
Local Authority	Arts Department Community Development Comhairle na nOg (FDYS) Economic Development Environment Housing Library Service x 5 Branches & Mobile Social Workers x 3 Local Sports Partnership	Statutory	Universal & Targeted Hardiker Level 1-2
Domestic & Gender Based Violence	Wexford Rape & Sexual Abuse Support Service Wexford Womens Refuge	Voluntary	Targeted 2-3
Social Housing	Cluid Focus Respond	Voluntary	Targeted & Universal 1-2
Others	Money Advice Budgeting Service (MABS) Wexford Local Development (SICAP and LEADER) **Counselling;** Pieta House Talk to Tom FDYS Youth Counselling Service Its Good To Talk Suicide Resource Office	Statutory Community Community Community Community Community Statutory	Universal 1-2

Section 4: Local Needs Analysis County Wexford

In formulating the Needs Analysis, the CYPSC adopted the following approach : consultation with children and young people, consultation with professionals and utilisation of contemporary local research findings relevant to the age group.

Wexford CYPSC consulted widely with children and young people. In Q. 2 and Q. 3 2015, specifically formulated questionnaires were distributed widely to children and young people. In total there were 1,128 completed questionnaires returned. This included responses to a Standard Questionnaire (for those up to age 24), a Young People & Mental Health Questionnaire (13-24 years), a Comhairle na nOg Questionnaire and an Information & Resources Questionnaire which was distributed to all age groups. Separately, a consultation with the Preschool Sector was conducted by Wexford County Childcare Committee. This was administered to the ECCE Year (3-5 years) and there were 20 respondents.

The Needs Analysis also drew on a number of key pieces of research published at the time which were pertinent to the target age group;

- Connecting For Life: Wexford Suicide & Self Harm Prevention Plan 2016-2020. Quality Matters, 2015

- The Rainbow Report: LGBTI Health Needs and Experiences and Health Sector Response and Practices in the HSE South East. Crowley, Niall. 2015

- Young Wexford People Talking About Sex – Sexual Attitudes and Behaviours of Young People (aged 12-18 years) Living in Co. Wexford. Harvey, Brian and Walsh, Kathy. 2015

- Wexford Socio Economic Baseline Report – Local Economic and Community Plan. AIRO, 2015.

In addition, there were a number of seminars/consultations attended by local professionals which provided useful information;

- "Families in Transition" Workshop, October 17th 2014
- "Youth Working Together" Workshop, February 28th 2014

Agencies have also incorporated "feedback forms" from clients as part of their practice and the information derived from these also informed the needs analysis.

Outcome 1 – Active and healthy, physical and mental wellbeing

The key areas identified by the CYPSC are as follows;

- Mental Health
- Youth Sexual Health
- LGBTI
- Obesity Prevention

Mental Health;

The issue of youth mental health has been identified by Wexford CYPSC as an area of particular concern. In particular there are concerns around the issue of mental health and suicide prevention among young males. This concern is evidence based and the available statistics on the topic indicate that there are grounds for suicide to be a cause of concern in Co. Wexford.

The "Connecting For Life: Wexford County Suicide and Self Harm Prevention Plan 2016-2020", outlines that the rate of suicide in Wexford is above the national average. The National Office for Suicide Prevention in their 2014 Annual Report provides a three year "moving average" figure for suicide. Based on the most recent data available, the suicide rate in Wexford was the fourth highest in the country, behind Limerick City, Cork City and Kerry. The suicide rate for males and females combined in Wexford in 2013 was 15.7% as opposed to the national figure of 10.3%. This can be broken down into 24.8% male (17.4% national figure) and 6.8% female (3.4% national figure).

Nationally, the topic of suicide has been raised in the public profile in recent years. The National Office for Suicide Prevention outlines in their Annual Report 2014, that "since 2007, particularly since the onset of the economic recession in Ireland in 2008, there has been an increase in the suicide rate in Ireland. The increase observed between 2007 and 2012 can be wholly attributed to an increase in the male rate of suicide".

Also of note is the strong relationship between suicide and self harm. "There is a strong relationship between suicide and prior self-harm; people who are treated for self-harm are far more likely to die by suicide compared to people in the general population and repeated deliberate self-harm is one of the strongest risk factors for death by suicide. Repetition of self-harm is more concerning and a stronger risk factor for subsequent suicide" (Connecting For Life, p.9).

From a national perspective, the "State of the Nations Children Report 2014", outlined that in Ireland in 2013 there were 13 suicides by children aged 10-17. Over the five year preceding period from 2009-2013, the number and rate (per 100,000) of suicides was consistently higher among boys. (SONC, p.153)

The same report also presents figures on deliberate self-harm and states that in 2013, twice as many girls as boys presented at emergency departments following deliberate self-harm. (SONC, p.155)

Young people themselves have identified mental health as a concern. In the CYPSC public consultation that was targeted at "seldom heard" young people, 53.46 % of young people indicated that they were concerned about the issue of mental health.

Youth Sexual Health;

Youth Sexual Health has been clearly identified as a key issue that needs to be addressed. Wexford currently has the highest rate of teenage pregnancy in the South East. In 2016, 59 teenage girls (under the age of 20) became mothers. In the three years 2012-2014 Co. Wexford had 209 teen pregnancies. When this is compared to surrounding counties, the figures are quite stark. Waterford with a population of 113,795 had 121 teenage pregnancies in the same time-frame, Carlow/Kilkenny (pop. 150,031) had 148 and South Tipperary (pop. 88,432) had 95.

A "scoping" exercise was carried out by Tusla Child & Family Agency to investigate the viability of setting up a Teen Sexual Health Project in Co. Wexford in 2015. This further reinforced the need for a tailor-made "Youth Sexual Health" Project in Co. Wexford. It noted the importance of working with existing service providers in order to maximise benefits for young people to provide a confidential, non-judgemental service to young people. Essential components of the service would include clinical services, counselling, special issue group-work and healthy eating and exercise.

It should also be noted that key information on this topic was also sourced through a piece of research recently commissioned by the Wexford Rape & Sexual Abuse Support Service: "Young Wexford People Talking About Sex".

The research was conducted during Spring 2015 using an online survey (575 respondents) and focus groups from schools and informal youth settings (81 participants). Consultations also took place with health professionals, the Gardai and voluntary organisations.

One of the key findings of the research was that the young people who were consulted were generally critical of the quality and quantity of school-based sex education. Among their key criticisms were that it was too little, too late, delivered in inappropriate settings, with insufficient attention given to relationship issues.

"This research identified the need for an independent, confidential, non-judgemental service that could be readily accessed by young people in the county, combining functions of information, advice, support, specialised help and clinic (STI's) (p.66)".

It also highlighted the need for parents to be better equipped to guide their children in the area of sexual relationships – especially important given the role of parents in influencing behaviour.

LGBTI Young People;

Wexford CYPSC has identified LGBTI young people as a group that often experiences social exclusion. Although frequently grouped together – lesbian, gay, bisexual, transgender and intersex young people actually have very different needs. The common denominator for all groups is that they experience barriers to accessing effective health services.

"The Rainbow Report" which was commissioned by the HSE Social Inclusion Unit in 2015, aimed to better understand the experience of LGBTI people in relation to the health services in the region. Their findings demonstrated that a number of barriers exist for LGBTI people in trying to access services including;

- Presumptions of heterosexuality by health service providers.
- Negative experiences on disclosure of sexual identity or of issues of gender identity.
- Lack of recognition for same-sex partners as next-of-kin.
- Failure to create a welcoming environment for the diversity of sexual and gender identities.
- Lack of a treatment pathway for trans-people.
- Inappropriate surgical interventions for intersex people.

In addition, LGBTI people have been identified by the HSE and NOSP as a specific group for whom suicide is an increased risk. The "Connecting for Life" strategy outlines that the Royal College of Psychiatrists in Ireland found that LGBT young people were over seven times more likely to have experienced suicidal ideation, have engaged in suicidal acts or experienced a mood disorder than young people with a heterosexual orientation (p. 9).

Childhood Obesity;

Childhood obesity has been identified as an issue of concern for the CYPSC. Nationally, the issue of childhood obesity has also gained prominence. The National Longitudinal Study of Children "Growing Up In Ireland" (GUI) notes that Ireland, similar to other countries, has experienced a significant increase in the prevalence of overweight and obesity among children and adolescents in recent decades (Executive Summary, p. 1). This can be attributed to an increasingly sedentary lifestyle and the increased consumption of high fat, low cost processed foods. The negative effects of over-weight and obesity are well documented and it is widely acknowledged that excess weight in childhood can have serious health consequences in adulthood.

The GUI Report identified that girls were more likely to be over-weight (22%) or obese (8%) than boys (17% and 5%). It also highlighted pronounced social class inequalities in the prevalence of over-weight and obesity among 9 year olds. 19% of boys and 18% of girls from professional households are overweight/obese. This increases to 29% for boys and 38% for girls from semi and unskilled social class households.

The CYPSC consultation revealed that 47.69% of the "seldom heard" young people, identified "unhealthy lifestyles" as an issue that they are worried about. Locally, one of the key obstacles identified by community dieticians in relation to the treatment of

overweight/obesity among children is distorted perception about what constitutes overweight / obese. This is reiterated by the GUI Study which found that 54% of parents of overweight children and 20% of parents of obese children report that they are "about the right weight for their height". Consequently any strategy to address childhood obesity will have to address public perception as well as the influence of the local food environment and sedentary lifestyles.

For the local context, the table below outlines the referrals for overweight and obese children referred to Co. Wexford Community Dietetic Services 2014-2016. The increase in referrals over the three years may be partly attributed to the increased availability of Obesity Management Training.

Table No. 12: Referrals Received for Children in relation to Overweight and Obesity

Network	2014	2015	2016
Wexford	0	7	27
Enniscorthy and New Ross	21	31	31
Gorey	14	7	15
Total	35	45	73

Source : HSE Dietetic Service, Wexford

Outcome 2 : Achieving Full Potential in Learning and Development

The key priorities are identified as follows;

- Supporting the development of Early Years Literacy and Numeracy
- Supporting education access and completion routes for children and young people from birth to 24.

The links between literacy and social inclusion have been clearly documented in various research findings and are illustrated in "Deis : An Action Plan for Educational Inclusion" 2005 and more recently 2017. Low levels of literacy have been identified as impacting significantly on an individuals personal, social and economic well-being. Poor literacy and numeracy skills are early warning signs of potential early school leaving, which in turn can lead to unemployment and social exclusion.

The most recent analysis of the education sector in Co. Wexford has been conducted by Wexford Co. Co. through the AIRO Report, 2015. This clearly demonstrates that there is a significant difference between educational attainment levels in Wexford and the State with Wexford having much less favourable outcomes compared to the State average across all stages of education. In particular, the progression rate from Secondary to Third Level is one of the lowest rates in the country. According to the results of the Irish Times Feeder Schools

Report (2015), the progression rate in Wexford was 74% which is well below the national average.

The Needs Analysis has highlighted a number of issues. Similar to other counties, Wexford has also suffered loss of resources for young people requiring additional supports. Some examples are the budgetary cuts to the School Completion Programme and the loss of the Visiting Teacher for Travellers. This has had a more acute impact in Co. Wexford given the large Traveller population in the county and the fact that there are 663 Traveller children in the age group 0-17 years. The Education Welfare Service has also highlighted the very significant issues in relation to poor transferral and retention rates from Primary to Secondary School for Traveller children. School Completion Co-ordinators report that it is increasingly difficult to meet the needs of their target group given the reduction in budget. The Visiting Teacher for Traveller post was regarded as being pivotal in facilitating Traveller children to participate in mainstream education. Visiting Teachers performed an important role in breaking down barriers between school and the home environment and in supporting children particularly during transition phases in the education system. Their loss has left a gap in services.

Schools are obliged by law under the Education Welfare Act (2000), to submit reports on school attendance to the Education Welfare Service of Tusla, Child & Family Agency. Principals are obliged to report any non-attendance at school for a cumulative total of 20 days or more. Tusla Education Welfare Service reports that in the school year 2015/2016, 203 referrals were received in relation to children residing in Wexford. They were received from schools, other agencies and also from parents who self-referred. As with many other services, there is limited resourcing within the Education Welfare Service. Currently there is one full time and two half time posts to provide a service for the entire county. When the EWO's covering the area had capacity in their caseload, the referrals were allocated for Initial Assessment without delay. However, given the large number of referrals in the year 2015/2016, some were placed on a waiting list and allocated when possible. As of August 2016, there are 16 individuals on a waiting list.

Concern was also raised about young people under the age of 16 who currently do not have a school place and are not engaged in alternative education. Such young people are considered to be at higher risk of experiencing social exclusion and mental health problems. Concerns were also raised for the young people who may not be attending a DEIS school (20 designated Primary Schools and 8 designated Post Primary Schools in Wexford) but who are nevertheless experiencing poverty and social exclusion. Due to the young persons geographical location and the fact that they may not be in the catchment area for a DEIS school, they are not benefitting from any of the additional resources that would otherwise be available to them.

Having considered the evidence, the CYPSC have decided to focus on two key issues – supporting the development of early years literacy and numeracy and supporting education access and completion routes throughout the education system as these appear to be the areas where greatest impact can be made. This aligns with the "Better Outcomes Brighter Futures" Transformational Goal in relation to supporting effective transitions.

Outcome 3 : Safe and Protected from Harm

The key priorities are identified as follows;

- Restorative Practice
- Rural Isolation – Lack of Family Support Services
- Early Years Parenting
- Domestic Violence
- Bullying and Cyber-Bullying

Restorative Practice;

Restorative Practice is a way of working with people that is based on the philosophy that when people are given ownership and responsibility for their actions, there is a greater likelihood of positive, long-term interaction with other people, the development of empathy with others and the establishment of healthy and productive communities.

The development of Restorative Practice as an alternative to imposing criminal records / sanctions on young people has been identified as a priority by Wexford CYPSC. In addition, the development of an action regarding Restorative Practice was also included in the Suicide Prevention Strategy: "Connecting for Life". As a result, a Steering Group of interested organisations has been formed (Wexford Restorative Practice Partnership) and is being led by the Cornmarket Project. This is an organisation that works with people to reduce substance misuse, criminality and social exclusion in Co. Wexford. During 2016, Wexford Restorative Practice Partnership organised a number of information sessions and it hosted a conference on the topic of RP in October 2016. This was attended by 60 individuals representing the community/voluntary and statutory sector. The Restorative Practice Partnership is developing a strategic plan and is exploring how the Restorative Practice model can be further developed in the county.

Rural Isolation and Lack of Family Support Services;

A key theme that emerged during the Needs Analysis was rural isolation and the lack of outreach services and supports to rural areas. County Wexford has four main urban towns : Wexford Town, New Ross, Enniscorthy and Gorey. While Wexford Town is regarded as the administrative centre for the county, many services are outreached to the other towns. However, there are vast swathes of rural County Wexford that have no local access to services or supports. The isolation in these areas is reinforced by the lack or regular public transport links to the towns. In some instances, public transport is available but the cost in prohibitive. Two areas in particular have been identified by both Wexford Local Community Development Committee and Wexford CYPSC as being particularly in need of support – Bridgetown in South Wexford and Riverchapel in North Wexford. Both areas are characterised as having high levels of deprivation and a lack of social infrastructure. These elements can increase risk for vulnerable families such as lone parent families, families affected by unemployment or domestic violence or where there are child protection concerns. Research shows that the lack of availability of early intervention and preventative type services contributes to problems escalating in families to the extent that a child

protection response is required. This intervention may have otherwise been prevented if family support was available.

Early Years Parenting;

Earlier intervention and prevention is identified as one of the key transformational goals in "Better Outcomes Brighter Futures". It is based on the premise that by intervening at a younger age or at points of vulnerability, more extreme interventions will be avoided at later stages.

During the needs analysis, early years parenting was identified as a key area requiring attention. During the course of the needs analysis, concern was raised at the reduction in availability of Parenting Programmes throughout the county. One of the key providers, Childcare Network Loch Garman ceased trading at the end of 2015 and this has left a gap in terms of the provision of group-work Parenting Programmes throughout the county.

However, parenting can be viewed along a spectrum with the needs of parents varying according to their personal circumstances. Parenting Courses are only one aspect of provision. Some situations need more immediate intervention or more intense support. The needs analysis also pointed to the fact that "parents" are not a homogenous group and that there are a range of parents that may need additional or different supports such as parents from the Traveller or Roma community, parents whose first language is not English etc.

Domestic Violence;

Womens Aid defines domestic violence as a situation where one person uses abuse to control and assert power over their partner in an intimate relationship. It can take the form of physical, emotional, sexual or financial abuse. Research conducted on behalf of Womens Aid indicates that domestic violence, while largely hidden, is a widespread problem in Ireland. "Making the Links" (1995) highlighted that one in five women who have been in a relationship have been abused by a current or former partner. More recent research would indicate that this trend has continued with social media (email, text and the web) increasingly being used as a tool for domestic violence.

Locally, Wexford Womens Refuge provides an information and support service and emergency accommodation to women and children experiencing domestic violence. In 2016 the Refuge accommodated 35 women and 45 children. 572 Helpline calls were answered and support was provided to 61 clients through the outreach service. A court accompaniment service was also provided to 39 women. However, the Refuge is under severe pressure in terms of demands for its accommodation service. It currently has four family rooms which are available for domestic violence and homeless clients. In 2016, 246 women and 350 children could not be accommodated at the Refuge due to lack of space. This poses serious questions in terms of the safety of women and children fleeing domestic violence situations.

There is a long history of the voluntary / community sector highlighting the issue of domestic violence in Co. Wexford. The Local Area Network operated for many years and this later became the Wexford Support Network on Domestic, Sexual and Gender Based

Violence (WSN). Within the Tusla Child Protection Social Work Dept., it has been noted that domestic violence is often a factor within Social Work referrals. While it may not always be the presenting issue, it is often present within the home environment of a referred case. Acknowledging this fact and the desire to respond to this issue more appropriately, the Social Work Dept. have been key drivers in establishing a Domestic Violence Forum. The aim of the Forum is to agree on a model that will assist multiple agencies to identify risk in domestic violence situations appropriately and consistently. The Maddie Bell model of intervention has been adopted and training has already been rolled out. The ultimate aim is to ensure consistency of response to domestic violence across agencies and ensure better outcomes for women and children.

Bullying and Cyber-Bullying;

Cyber-bullying refers to bullying carried out using the internet, mobile phones or other technological devices. This is a relatively new form of bullying and is more difficult to monitor and address than traditional types of bullying as it occurs in the "virtual" world. The impact on the individual is the same however and it can result in social, emotional and physical stress.

Bullying and in particular, cyber-bullying were identified as key issues during the consultation with young people in general and also with "seldom heard" young people. 58% of this cohort reported that they were worried about cyber-bullying. The prominence of this issue among young people in Co. Wexford is reflective of the national picture. In a recent survey conducted by Vodafone in September 2015, two thirds of respondents said that online victimisation was worse than face to face bullying. The survey also found that Irish teenagers appear more likely to be the victims of cyber-bullying than teens in other countries. One in four Irish teens has been bullied as opposed to one in five across eleven other countries (Irish Times, Article 22 September 2015).

In recent years, Wexford Comhairle Na nOg identified cyber-bullying as an issue that they wished to address. They have achieved this through the development of an information pack, campaign and strategy on the topic of cyber-bullying.

Outcome 4 : Economic Security and Opportunity

Key issues to emerge are as follows;

- Early School Leaving
- Youth Unemployment

Early School Leaving;

Throughout the duration of the Needs Analysis, particular concern was expressed in relation to early school leavers and in particular, the cohort of young people who leave school before the age of 16 and find themselves not in education, employment or training (NEET). These young people commonly perceive that there is nowhere for them to go. Anecdotal evidence suggests that the longer young people remain cut off from the education and employment system, the more difficult it is for them to assimilate into the system in the

future. The damaging effects of long term unemployment are well documented by groups such as the INOU[2] and with 66.6% of 15-19 year olds in Wexford unemployed as opposed to the State average of 58.8%, there is reason for concern about this issue in the county.

Youth Unemployment;

Between the Census years 2006 and 2011, the unemployment rate in Wexford increased by 180% or 10,399 persons (AIRO, p.178). This is largely attributable to the economic recession and in particular, the collapse in the construction industry. The rate of youth unemployment in Ireland increased by 74% in the same intervening period, with 39% of those aged between 15 and 24 years of age, out of work.

Wexford CYPSC recognises the importance of this issue and acknowledges that it is a real area of concern for young Wexford people. During the CYPSC consultation, 61% of young people in the "seldom heard" category reported that they were worried about youth unemployment in the county. 64% also reported that they were concerned about "poverty/money".

Wexford CYPSC is committed to supporting the achievement of Outcome 4. The CYPSC will work with its partners and support the work of the Local Community Development Committee in the achievement of the actions included in the Local Economic Community Plan.

Outcome 5 : Connected, Respected and Contributing to their World

Key issues to emerge are as follows;

- Youth Participation

Youth Participation;

In line with the "National Strategy on Children and Young Peoples Participation in Decision Making 2015-2020", Wexford CYPSC aims to ensure that the voice of young Wexford people is heard throughout the duration of the plan and the local implementation of actions across the five national outcomes. To achieve this, the CYPSC will work with its partners and mandated structures such as Comhairle Na nOg. The CYPSC is also anxious to explore ways of engaging more traditionally "seldom heard" young people and this will be explored and developed throughout the duration of the plan.

[2] Irish National Organisation of the Unemployed

Gaps in Services

The following list outlines some of the gaps in local services that have been identified by CYPSC members and working groups. It is important that they are noted as they may prove to be obstacles to the achievement of outcomes.

- Waiting lists for many statutory services – mental health and counselling services were specifically identified as being contributory factors to increasing levels of stress on families.

- The level of parental education required to equip parents to provide guidance to their children in the area of sexual relationships is inadequate.

- There is a lack of a co-ordinated approach to teen sexual health education in the county.

- There is a shortage of Post Primary School places in Co. Wexford. This is increasing levels of stress and anxiety for parents and young people in the county – particularly in Wexford Town.

- There is a lack of services / opportunities for young people who have left the education system and are under the age of 16.

- There is a lack of services and supports in rural areas – areas of rural Co. Wexford experiencing social deprivation with little of no resources and poor / unaffordable transport links.

- Continual budgetary cuts over recent years have resulted in increased pressure being placed on services that address the needs of children, young people and families.

- There is a deficit in terms of the availability of a range of parental supports in the county.

Section 5: Summary of Children and Young People's Plan for County Wexford

Outcome Areas	Local Priority Areas*
1. Active and healthy, physical and mental wellbeing	Youth Sexual Health Obesity Drugs & Alcohol Mental Health LGBTI Family Support Services
2. Achieving full potential in learning and development	Literacy at Early Years Transitional stages of Education System Early School Leaving
3. Safe and protected from harm	Early Years Parenting Domestic Violence Rural Isolation PPFS Bullying / Cyber-bullying Restorative Practice
4. Economic security and opportunity	Early School Leaving Youth Unemployment
5. Connected, respected and contributing to their world	Participation

Change Management	Local Priority Areas
Change Management	Communications Data Collection and Dissemination Equality and Human Rights

Section 6: Action Plan for County Wexford Children and Young Peoples Services Committee

Action Plan for Wexford Children and Young People's Services Committee

Outcome 1: Active and healthy, physical and mental wellbeing

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Young People and Sexual Health	Reduce the number of teenage pregnancies in the CYPSC area and increase awareness of STI's.	Reduction in number of teenage pregnancies.	10% reduction in teenage pregnancies per 1000 population of 14 -17 year olds in 2019.	To support the establishment of a dedicated sexual health project for young people in Co. Wexford.	2018	**(Lead) :** Tusla Child & Family Agency **Partners;** Health & Diversity Working Group/Task Group	The National Sexual Health Strategy 2015-2020 and Action Plan, 2015-2016. National Obesity Strategy "Young Wexford People Talking About Sex" Research Report, 2015 Co. Wexford Local Economic and Community Plan	Outcome 1 : Active and healthy with physical and mental well being. Transformational Goal : Earlier Intervention & Prevention
		The number of Youth Workers and Family Support staff trained.	Training delivered to 50 Youth Workers / Family Support Staff.	Delivery of "Squashy Couch" training to Youth Workers and Family Support staff.	2016			
	To develop a locally accessible STI service in Wexford.	Availability of accessible STI services.	STI diagnostic and treatment service established.	Explore the establishment of STI diagnostic and treatment services in Wexford.	2019			
	To increase the capacity of Traveller Community Health Workers to address sexual health issues within their own community.	Full participation by Traveller Community Health Workers.	Traveller Community Health Workers have access to a culturally appropriate Sexual Health Programme.	Consultation with Traveller Community Health Workers re: contents of course. Development, delivery and evaluation of "Squashy Couch" programme tailored to the cultural needs	Q. 2 2016 Q. 3 2016	**(Lead) :** Tusla **Partners;** Traveller Community Health Workers Squashy Couch	South East Traveller Health Unit Strategic Plan 2015-2020, HSE	

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 1: Active and healthy, physical and mental wellbeing								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
Roma Community and Sexual Health	To increase the capacity of the Roma community to address sexual health issues within their own community.	The number of individuals from the Roma community who participate.	One 6 week programme delivered to the Roma community.	of the Traveller Community Health Workers. Consultation with Roma Community. Development, delivery and evaluation of the "Squashy Couch" education programme tailored to the needs of the community.	Q.1 2018	**(Lead) :** Tusla **Partners;** HSE Social Inclusion Squashy Couch Barnardos TPSP	The National Sexual Health Strategy 2015-2020 and Action Plan, 2015-2016.	Outcome 1 : Active and healthy with physical and mental well being. Transformational Goal : Earlier Intervention & Prevention
Promoting Positive Sexual Health education	To improve access to accurate up to date information on positive relationships and sexual health.	The number of young people accessing the "Squashy Couch" education programme.	Increased awareness of positive relationships and sexual health information reported by participants.	Provision of additional "Squashy Couch" Sexual Health Education Programmes to DEIS schools/centres in Co. Wexford.	Ongoing and to be reviewed in Autumn 2016	**Partners;** Barnardos Youth New Ross DEIS Schools SWWFRC FDYS		Outcome 1 : Active and healthy with physical and mental well being. Transformational Goal : Earlier Intervention & Prevention
Roma Community – Health	To develop and deliver a Pilot Project entitled "Its Your Choice" aimed at exploring and	The number of Roma who participate.	Participation by 8 members of the Roma community.	Consultation with the Roma community and design of the programme.	Q.1 2017	**(Lead) :** FDYS - Roma Health Advocate **Partner;** HSE Social Inclusion	Healthy Ireland: A Framework for Improved Health and Wellbeing, 2013 – 2025.	Outcome 1 : Active and healthy with physical and mental well being. Transformational

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 1: Active and healthy, physical and mental wellbeing								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
	addressing mental, physical and sexual health needs.			Delivery of 6 week programme using experiential and creative methods.			National Sexual Health Strategy National Obesity Strategy	Goal : Earlier Intervention & Prevention
Childhood Obesity Prevention	To increase awareness of childhood obesity and referral pathways among health professionals and leaders in the community/ voluntary sector	The number of obesity prevention and management training sessions attended by staff from a range of disciplines.	Provision of 2 obesity and management training sessions per annum.	Provision of obesity prevention/ management training to a range of health disciplines / community leaders working with the Roma and Traveller communities.	2017 : Planning Phase 2018 : Roll out of training	**(Lead) :** HSE Dietetic Service	Healthy Ireland: A Framework for Improved Health and Wellbeing, 2013 – 2025.	Outcome 1: Active and healthy with physical and mental well being. Transformational Goal : Earlier Intervention & Prevention
	To increase awareness of Childhood Obesity in Preschool children.	Number of parents attending workshops from the target areas.	15 parents / caregivers attending each workshop. Evaluation rating of 7 or higher on the effectiveness of the information received.	Delivery of information workshops to parents in two key locations in North and South Wexford.	2017– 2019 (annually)	**(Lead) :** Wexford County Childcare Committee		
	To explore the development of exercise / activity programme with	Increased activity and lower levels of obesity / over-weight among	1 Tutors Day delivered to 16 Preschool Workers annually	Delivery of an annual "tutors day" to 16 Preschool Workers re: Buntus	2017-2019 (annually)	**(Lead) :** Local Sports Partnership **Partner:** WCCC	Healthy Ireland: A Framework for Improved Health and Wellbeing, 2013 –	Outcome 1 : Active and healthy with physical and mental well being.

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 1: Active and healthy, physical and mental wellbeing								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
	Pre-Schools, Parent and Toddler Groups	preschoolers.		programme			2025.	Transformational Goal : Earlier Intervention & Prevention
	To increase awareness re: active play and nutrition to Preschool Services.	Increased physical activity and promotion of healthier food choices within preschool settings.	1 mail-out and / or email each year.	Dissemination of information on active play and nutrition to the Preschool and Afterschool sector.	2017-2019 (annually)	**(Lead)** : WCCC		
	To reduce the number of teenagers presenting as over-weight / obese.	Reduction in obesity referral rate for teenagers.	10% reduction in teenage obesity referrals.	Establish working protocols on obesity prevention for Youth Sexual Health Project Staff. Develop a programme incorporating physical activity and healthy eating to be rolled out in schools.	2017 2018 - 2019	**(Lead) :** Tusla **Partners;** Health & Diversity Working Group	The National Sexual Health Strategy 2015-2020 and Action Plan, 2015-2016. National Obesity Strategy	
Drugs & Alcohol	To support the implementation of the recommended actions arising from the ongoing research	Availability of new specific supports / programmes for children of problematically	Identification of the number of children affected and their specific needs.	Development of a strategy to address the identified needs.	Ongoing	**(Lead) :** SERDATF **Partners;** Research Steering Group	South East Regional Drug and Alcohol Task Force (SERDATF) 2016/17 Plan.	Outcome 1: Active and healthy with physical and mental well being.

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 1: Active and healthy, physical and mental wellbeing								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
	into the needs of children of problematically drug/alcohol using parents.	drug/alcohol using parents.	Identification of effective evidence based interventions to respond to their needs.	Support the implementation of the research findings.				Transformational Goal : Earlier Intervention & Prevention
Nicotine	To increase the capacity of youth and community workers to address the issue of teenagers smoking.	The number of Youth and Community Workers who attend training.	10 Youth and Community Workers attend each training session.	To roll out the "Smoking Cessation" (Brief Intervention) training to youth workers annually.	2016-2019 (annually)	**(Lead)** : HSE Smoking Cessation Officer **Partner** : Health & Diversity Working Group	Tobacco Free Ireland : Action Plan 2013	
Access for children and young people to mental health services	To improve access to mental health services for children and young people.	The number of cases referred for assessment.	Integrated referral and assessment system established.	Establish links with the Waterford CYPSC Working Group to explore the learning from their work. Support the development of a common assessment tool / protocol for use by all services.	2017-2019	**(Lead)**: Young People and Mental Health Working Group / Task Group.	A Vision for Change: Report of the Expert Group on Mental Health Policy, 2006.	Outcome 1: Active and healthy with physical and mental well being.
Mental Wellbeing	To support and educate young people and their parents / guardians about mental well-being in their schools and community.	The number of programmes of awareness and education delivered to young people and parents/guardians in school and	8 programmes delivered in Primary Schools e.g. "Mindout". 2 programmes delivered in	Conduct research re: what programmes and supports are available. Identification of gaps and development of	2017 – 2019	**(Lead)**: Wexford Family Resource Centres x 5.		Outcome 1: Active and healthy with physical and mental well being. Outcome 3: Safe and Protected from

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 1: Active and healthy, physical and mental wellbeing								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
		community settings.	Secondary schools e.g. "Mindout"/ "Challenging Minds". 5 programmes delivered in Family Resource Centres e.g. Stress Management, Positive Living.	responses to priority needs. Development of co-ordinated programme of work based on needs assessment.				Harm.
	To increase the availability of information on Mental Health services for young people. To highlight young peoples mental health issues with relevant service providers.	The number of young people who complete the survey.	Surveys distributed to all secondary schools in Co. Wexford.	To design and distribute a questionnaire targeted at young people regarding mental health services available. To collate findings and highlight identified issues with relevant service providers.	Q. 3 2017	**(Lead)** : Comhairle na nOg (supported by FDYS)	Better Outcomes Brighter Futures "Connecting for Life" Wexford County Suicide and Self Harm Plan 2016-2020. Comhairle na nOg Plan Dail na nOg Plan	Outcome 1 : Active and healthy with physical and mental well being
Promoting Positive Mental Health with Young Men.	To assist a broad range of practitioners to effectively connect with young men on mental health and wellbeing issues.	Number / range of frontline staff who participated in training.	10% reported increased awareness reported among participants of "how" and "why" it's important to engage with young men.	Link with Men's Development Network and Men's Health Forum in Ireland. Develop a strategy for the delivery of	2017– 2019 annually	**(Lead):** Young People and Mental Health Working Group.	"Engaging Young Men Project" A Report on the Mapping Exercise carried out in Ireland during 2014.	Outcome 1: Active and healthy with physical and mental well being.

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 1: Active and healthy, physical and mental wellbeing								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
Improved Mental Health in Rural Areas	Young people are more resilient and informed regarding mental health.	The number of young people attending facilitated sessions. The number of young people involved in delivery of workshops. Availability of a resource pack for youth leaders, teachers and parents.	36 young people to attend sessions. 36 young people involved in workshops. 100 resource packs to be distributed.	training in Co. Wexford. **Phase 1**: Facilitation of young people to explore mental health issues using drama and other creative processes. **Phase 2**: Show-casing the workshops developed by the young people thereby developing a series of opportunities for dialogue amongst young people and other stakeholders throughout the county. **Phase 3**: Development of the resource pack for teachers and youth leaders.	Q. 3 2017	**(Lead) :** FDYS Youthwork Ireland **Partner;** Youth New Ross	Better Outcomes Brighter Futures FDYS Strategic Plan	Outcome 1 : Active and healthy with physical and mental well being

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 1: Active and healthy, physical and mental wellbeing								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
LGBTI Young People - Health Promotion	To increase visibility of LGBTI within health care settings and to increase the capacity of healthcare professionals in relation to the issue.	The number of healthcare settings displaying "LGBTI friendly" literature. The number of training modules delivered per annum.	Visibility of LGBTI literature in healthcare settings to communicate openness to diverse sexual and gender identities. Increased capacity reported by professionals re: communication with LGBTI clients, knowledge of LGBTI issues and values of equality and diversity.	Increasing visibility of LGBTI literature (posters and stickers) in medical settings – GP Practices, Hospitals and Primary Care Centres. Delivery of training modules on LGBTI issues to health professionals and admin staff in health settings.	Ongoing for duration of Plan. Ongoing for duration of Plan	**(Lead) :** HSE Social Inclusion/ Primary Care **Partners;** Health & Diversity Working Group	"The Rainbow Report : LGBTI Health Needs and Experiences and Health Sector Responses"	Outcome 1 : Active and healthy with physical and mental well being.
LGBT Youth Provision **- Support and Awareness**	To increase supports available for LGBTI young people in Co. Wexford	Availability of LGBT specific information and supports.	An established county-wide service providing LGBT information and training supports.	Provision of training and information supports towards the establishment of local support groups for young LGBTI people.	2017-2018	**(Lead)**: FDYS **Partner;** Young People and Mental Health Working Group	"The Rainbow Report : LGBTI Health Needs and Experiences and Health Sector Responses"	Outcome 1: Active and healthy with physical and mental well being.

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 1: Active and healthy, physical and mental wellbeing								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
	To increase the capacity of professionals on how to integrate an LGBT policy or service into their organisation	The number of professionals working with young people trained on how to integrate an LGBT policy and or service into their organisation.	18 Training programmes to be delivered.	Delivery of training on how to integrate LGBT Policy/Service	2017-2018			
	To increase capacity of youth / education sector to address LGBT issues.	The number of presentations delivered.	10 presentations to be delivered.	Delivery of presentations to all CFSN's, youth services and 2nd Level Schools on LGBT youth services available to them	2016-2018			
	To raise awareness and opportunities for young people within the LGBTI community to gain access to supports available within co. Wexford and to influence the method of delivery.	The number of workshops delivered	All Transition, 5th and 6th Year Students in 6 Secondary Schools in Co. Wexford.	Delivery of workshops on attitudes and values towards LGBTI	Q.4 2016	**(Lead):** FDYS LGBTI Worker **Partners;** Young People and Mental Health Working Group		
		The number of localised support networks established.	6 Networks to be developed within the school setting.	Development of a range of localised support networks.	Q.1 2017			
		Number of Resource Packs distributed / down-loaded.	2 Packs per school to be downloaded.	Creation of a Resource Pack that will be made freely	Q.2 2017			

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 1: Active and healthy, physical and mental wellbeing								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
				available on the CYPSC and FDYS websites.				
Providing Family Support Services to Teen Parents in all of Co. Wexford.	To extend the current Teen Parent Support Programme (TPSP) from North Wexford to include South Co. Wexford supported by Waterford Student Mothers Programme.	The number of referrals to TPSP The number of young parents and their children accessing the programme	Improved child development outcomes for teenage parents and their children living in South Wexford area.	To pilot the outreach service of the TPSP in South Wexford.	2017	**(Lead) :** Barnardos **Partner;** Tusla Child & Family Agency	Investing In Families Supporting Parents to Improve Outcomes for Children – Child & Family Agency, 2013	Outcome 1 : Active and healthy with physical and mental well being

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 2: Achieving full potential in learning and development								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
Emotional Literacy in Early Years	Increase awareness among parents and caregivers of emotional literacy in the early years	The number of participants attending workshop. Evaluation findings	20 parents and caregivers attending the workshop. Evaluation rating of 7 or higher on the effectiveness of the information received.	Development and provision of a workshop on Emotional Literacy for parents	Q.3 2017	**(Lead) :** Wexford County Childcare Committee **Partners;** Barnardos	Better Outcomes Brighter Futures	Outcome 2 : Achieving full potential in all areas of learning and development
Early Literacy	To ensure that children and families are made aware of the benefits of reading and early exposure to books	The number of participants at events. Increase in library membership. Media coverage	200 participants at events. 3% increase in library membership in 0-5 year olds Coverage in local media(newspapers and radio)	Develop and deliver a "Start Em young" reading and literacy festival for babies and children 0-5 years	Q.2 2017	**(Lead):** Wexford Co. Co. Library Service. **Partner**: Wexford County Childcare Committee, HSE Public Health Nursing, Parent and Toddler Groups	National Literacy and Numeracy Strategy. Right to Read Campaign	Outcome 2: Achieving full potential in all areas of learning and development.
Early Literacy	To target children who may not have access to books in the home and ensure that they are introduced to reading for pleasure	The number of children attending these programmes	5 schools / 150 participants	Introduction of a "Literacy through Sport" Programme for 5 pilot primary schools in partnership with the Local Sports Partnership	Q.3 2018	**(Lead)**: Wexford Co. Co. Library Service **Partners;** Local Sports Partnership School Completion Programme	Healthy Ireland : A Framework for Improved Health and Wellbeing 2013-2025	Outcome 2: Achieving full potential in all areas of learning and development.
Early Literacy	To develop awareness among parents of the importance of early literacy.	The number of views on social media by parents and caregivers and those with an interest in	100 views on social media	Develop a multi-media project that can be shared on social media raising awareness among	Q. 1 and Q.2 2018	**(Lead)** Wexford County Childcare Committee	National Literacy and Numeracy Strategy Right to Read	Outcome 2: Achieving full potential in all areas of learning and development.

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 2: Achieving full potential in learning and development								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
		early literacy development. The number of "likes" and "shares" on social media. The number of links to other websites	100 "likes" and 20 "shares" 10 links to other websites	parents of the value of promoting early literacy with young children		**Partners;** Wexford Campus Carlow I.T., Books 4 Babies, Wexford Co.Co. Library Service		
Early Literacy	To evaluate the "Books 4 Babies" interagency universal book gifting initiative; document the development of the programme to date and make recommendations for the future of the programme.	The availability of an independent external evaluation of the programme to date	To obtain an independent evaluation of the B4B programme that can be used to guide the future development of the programme.	Formulation of Terms of reference in conjunction with B4B Steering Group and relevant stakeholders. Invitation to tender issued. Selection of successful tender and commencement of evaluation. Completion of evaluation	Q.1 2017 Q.2 2017 Q. 2 2017 Q.3 2017	**(Lead):** "Books 4 Babies" Steering Committee	Right to Read Campaign	Outcome 2 : Achieving full potential in all areas of learning and development
Traveller Community and Family Literacy	To improve educational outcomes for children and young people from the Traveller community.	The number of participants in group work.	10 families from the Clonroche area.	Small group work support for parents delivered by tutor working with education packs and responding to the	Q.4 2017	**Lead :** Wexford Local Development **Partners;** HSC, Local Schools	Better Outcomes Brighter Futures. Right to Read	Outcome 2: Achieving full potential in all areas of learning and development.

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 2: Achieving full potential in learning and development								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
	To support parents to engage with their childrens education.			needs of the group.				
Traveller Community and Alternative School Provision Ages 12-18	To improve retention levels at post-primary level.	The number of students progressing from Primary to Post Primary. Increased retention to Junior Cert	Traveller Students from 2 Post Primary schools.	Examination of nationwide courses/models. Development of relevant short courses for new Junior Cycle, where appropriate.	2017	**(Lead)** WWETB **Partners;** Tusla Education Welfare Service, SCP, CEF, WLD Education Co-ordinator	Delivering Equality of Opportunity in School: An Action plan for Educational Inclusion. Report and recommendations for a Traveller Education Strategy.	Outcome 2: Achieving full potential in all areas of learning and development
Children and young people from the Roma community and literacy	To increase the literacy capacity of the Roma community by targeting children and parents through After School supports.	The number of participants on the programme.	Children and young people from 12 families in the Roma community living in the Enniscorthy area	Provision of After-Schools Programme for Roma children in Enniscorthy. WLD Education and Training Team to provide Family Literacy Programme for parents.	Ongoing	**(Lead) :** Wexford Local Development **Partners;** HSE, FDYS Roma Community Health Advocate	Better Outcomes Brighter Futures SICAP	Outcome 2: Achieving full potential in all areas of learning and development.
Support to families whose first language is not English to integrate into the education system	To explore possible supports for families where English is not their first language to facilitate their children entering the Preschool sector.	Availability of a practical tool – either paper based or multimedia for families.	1 practical tool developed.	Consultation with early years sector re: what their needs are. Research supports currently available. Development of tool.	Q. 2 2018	**(Lead) :** Wexford County Childcare Committee	Better Outcomes Brighter Futures	Outcome 2 : Achieving full potential in all areas of learning and development
Information / awareness of Early Years National	To increase awareness of childcare supports	The number of parents enabled to remain in second	30 parents attending each information session.	Facilitation of information awareness session	Q. 4 2017 and Q.2 2018	**(Lead) :** Wexford County Childcare Committee	Better Outcomes Brighter Futures	Outcome 2 : Achieving full potential in all areas

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 2: Achieving full potential in learning and development								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
programme Supports	available. To enable parents to remain in second level education and prevent early school leaving.	level education. The number of children accessing a Tusla registered early years service.	30 Guidebooks distributed to parents.	re: Childcare Supports. Distribution of Guide Books.		**Partners;** Gorey Youth Needs Group		of learning and development
Homework / Afterschool Support for Secondary Students in Riverchapel area.	Expansion of homework club – "Accelerread and Accelerwrite".	An increase in the number of second level students availing of homework support and other after school supports in the Riverchapel area.	15 new participants in Afterschool support.	Provision of a suitable environment for 2nd level students to complete homework. To offer academic support in areas of subject difficulty.	2017 and ongoing.	**(Lead) :** Gorey School Completion Programme	School Completion Programme Annual Retention Plan. DEIS Strategies.	Outcome 2: Achieving full potential in all areas of learning and development.
Educational support for young mothers	To provide additional support to young mothers in education.	The number of referrals to the Student Mothers Programme.	25 Teen Parents and babies	Piloting of the outreach element of the Waterford Student Mothers programme in South Wexford in collaboration with the TPSP.	Ongoing	**(Lead):** Barnardos **Partners;** South West Wexford SCP, Youth New Ross	Better Outcomes Brighter Futures	Outcome 1: Active and Healthy with physical and mental well being. Outcome 2 : Achieving full potential in all areas of learning and development.
Early School Leaving.	To increase accessibility to education for those at risk of early school leaving.	The number of new transport links initiated.	16 students per bus trip.	To work with SCP Officers throughout Co. Wexford to connect students with training by initially developing a link between Bunclody and	2017	**(Lead)** Local Link Wexford **Partners;** SCP Co-ordinators	"Strengthening the Connection in Rural Ireland". Wexford Local Economic and Community Plan The National	Outcome 2 : Achieving full potential in all areas of learning and development.

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 2: Achieving full potential in learning and development								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
				Enniscorthy Monday to Friday.			Transport Authority Transport Plan	
Access to 3rd Level Training and Education.	To increase accessibility to education and training opportunities for students in South West Wexford.	Additional numbers of students using the service.	10-15% increase in numbers using the service.	Promote the availability of daily bus services from the South West Wexford areas to Waterford to facilitate students attending training and education in Waterford.	On-going	**(Lead)** Local Link Wexford **Partners;** NTA, Career Guidance Teachers, School Completion Programme Co-ords, CYPSC	The National Transport Authority Transport Plan "Strengthening the Connections in rural Ireland".	Outcome 2: Achieving full potential in all areas of learning and development.
Increased Participation at 3rd Level.	Increased participation at 3rd level and greater awareness of supports available. To support the transition from Second to Third Level	The number of students attending the Open Night. The number of participants.	40 students at Open Night. 20 students.	Develop and deliver an awareness of the Access programme for 3rd level. Provision of Open Night where information on Access Programme is given by rep. from SUSI Programme. Shadow days where 2nd level students attend college with college student to familiarise themselves with college life	Ongoing 2017	**(Lead)** IT Carlow **Partners;** Careers Guidance Teachers School Completion Programme Comhairle na nOg Wexford Education Network. 2nd Level Schools	Better Outcomes Brighter Futures. Wexford Local Economic and Community Plan 2016-2021 SICAP	Outcome 2: Achieving full potential in all areas of learning and development.

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 2: Achieving full potential in learning and development								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
Increased participation at 3rd Level Education	To support the transition from second to third level.	The number of participants. Improved statistics for college participation.	80 students	"College Experience" Transition Programme delivered to 80 students in 4 DEIS schools to support their transition from second to third level	Ongoing	**(Lead):** Wexford Local Development **Partners;** DEIS Schools	Better Outcomes Brighter Futures Wexford Local Economic and Community Plan SICAP	Outcome 2: Achieving full potential in all areas of learning and development.
Education and training provision for young people across County Wexford.	To increase education and training provision across County Wexford. To increase awareness of opportunities for FET in Co. Wexford.	The number of Youthreach Centres in Co. Wexford. The number of Education and Training Centres established. The number of approved apprenticeships and traineeships available.	New Youthreach Centres established in Gorey. New Further Education & Training Centre in Enniscorthy. Training programmes in Wexford Training Centre related to nationally approved apprenticeships and traineeships commenced.	Increase number of Youthreach Centres. Establish Further Education & Training Centre in Enniscorthy Commence Programmes related to nationally approved apprenticeships and traineeships.	2016 2017 2017	**(Lead) :** WWETB	FET Strategy Plan 2014 - 2019	Outcome 2: Achieving full potential in all areas of learning and development. Outcome 2 : Achieving full potential in all areas of learning and development.

Action Plan for Wexford Children and Young People's Services Committee

Outcome 3: Safe and protected from harm

Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
Development of a Parenting Strategy	To develop and implement a Parenting Strategy across Co. Wexford; to ensure awareness among professionals and parents of what parenting supports are available.	The number and range of Parenting Programmes (both 1:1 and group work programmes) available to parents. Availability of a number of thematic supports that address particular issues that arise for parents including parenting when separated, parenting in the aftermath of domestic abuse, positive behaviour management and sexual health.	Establish a baseline of current service provision in year 1 which will be built on in years 2 and 3 of the plan.	Consult with parents about their needs to ensure their input into proposed actions. Production of a calendar of Parenting Supports in Co. Wexford. Dissemination of information on parenting supports available. Seek resources to roll out targeted supports to deal with specific issues of parenting after separation, parenting in the aftermath of domestic abuse, positive behaviour management etc.	Annually over duration of plan	**(Lead) :** PPFS Working Group **Partners;** Information & Resources Working Group	"Better Outcomes Brighter Futures" "What Works in Family Support": National Guidance and Local Implementation, Tusla Child & Family Agency	Outcome 3: safe and Protected from Harm. Transformational Goal : Support Parents

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 3: Safe and protected from harm								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
Development of a multi-agency response to Domestic Violence	To provide a more effective response to parents and children affected by domestic violence using agreed evidence informed models of good practice.	The number of agencies that engage in the steering group. The number of staff in statutory and community/voluntary sector who attend training on domestic violence.	Participation of core staff from key voluntary and statutory agencies.	Agreement on a model that will assist agencies to identify risk in domestic violence situations appropriately and consistently. Ensure relevant staff members are trained in such models. Delivery of a range of supports to children and families affected by domestic violence. Awareness raising within court system of support services available for those affected by domestic violence.	Ongoing Q. 4 2016	**(Lead) :** Tusla Child & Family Agency Social Work Dept. and Domestic Violence Forum. **Partners;** PPFS Working Group, Wexford Support Network	"Better Outcomes Brighter Futures" Second National Strategy on Domestic, Sexual and Gender Based Violence 2016-2021.	Outcome 3: Safe and Protected from Harm.
Rural Isolation	To implement a model to increase parental participation and to improve accessible service provision to children and families in rural areas with poor transport links.	The number of initiatives that support families in rural areas.	Two initiatives developed (one North and one South of the county) and supported throughout the duration of the Plan.	Establish a pilot in two rural areas to provide an accessible service provision model/hub for families in rural areas.	2016 and ongoing	**(Lead) :** Child & Family Support Networks **Partners;** PPFS Working Group	"Better Outcomes Brighter Futures" SICAP	Outcome 3: Safe and Protected from Harm. Transformational Goal: Support Parents Earlier Intervention and Prevention
Information Workshops for Young People / Parents	To increase the capacity of young people and parents in relation to a range of key issues	The number of workshops held across the county.	Establish a baseline and increase by 20% the number of workshops	Increase and co-ordinate a range of information workshops addressing current issues.	2016 and ongoing	**(Lead)** Child & Family Support Networks	National Sexual Health Strategy Healthy Ireland	Outcomes 1 & 3 1: Active and healthy with physical and mental well being. 3 : Safe and

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 3: Safe and protected from harm								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
	that are impacting on families including mental health, drug awareness and sexual health of young people	The number of young people and parents in attendance at workshops held around the county.	provided annually			**Partners;** Information and Resources Working Group	"Young Wexford People Talking about Sex" "Better Outcomes Brighter Futures".	protected from harm.
Prevention, Partnership and Family Support (PPFS)	To ensure that Child & Family Networks are inclusive of all services working with children and families. To ensure that all service providers are fully aware of PPFS and local referral pathways. To ensure that all families receive a high quality co-ordinated service.	The number of agencies and organisations attending CFSN meetings. The number of staff in agencies and community/voluntary organisations attending the Meitheal training. The number of referrals to PPFS.	Each Network to hold 4 meetings per year. All agencies and organisations involved in PPFS will inform families about Meitheal. All services will use the Meitheal practice model when trained. 100% of presenting families will be offered a service appropriate to their needs.	4 Child & family Support Network areas established and supported in Co. Wexford. Delivery of the 2 day Meitheal Training to Tusla staff and partner agencies. Delivery of PPFS briefings to service providers. Implementation of Meitheal / Social Work Interface Protocol. Development of CYPSC website to include information on PPFS.	Ongoing Ongoing Ongoing	**(Lead)**: CFSN Co-ordinator **Partners** : CFSN Members PSW and CFSN Co-ordinator Tusla Workforce Development PSW and CFSN Co-ordinator Social Work Dept. CYPSC Info & Resources Working Group	"Better Outcomes Brighter Futures" National Service Delivery Model, Tusla Child & Family Agency	Transformational Goal : Earlier Intervention and Prevention Outcome 1 : Active and healthy with physical and mental well being

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 3: Safe and protected from harm								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
Increased awareness among young people about online risks and safety guidelines on cyber bullying.	To increase the capacity of young people to deal effectively with the issues of bullying / cyber-bullying.	The number of young people in receipt of the information packs.	Young people in Co. Wexford have access to supports re: dealing with cyber-bullying.	Development of an information pack, a campaign and a strategy around cyber bullying.	Ongoing	**(Lead) :** Comhairle na nOg (supported by FDYS)	"Better Outcomes Brighter Futures" Comhairle na nOg Plan Dail na nOg Plan Co. Wexford Local Economic and Community Plan	Outcome 1: Active and healthy with physical and mental well being.
Improving the physical and mental wellbeing of young people in Co. Wexford through Restorative Practice.	To establish a Steering Group that will facilitate the development of Restorative Practice throughout Co. Wexford.	Steering Group established.	RP Steering Group established and plan formulated.	Steering Group to formulate a strategic plan for RP.	Q. 2 2017	**(Lead)** Wexford Local Development / Cornmarket Project. **Partners;** Wexford Restorative Practice Partnership	Connecting for Life: Wexford County Suicide and Self Harm Prevention Plan 2016-2020	Outcome 1: Active and healthy with physical and mental well being. Outcome 2 : Achieving full potential in all areas of learning and development

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 3: Safe and protected from harm								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
	To increase awareness of Restorative Practice methodology among youth, community and statutory sectors. To increase utilisation of RP among the education sector.	The number of Information Sessions delivered to workers from the youth, community and statutory sectors. The number of individuals attending RP training The number of schools availing of RP training.	2 Information Sessions delivered to youth, community and statutory sectors. Establish a baseline with 10% increase in uptake of RP training. 12 new schools will adopt the RP approach.	Delivery of information sessions. Delivery of conference Delivery of training. Delivery of training	Q 2 – Q3 2016 Q.4 2016 2017 and ongoing 2017 and ongoing			
Development of Youth Work Development Facilities	To have assessments for a number of Type Two[3] and Type Three[4] Youth Work Development facilities available	The formation of an inter-agency committee. The number of assessments completed.	Interagency committee established. Four assessments completed.	Advocating this development with stakeholders and developing models of operation. Conducting assessments for the most appropriate sites for such developments.	2017-2020 annually.	**(Lead)**: Young People and Mental Health Working Group. **Partners**; FDYS, WLD, Wexford Co.	Leader Strategic Plan 2014-2020 FDYS Strategic Plan 2015-2018 DCYA Youth Café	Outcome 1: Active and healthy with physical and mental well being. Outcome 2: Achieving full

[3] "Type 2" : A place to "hang out with friends, to chat, watch TV or movies, avail of entertainment or leisure facilities chosen by the young people themselves, together with information on State and local services of interest to young people.
[4] "Type 3" : All the activities outlined in type 2 are augmented by the actual provision of services targeted directly at young people. This can include education and training, healthcare (both physical and emotional) and direct targeted assistance. Source : Youth Cafes in Ireland – A Best Practice Guide.

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 3: Safe and protected from harm								
Priority Area	Objective(s)	Indicators	Target	Activities	Timeframe for completion	Lead Responsibility and partners	Link to other plans	Linked to other national outcome(s) and or Transformational Goal(s)
	in Co. Wexford.	The number of feasibility studies conducted.	Two feasibility studies conducted.	Conducting research and feasibility studies.		Co., WWETB, Gorey Youth Needs Group.	Development Programme	potential in all areas of learning and development. Outcome 3: Ensure young people are safe and protected from harm. Outcome 5: Connected, respected and contributing to their world.

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 4: Economic security and opportunity :								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
Young people who are not in education, training or employment.	Progression of NEETs into training or further education.	The number of young people classified as "NEET" who engage in the 3 programmes offered by WLD.	240 young people in the 15-24 years age category.	Delivery of 3 programmes ("Time for Change", "Community Education Programme" and "Work Readiness and Training Programme") to 240 young people aged 15-24 who are classified as "NEET".	2016-2017	**(Lead) :** Wexford Local Development	Programme for Employability and Inclusion and Learning PEIL 2014-2020	Outcome 2: Achieving in all areas of learning and development Transformational Goal: Cross government and inter-agency collaboration and co-ordination

Action Plan for Wexford Children and Young People's Services Committee								
Outcome 5: Connected, respected and contributing to their world								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
Participation and consultation with children, young people and parents	To include the views of children, young people and parents in the work of the committee and in services for children and families in Wexford on an ongoing and meaningful basis.	Consultations with stakeholders in the work of sub groups and CYPSC.	Provision of a meaningful and participative ongoing process which is integrated in the overall plan.	Development of a participative strategy which includes measures to ensure that seldom heard children, young people and families are facilitated to participate.	Ongoing	**(Lead) :** PPFS Working Group **Partners;** All Working Groups and CYPSC	National Strategy on Children and Young Peoples Participation in Decision Making (2015) National Youth Strategy (2015) "Better Outcomes Brighter Futures"	Transformational Goal: Listen to and involve children and young people.
Comhairle na nOg	To continue to engage with Comhairle na nOg.	Comhairle na nOg contributes to CYPSC Plans and meetings.	CNN will attend CYPSC once per year.	Comhairle na nOg will attend CYPSC meetings at least once per year and participate in sub-groups as appropriate. CYPSC Co-ordinator will participate on CNN Steering Group and AGM	Ongoing	Comhairle na nOg CYPSC	Better Outcomes Brighter Futures National Strategy on Children and Young Peoples Participation in Decision Making (2015)	Transformational Goal: Listen to and involve children and young people.

Action Plan for Wexford Children and Young People's Services Committee								
Change Management								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
To create a communications strategy for Wexford CYPSC	To provide online accessible information on the support services available for people ages 0-24 years and their families in Co. Wexford.	The selection of a website developer.	One website developer identified.	Tender process for selection of Wexford CYPSC website developer.	Q.1 2016	**(Lead)** : Information & Resources Working Group	"Better Outcomes Brighter Futures"	Transformational Goal : Earlier Intervention & Prevention and Support Parents
		The development of Wexford CYPSC website.	Wexford CYPSC website developed.	Info & Resources group to work in conjunction with web developer to develop site.	Q. 2 & Q. 3 2016			
		The number of website editors trained.	6 website editors trained.	Content Management System training to create website editors.	Q. 2 2016	Website Editors		
		The number of website "hits".	Website launched with average of 150 "hits" per month.	Launch of website and promotion of CYPSC and website.	Q. 4 2016 Ongoing	Information & Resources Working Group CYPSC Co-ordinator and website editors		
	To raise awareness of Wexford CYPSC initiatives and supports.	The number of newsletters issued per year.	One newsletter per quarter.	Compile and distribute CYPSC e-newsletter.	Q.1 2017 and ongoing	Information & Resources Working Group.		
	To ensure that children and young people can easily access Wexford CYPSC Plan	The number of "child friendly" Wexford Children and Young Peoples Plans distributed	500 copies distributed.	Development and dissemination of "child friendly" summary version of Wexford CYPP.	Q. 3 2017	**(Lead) :** CYPSC Co-ordinator **Partners ;** Information & Resources Working	National Strategy on Children and Young Peoples Participation in Decision Making (2015)	Transformational Goal: Listen to and involve children and young people.

Action Plan for Wexford Children and Young People's Services Committee								
Change Management								
Priority Area	**Objective(s)**	**Indicators**	**Target**	**Activities**	**Timeframe for completion**	**Lead Responsibility and partners**	**Link to other plans**	**Linked to other national outcome(s) and or Transformational Goal(s)**
						Group and CNN		
Data collection and dissemination	To update and disseminate relevant information to CYPSC for information and planning purposes	Availability of up to date statistics.	To ensure that the CYPSC plan remains relevant and needs - led	Collate relevant national, regional and local data when updated by AIRO for WCC and make available to CYPSC committee and Working Groups.	2017 and ongoing	**(Lead) :** Information & Resources Working Group **Partners ;** Wexford County Council	Wexford Local Economic and Community Plan	
Equality and Human Rights	To consolidate the work completed to date with the training provided by The Wheel on "Integrating Equality and Human Rights Into Organisational Policies, Plans, Procedures and Practice" by ensuring that equality and human rights are embedded in the practice of member organisations.	Peer network formed and meeting on an annual basis.	To form a peer network for the participants who completed the Wheel training.	Meetings held on a needs basis to provide mutual support and learn from models of good practice.	2017 onwards	CYPSC Co-ordinator (convenor)		

Section 7: Monitoring and Review

Wexford CYPSC is committed to the implementation of this 3 year plan and will work with partner agencies to ensure this takes place. Successful implementation is based on on-going monitoring and review to ensure that the plan remains a living document. The CYPSC will review progress against the action plan on an annual basis to ensure that we remain focused on our objectives and that priority actions are being achieved.

Locally;
Internally, each working group will report its progress on relevant actions to the CYPSC at each committee meeting.

The CYPSC will report to the Local Community Development Committee as required.

Nationally;
The CYPSC will submit quarterly reports to the Department of Children and Youth Affairs and the National Steering Group on the progress of actions under the five national outcomes.

Section 8: Appendices

Appendix 1

Terms of Reference for Wexford CYPSC

1. Mandate

The mandate for CYPSC's has derived from Government policy over time and is renewed in the context of "Better Outcomes Brighter Futures: The National Policy Framework for Children and Young People" (2014 – 2010). This charges CYPSC's with providing strategic direction and leadership to ensure effective interagency co-ordination and collaboration in order to achieve the best outcomes for all children and young people in a county/counties.

2. Purpose

The overall purpose of Wexford CYPSC is to improve outcomes for children aged 0-24 years across five aspects of their lives otherwise known as the five National Outcomes outlined in "Better Outcomes Brighter Futures".
The Five National Outcomes being that children and young people;

1. Are active and healthy, with positive physical and mental well-being
2. Are achieving their full potential in all areas of learning and development
3. Are safe and protected from harm
4. Have economic security and opportunity
5. Are connected, respected and contributing to their world.

2. Objectives of CYPSC's

CYPSC's bring together relevant statutory, community and voluntary organisations providing services to children and young people to maximise the reach, coverage and impact of such services through;

- Ensuring the needs of children and young people are identified and addressed.
- Planning and co-ordination of services.
- Ensuring effective collaboration and interagency working.
- Promoting quality, evidence-informed planning and practice.
- Optimising the use of resources.
- Promoting best participation practice.

3. Term

These Terms of Reference are effective from ( ) and continue until the ( ).

4. Membership

Wexford CYPSC will comprise;

- Chairperson : Area Manager Waterford / Wexford Child & Family Services, Tusla Child & Family Agency
- Vice Chairperson : Senior Staff Member, Wexford County Council.
- CYPSC Co-ordinator : Tusla Child and Family Agency

An Garda Siochana	1 Representative
Barnardos	1 Representative
Family Resource Centres	1 Representative
FDYS	1 Representative
Gorey Youth Needs Group	1 Representative
Health Service Executive (Primary Care, Nursing, Disability)	3 Representatives
Irish Primary Principals Network	1 Representative
Probation & Welfare Service	1 Representative
Roma Community	1 Representative
Traveller Community	1 Representative
Tusla Child & Family Agency (Education Welfare Service and Social Work Service)	2 Representatives
Waterford & Wexford Education Training Board	1 Representative
Wexford County Childcare Committee	1 Representative
Wexford Local Development	1 Representative
Wexford Rape & Sexual Abuse Support Service	1 Representative
Wexford Womens Refuge	1 Representative
Youth New Ross	1 Representative

Wexford CYPSC may extend membership to other agencies as appropriate, following discussion and agreement at a CYPSC meeting.

5. Principles and Values

Wexford CYPSC has developed the following principles for working with;

(a) Children and Young People

Wexford CYPSC…..

- Embraces diversity
- Actively listens and provides meaningful participation and engagement in the work of the WCYPSC for young people and children.
- Focuses on early intervention and easily accessible services for children / families.
- Supports Restorative Justice Principles – affording young people the opportunity to restore their mistakes and move on from them.
- Will advocate nationally for our children and young people re: their unmet needs – working within the national framework of Children & Young Peoples Services Committees.

- Will advocate locally – raising issues with agencies and at the CYPSC table.
- Recognises and respects the pivotal role of parents and families and support them in that role.
- Will be active and make decisions
- Will adopt a "Strengths and Assets" based approach.

(b) Inter-Agency Working

Wexford CYPSC…..

- Advocates real interagency working: keeping the lines of communication open between all our agencies.
- Uses genuine multi-disciplinary practice.
- Members will be flexible within their roles and keep the focus on achieving best outcomes for children and young people.
- Will encourage joint or shared planning and working between the CYPSC agencies
- Account will be taken of existing agency principles and practice and continue to develop these for the benefit of children and young people
- CYPSC members will lead and champion interagency working within their individual agencies.
- Will aim for inclusive and consensus decision-making: in the spirit of partnership.
- Will be practical in setting objectives and work plans.
- Will share the information necessary to support our young people and children – where possible, within the data protection constraints.

Equality & Human Rights Statement;

Wexford CYPSC has also developed an Equality & Human Rights Statement which will underpin our work going forward. See Appendix 2 for details.

6. Roles and Responsibilities

The roles and responsibilities regarding local governance of the CYPSC are outlined in the "Blueprint for the Development of Children and Young People's Services Committees", DCYA.

⇨ **Role of Chairperson;**

- Provide leadership and direction for the local committee;
- Ensure the effectiveness of the committee in all aspects of its role, including delivery of its Children and Young Peoples Plan;
- Ensure active participation and contributions from all members across all sectors;
- Ensure appropriate interaction between the committee and external stakeholders.

⇨ **Role of Vice-Chair;**

- Support the CYPSC Chairperson in the performance of his or her duties;
- In the case of unavailability of the Chairperson at any committee meeting, to take the role of Chairperson for that meeting;
- Ensure an appropriate balance between the voice of the Chairpersons organisation and that of other member organisations.

⇨ **Role of Co-ordinator;**

- Support the establishment and development of the CYPSC and its sub-groups;
- Communicate a clear sense of purpose and direction on behalf of the CYPSC;
- Co-ordinate the development and implementation of the CYPSC's 3-Year Children and Young Peoples Plan;
- Assist the overall committee and sub-groups to implement the 3-year work plan and monitor progress in line with the five national outcomes for children and young people as set out in "Better Outcomes, Brighter Futures".

7. Meetings

All meetings will be chaired by the Area Manager Waterford/Wexford Child & Family Services, Tusla Child & Family Agency or in his/her absence by the Vice-Chairperson, Wexford County Council.

- A meeting quorum will be 25% of the total members of the CYPSC.
- Decisions will be made by consensus. If that is not possible, the CYPSC Chairperson makes the final decision.
- Meeting agendas and minutes will be provided by the CYPSC Co-ordinator, Tusla Child & Family Agency in advance of committee meetings. This includes:
  - ⇨ Preparing agendas and supporting papers;
  - ⇨ Preparing minutes / meeting notes and relevant information.
- Meetings will be held every 4-6 weeks.
- Working Group meetings will be arranged outside these times at a time convenient to Working Group members.

8. Amendment, Modification or Variation

The Terms of Reference may be amended, modified or varied in writing after consultation and agreement by Wexford CYPSC members.

9. Reporting Mechanisms

National Level: The CYPSC will report to the National CYPSC Co-ordinator, the CYPSC National Steering Group the and Department of Children and Youth Affairs as required.
Local Level: The CYPSC will provide update reports to the LCDC as required.

Appendix 2

Wexford Children and Young People Services Committee

Equality and Human Rights Statement

2016

Introduction

This statement reflects our commitment to address equality and human rights concerns for all children and young people and, particularly, for those disadvantaged by discrimination, inequality or human rights abuses. We have a particular focus on the grounds of gender and gender identity, civil status, family status (carers and lone parents), age, disability, sexual orientation, race (migrants and Black and minority ethnic groups, including Travellers and Roma), religion, and socio-economic status.

This statement fulfils our obligations under the Irish Human Rights Equality and Commission Act 2014 (S.42) to have regard to the need to eliminate discrimination, promote equality of opportunity and protect human rights.

This statement will inform the development, implementation and evaluation of the Wexford CYPP in a manner that reflects available resources and alignment with the "Better Outcomes Brighter Futures" strategy.

Values;

A particular set of values underpins our commitment to equality and human rights and shapes our ambition to advance the promotion and achievement of equality, the elimination and prevention of discrimination, and the protection and fulfilment of human rights.

These values are dignity, inclusion, social justice, democracy and autonomy, with the following agreed definitions.

Dignity is about human worth. It involves children and young people being valued and respected. It is about the esteem in which children and young people are held and their standing in society. Dignity involves valuing difference and diversity among children and young people. Its starting point is ensuring the absence of cruel or degrading treatment, harassment and discrimination.

WCYPSC seeks to ensure that all children and young people are valued and respected, having regard to the right to dignity of each child and young person.

We, therefore, wish to address the following equality and human rights issues:

- Bullying, harassment, discrimination and isolation experienced by a diversity of children and young people in a range of institutional and community settings.
- The experience of children and young people in the education system, in particular where there is a lack of valuing of difference and diversity.
- Organisations that lack capacity, resources and knowledge to respond appropriately to the needs and aspirations of children and young people and to understand and adjust for diversity among children and young people.

- The need for protection and places of safety for children and young people in emergencies, including for children and young people in contexts of domestic violence.
- The manner in which care is delivered for children and young people with disabilities in institutional and community settings.
- Inappropriate facilities for the detention of young people.

Inclusion is about children and young people having a sense of belonging and being a part of something. It is about children and young people being connected and involves reaching out to all children and young people. Inclusion requires dismantling barriers to participation.

WCYPSC seeks to ensure that the attitudinal, organisational and cultural barriers to inclusion of children and young people are identified and challenged, that opportunities for active participation by children and young people are promoted and supported, and that children and young people have access to and connection with their peers, communities, and society.

We, therefore wish to address the following equality and human rights issues:

- Rural isolation experienced by children and young people with reduced provision for rural areas and reduction of rural outreach services.
- Lack of services and facilities to enable children and young people to engage with each other generally and within their diverse communities.
- The need for particular steps to enable participation in society and independent living for children and young people with disabilities.
- Alienation experienced by some groups of children and young people as they are left waiting for necessary supports alongside a lack of institutional awareness and understanding as to why behavioural issues emerge.
- Barriers to participation including those arising from family poverty, language, and inaccessible venues and transport for children and young people with disabilities.

Social Justice is about redistribution, fairness and balance in relation to access to resources for all groups of children and young people. It involves a concern for who benefits in relation to employment and social goods such as education, health, and accommodation. It is about children and young people being able to contribute to society.

WCYPSC seeks to ensure that children and young people are empowered to actively participate and effect change, that outcomes are enhanced for all children and young people, and, in particular, that the physical health, mental health and wellbeing of children and young people is enhanced.

We, therefore, wish to address the following equality and human rights issues:

- Mental health issues for children and young people and the need for preventative initiatives and improved access to and outcomes from mental health services.
- Physical health issues for children and young people, particularly in relation to obesity.
- Limited provision of and access to services for children and young people, in particular education supports and youth and community services.
- Poverty experienced by children, young people and their families, in particular where there is inter-generational unemployment.
- Access to education and educational outcomes for all groups of children and young people.

- Access to accommodation and particular issues of homelessness for children and young people.
- Limited opportunities available to children and young people in relation to accessing training, and employment.

Democracy is about children and young people having a voice and being involved in decision-making. It involves securing accountability to children and young people from those in positions of leadership, collective decision-making, and delegation of responsibility. It includes children and young people having an opportunity to participate in civil society.

WCYPSC seeks to ensure that the voice of the full diversity of children and young people is heard, listened to and responded to in its own work and in the work of all other institutions in the County and that the necessary inclusive, educational and community approaches to ensure this are developed.

We, therefore, wish to address the following equality and human rights issues:

- The lack of opportunities for children and young people to have an effective input into decision-making and the need to create fora and processes to enable their input.
- Accountability to children and young people and the need to develop systems of accountability from key institutions.
- Disillusionment with political structures among young people and the need to create opportunities for children and young people to engage with political structures.
- The negative culture around making complaints and the need to create an environment where children, young people and their families feel able to speak up and raise issues about policies and procedures.

Autonomy is about children and young people being involved in making decisions for themselves. It involves freedom, independence and empowerment for children and young people. Autonomy is about children and young people having choices and having control in their interactions with their community and wider society.

WCYPSC seeks to ensure that children and young people have the capacity and support, including family supports, needed to be involved in decision-making for themselves, that children and young people have the structures to enable them to formulate their views and communicate them, and that real choices are available to children and young people, with the barriers that limit choice removed.

We, therefore, wish to address the following equality and human rights issues:

- The lack of supports, knowledge, confidence in oneself and confidence in institutional systems that diminish choice and control for children and young people.
- Barriers that limit real choices for children and young people include poverty and lack of financial resources, stereotyping, literacy, mental health and discrimination.
- The challenge to open up a range of real choices from institutions for children and young people and to provide the supports for children and young people and their families in making choices.

Using this Statement;

This statement will serve as a set of guiding principles to bring an equality and human rights focus into the work of WCYPSC. It will underpin and shape the development and implementation of the WCYPSC plan and the measurement indicators established as part of this work.

It will be used as a focus for discussion within the organisations represented on the Committee.

This statement will be used to inform all stages of the planning and implementation process:

- The **consultation** for the plan: in deciding who is to be consulted, how consultations are organised and implemented, and what areas the consultation will focus on.
- **Data gathering and needs assessment**: in deciding what data are gathered and what data sources to use and in deciding methods and focus for the identification of needs.
- **Prioritising actions**: In deciding on the targeting of resources to be deployed and the prioritizing of actions for the plan.
- **Final drafting**: in assessing the final draft plan to use key moments to test the draft plan against the statement.
- The **development of indicators**: in establishing indicators to measure outputs from and impacts of the plan.
- **Implementation of the plan**: In managing and monitoring the implementation of the plan to use key moments to test progress made against the statement.

Appendix 3

Hardiker Model

In the 1990's in the U.K, building on an ecological perspective, Pauline Hardiker and her colleagues developed a model to help understand different levels of need within a population of children (Hardiker et al, 1991). This model is now widely used and has been found to be a useful planning framework by both the UK and the Irish Governments. The model outlines four levels of intervention as follows;

Level 1: refers to those mainstream services that are available to all children – health care, education, leisure and a range of other services provided in communities. It also offers the potential for targeting resources through community development initiatives such as parent and toddler groups, community houses and women's groups which may be available to the whole community but particularly targeted at disadvantaged communities.

Level 2: represents services to children who have some additional needs. Services at Level 2 are characterised by referral, and full parental consent and negotiation. Examples would be Behaviour Support, Parenting Support, additional Educational Services, and support for children who are deemed vulnerable through an assessment of what their need is, and via targeted specific services provided by education, health, social services, law enforcement and the voluntary sector.

Level 3: represents support to families or individual children and young people where there are chronic or serious problems. Support is often provided through a complex mix of services which usually need to work together well in order to provide the best support. State intervention can have a high profile at this level. Examples would be children on the Child Protection Register, or who have been before the Courts.

Level 4: represents support for families and individual children or young people where the family has broken down temporarily or permanently, where the child or young person may be looked after by social services. It can also include young people in youth custody or prison or as an in-patient due to disability or mental health problems.

Source : *An Introductory Guide to the Key Terms and Interagency Initiatives in use in the Childrens Services Committees in Ireland*. Owens, Stella. Centre for Effective Services, 2010.

Appendix 4

Composition of Working Groups

Education Working Group

Name	Organisation
Eileen Morrissey (Chairperson)	Wexford Library Service
Jillian Murray	Wexford County Childcare Committee
Margaret Sheriff	Gorey School Completion Programme
Marian Donegan	Access 2000
Sinead O'Hara	Waterford and Wexford Education and Training Board
Niall O Donnell	Garda Juvenile Liaison Officer
Nicholas Sweetman	Books 4 Babies Ireland Ltd
Peter Hayden	Gorey Youth Needs Group
Paula Busher	Bunclody School Completion Programme
Karen Hennessy	Carlow I.T, Wexford Campus
Edel Doyle	HSE, Public Health Nursing
Maeve O 'Byrne	Wexford Local Development
Niall O Donnell	Gardai
Pat Gately	IPPN Rep
Sean O Leary	Wexford Education Centre

Health & Diversity Working Group

Name	Organisation
Sheila Barrett (Interim Chairperson)	Tusla Child and Family Agency
Ray O Brien	Taghmon Family Resource Centre
Jillian Murray	Wexford County Childcare Committee
Elizabeth Berry	Traveller Community Health Project
Suzanne Nolan	HSE Social Inclusion Unit
Josie Cash	Traveller Community Health Project
Siobhan Hayden	Community Health Project
Fran Ronan	Wexford County Council (Sports Partnership)
Mary B Finn Gilbride	HSE (Public Health Nursing)
Siobhan Sinnott	HSE (Dietetic Service)
Nuala Harpur	HSE (Health & Wellbeing)
Maire Morrissey	Tusla (Special Projects Manager)

Information & Resources Working Group

Name	Organisation
Sheila Barrett (Chairperson)	Tusla Child and Family Agency
Dearbhla Ni Laighin	Wexford County Council (Library Service)
Yvonne O Connor	Gorey Youth Needs Group
Graham Rowley	Gardai
John Brennan	Youthreach
Siobhan Mc Mahon	FDYS
Ann Marie Costello	Youth New Ross
Kate Quigley / Claire Farrell	Tusla Child and Family Agency (Social Work)
Pat Quill	Department of Social Protection

Prevention, Partnership and Family Support (PPFS) Working Group

Name	Organisation
Catherine Joyce (Chairperson)	Barnardos
John Paul O Neill	FDYS (CBDI)
Tony Kennedy	Tusla Child and Family Agency
Louise O Byrne	Youth New Ross
Marian Dowd	Barnardos
Mark Colclough	Gorey Youth Needs Group
Greg Mullan	Tusla Child and Family Agency (Social Work)
Pauline Ennis	Wexford Womens Refuge
Peter Culleton	SAFE GYDP
Tommy Byrne	SAFE Garda Youth Diversion Programme
Sharon Kennedy	South West Wexford Family Resource Centre
Anita Carroll	Gorey Family Resource Centre
Mary O Loughlin	Taghmon Family Resource Centre
Colm O Muiri	Southend Family Resource Centre
Lynda Stacey	Raheen Family Resource Centre

Young People and Mental Health Working Group

Name	Organisation
Julie Somers (Chairperson) to October 16 Sean Cooke : Oct 2016 - present	Youth New Ross FDYS
Anne Marie Walsh	HSE (Substance Misuse)
Bernie Lambert	School Completion Programme
Clare Williams	Wexford Rape & Sexual Abuse Support Service
Emma Dwan	Gardai
Tommy Somers	Wexford Local Development (Cornmarket)
Michelle Monaghan	Barnardos
Mary O Loughlin	Taghmon Family Resource Centre
Sandra Collins	Gorey Youth Needs Group
Jane Mc Williams/Jenny Fennessy	South West Wexford Family Resource Centre
Veronica Brooke	Probation Service
Sharon Grace	Youth New Ross

Appendix 5

Glossary of Terms

AIM: Access and Inclusion Model

AIRO: All Island Research Observatory

CBDI: Community Based Drugs Initiative

CFSN: Child and Family Support Network (see PPFS below)

CYPP: Children and Young Peoples Plan

CYPSC: Children and Young Peoples Services Committee

CNN: Comhairle Na nOg

DCYA: Department of Children and Youth Affairs

DEIS: Delivering Equality of Opportunity in Schools Experiencing Educational Disadvantage

ECCE: Early Childhood Care and Education Programme

FET: Further Education and Training

FRC: Family Resource Centre

LCDC: Local Community Development Committee

LECP: Local Economic Community Plan

LGBTI: Lesbian, Gay, Bisexual, Transgender and Intersex

Meitheal: National model for the development of an area-based approach to PPFS

NEET: Not in education, employment or training

NGO: Non-Government Organisation

PEIL: Programme for Employability, Inclusion and Learning 2014-2020 (European Social Fund)

PPFS: Prevention, Partnership and Family Support – Tusla initiative that includes Child and Family Support Networks, Meitheal, Parenting and Participation

SCP: School Completion Programme

SERDATF: South East Regional Drugs and Alcohol Task Force

SICAP: Social Inclusion & Community Activation Programme

SONC: State of the Nations Children – Report by Dept. Children and Youth Affairs 2014

TPSP: Teen Parent Support Programme

Tusla Child and Family Agency: Established by Department of Children and Youth Affairs in 2014.

WCC: Wexford County Council

WLD: Wexford Local Development

Appendix 6

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www.wexfordcypsc.ie