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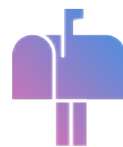
# PRACTICE LINKS

**Practice Links** is a free publication of the School of Applied Social Studies (social work), UCC, Ireland. *Practice Links* supports practitioners to keep up-to-date with new publications, online resources, conferences and continuing professional development opportunities.

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**Editor:** Dr Kenneth Burns, UCC



### *PL Mailing List*

[Register here](#) to receive a free copy of *Practice Links* to your email account five times a year. You can also use this link to leave the PL list.



### *Submissions*

Submissions for publication should be received two weeks prior to the next publication date. Please forward submissions [by email](#) to the editor.

MOST OF THE IMAGES IN THIS DOCUMENT ARE **LIVE LINKS**. TO ACCESS ADDITIONAL INFORMATION, CLICK ON THE IMAGE OR SCAN A QR CODE ON YOUR PHONE.



## UCC FTP RESEARCH STUDY

# FITNESS

# TO PRACTISE



Social workers: have you been referred to  
CORU Fitness to Practise?  
Tell us about your experience  
(survey and / or interview).



This anonymous, independent UCC study examines the lived experiences of social workers who have been through the CORU FTP process – what it meant personally and professionally. The survey will take 12-15 minutes to complete.

You're eligible if you **are or were** a CORU-registered social worker in Ireland at the time a complaint was made against you. Participation is voluntary and anonymous. There is very little research on this topic, and what we hear from participants will shape how FTP processes are understood and discussed in the profession.

[Click here to complete the anonymous survey](#)

Complete the survey and if you have more to tell us, you can also meet for us for an interview.

[Click here to take part in an interview](#)



## CONTINUING PROFESSIONAL DEVELOPMENT

@UCCSOCIALWORK WEBINAR SERIES

### Safe Staffing in Children's Services

Professor Paula McFadden

Thursday 11<sup>th</sup> June, 1-2 (Irish time)

All welcome. Free [@UCCsocialwork](#) webinar.

[Click here](#) for information on the webinar and the registration link.

[Click here](#) for more information and to watch back previous webinars.

### Making Child Protection Work

Professor Harry Ferguson

If you were unable to make the last @UCCsocialwork webinar,

the video is now available to watch back on [this link](#).





# SOCIAL WORK PRACTICE TEACHING @UCC



**School of Applied Social Studies, UCC**



## SOCIAL WORK PRACTICE TEACHING

Practice Teaching is a dynamic CPD learning experience hear what practice teachers have to say about their experiences supervising UCC social work students on placement...

*"Student was open and engaging, unafraid of the many challenges".*

*"Quickly became a valued and productive member of the MDT".*

Social workers who engage in practice teaching have continually informed us of the benefits in terms of their own continuing professional development and we have lots to offer [What is Practice Teaching?](#)

UCC would like to hear from CORU registered social workers who are interested in supervising a student on placement during 2026/27 - placement cycles are usually from January - April, Summer, and September - December.

UCC pays a placement fee. For further information, please contact [swfieldwork@ucc.ie](mailto:swfieldwork@ucc.ie), or you can register your interest [Practice Teaching Expression of Interest](#)



# NSICC RESEARCH STRATEGY AND CONFERENCE REPORT

**Your views matter:  
Social Care Council  
launches  
consultation on  
future strategic  
research direction**

NISCC RESEARCH STRATEGY  
NORTHERN IRELAND

Research Strategy launched on 29<sup>th</sup> April 2026

Link to the strategy:

**[Your views matter: Social Care Council launches consultation on future strategic research direction - NISCC](#)**

You can also click on the consultation documents below, including a copy of the draft strategy and the equality screening.

**[Social work and social care research, evidence, innovation and improvement strategy 2026 - 2031.](#)**

**[Research Strategy 2026-2031 Equality Screening](#)**

If you have been engaged in developing such a strategy, do get in touch. If you have any queries on how to respond, please email [anne.mcglade@niscc.hscni.net](mailto:anne.mcglade@niscc.hscni.net)

## NISCC RESEARCH CONFERENCE REPORT

Check out the link to our Report of our 13<sup>th</sup> Annual Research

Conference 11<sup>th</sup> March 2026 [Social Work and Social Care Research Conference report now available - NISCC](#)





## CONTINUING PROFESSIONAL DEVELOPMENT

### LEADERSHIP IN SOCIAL CARE

Session 1: Leadership Explore leadership in practice, including self-awareness, decision-making

Welcome to the Leadership in Social Care online event!

Join us on **June 16th 2026 at 1030am** for an insightful discussion on effective leadership in the field of social care. Whether you're a seasoned professional or just starting out, this event is perfect for anyone looking to enhance their leadership skills.

Our speakers will share **valuable insights** and **practical tips** to help you become a more effective leader in social care. Don't miss this opportunity to learn from the best!

Mark your calendars and get ready to be inspired! We can't wait to see you there. [Click here](#) to register.

### REFLECTIVE PRACTICE IN SOCIAL CARE

Join us online for an engaging session all about Reflective Practice in the world of Social Care. This event is perfect if you want to deepen your understanding, share experiences, and improve your skills through thoughtful reflection. Connect with like-minded folks, learn practical tips, and boost your professional journey—all from the comfort of your own space. Don't miss out on this chance to grow and shine in your social care role! 30th June.

[Click here](#) to register.

### INTERNATIONAL NETWORK FOR CRIMINAL JUSTICE WEBINARS

The International Network for Criminal Justice (IN-CJ) has recently hosted and will be hosting some new events in their webinar series of talks, discussions, roundtables and webinars. A conversation on rehabilitation ideals, penal realities and international perspectives, with Prof. Fergus McNeill, was held on 7 May 2026. A series of events on implementation of evidence-based practice in probation is ongoing, with the next webinars to be held on 9 and 30<sup>th</sup> June 2026. [Click here](#) for further information (recordings of past events and registration for upcoming webinars).



## CONTINUING PROFESSIONAL DEVELOPMENT

### HSE SOUTH-WEST ADDICTION SERVICES LAUNCHES NEW GAMBLING AND GAMING ADDICTION TREATMENT SERVICE

The HSE South-West is pleased to announce the launch of a dedicated Gambling and Gaming Addiction treatment service. This service aims to provide specialised support to individuals and families affected by Gambling and Gaming related harms across Cork City and County.

This new service offers screening brief interventions, assessments of Gambling/Gaming related harm, evidence-based therapeutic interventions including individual counselling, group therapy (Cognitive behavioural Coping Skills/ Motivational Interviewing), relapse prevention, dual recovery programme and continuing care. Interventions are tailored to meet the complex needs of those experiencing harm from Gambling and Gaming behaviour. The initiative reflects the HSE Social Inclusion's commitment to addressing all forms of addiction with accessible, equitable, and person-centred care.

Referrals can be made through GPs, community health professionals, or self-referral by individuals or family members seeking help. Early intervention is encouraged to support recovery and to prevent further harm. The service also includes family support and education components to assist those impacted indirectly.

The Gambling / Gaming services offer a holistic, accessible response to Gambling and Gaming addiction harms in Cork City and County aligning with HSE's Social Inclusion objectives and evidence-based standards for care provision.

For more information or to make a referral, please contact the HSE South-West Gambling and Gaming Addiction Services on [022-42559] or email [catherineocallaghan9@hse.ie](mailto:catherineocallaghan9@hse.ie)

Confidentiality and professional care are assured.



**FSS an Iardheiscirt**  
**HSE South West**



# CONTINUING PROFESSIONAL DEVELOPMENT

## NATIONAL PROGRAMME FOR SCREENING AND BRIEF INTERVENTIONS (SBI) FOR PROBLEM ALCOHOL & DRUG USE

### One Day Course

This course aims to prepare nurses, midwives, health and social care professionals to implement Screening and Brief Interventions (SBI) for problem substance misuse.

On completion of this course, participants should be able to:

- Apply the theory from the SAOR online module to their practice
- Identify opportunities to conduct a brief intervention
- Demonstrate appropriate brief intervention skills using the SAOR model
- Identify appropriate alcohol and other drugs care pathways

The key course content which emerges from the course learning outcomes is outlined below:

- Evidence for the effectiveness of SBI.
- Alcohol and drug related presentations to health and social care settings.
- Contemporary models of SBI for problem alcohol and drug use.
- Overview of the SAOR model of intervention for problem alcohol and drug use.
- Establishing a supportive working relationship with the service users.
- Asking about alcohol and drug use and screening for alcohol and drug related problems.
- Delivering a structured brief intervention based upon the SAOR model.
- Developing appropriate care pathways for service users and arranging appropriate follow up.
- Accessing useful links and reference materials for further reading and research.

The primary target audience is nurses, midwives and allied health and social care professionals who are in a position to offer Screening and Brief Interventions to service users presenting with problem alcohol and drug use.

Contact Amy Roche for 2026 Training Dates in Cork and Kerry [Amy.Roche@hse.ie](mailto:Amy.Roche@hse.ie)

Contact Nicola Corrigan for other locations nationally [nicola.corrigan@hse.ie](mailto:nicola.corrigan@hse.ie)



# TARA PROJECT RESOURCES



## The TARA Project – Trauma, Attachment, Resilience into Action

### ABOUT THE TARA PROJECT

The TARA Project is a research partnership between Dublin South Central (DSC), TUSLA, Child and Family Agency and University College Cork. TARA is a practice model that has been developed to promote *how* to embed and realize the principles of trauma-informed care into tangible concrete practices. The overarching aim of this partnership is to integrate trauma-informed practices (TIPs) in the DSC Area, TUSLA, to support responding to the complex needs of, and improve outcomes for, the children and families who come into contact with the service.

### RECENT OUTPUTS

In December 2025, the [TARA Project website](#) was launched, providing access to project resources, updates, and practice materials.

Recent peer-reviewed articles published in *Child Abuse Review* include [an exploration of insights from the TARA Practice model](#), published in May 2026, and [an evaluation of child welfare professional education in trauma-informed care](#), published in January 2026.

### Cluster Practice Outputs

Phase 2 of the project focused on co-creating practical initiatives informed by the TARA model with frontline professionals to integrate TIPs into everyday service delivery. Since January 2025, 31 TUSLA practitioners collaborated in cluster groups to design innovative resources and tools. Interested practitioners joined four clusters, which produced six initiatives in total. The clusters presented their initiatives at *The Practice Initiatives Showcase Event* in December 2025. The four clusters are:



**Building Practitioner Resilience**  
Professional Supervision Environment



**The Ripple Effect**  
Trauma-Informed Practice for Children Experiencing Multiple Moves in Foster Care



**The Communication Cogs**  
Glance Card on Trauma-informed Care Collaboration



**Time Bandits**

1. Sensory Pack
2. Bringing Kids Together
3. TARA Whole Team Foster Care Approach

Further information about these initiatives can be found on the TARA website: [The Work of the Clusters](#).



# SOCIAL WORK PRACTICE GUIDE

## SOCIAL WORK WITH WOMEN WHO EXPERIENCED SUBSTANCE USE ISSUES: A PRACTICE GUIDE INFORMED BY SERVICE USERS.

Harris, Loughran, Broderick and Niece (2024) in collaboration with the women seeking treatment for substance use issues. Research was carried out in collaboration with women service users from two substance use treatment agencies, both based in the Dublin area. The research was focused on learning more about their experiences and about interaction with social work (Harris et al 2024). Two posters summarise the Findings (Poster 1) and A Practice Guide for Social Work (Poster 2) below and on the next page.

A total of 47 women participated in the study, all of whom had a history of substance use. The women who contributed to the current practice guide all had experiences of social work engagement. In Agency One, ten of the women had long-term experience in the care system as a child, with three having shorter experiences in care. A total of 86% women in this group had direct experience with social work. In Agency Two, 11 women had been in care themselves, and 14 had social work involvement with their children.

The guide is comprised of themes identified from a thematic analysis of the focus groups across both agencies. Within these themes are perspectives from the women of what they found helpful from interactions with social workers, along with what they found to be detrimental.

### Social Work Practice Guide

#### Working with Women with Substance Use Issues: Findings

Harris, Loughran, Broderick & Niece, 2024

“ You’re there to take my child if I ask for help ”

“ There was always hope for reunification, but it was so unplanned ”

“ Life skills and parenting...I never learned any of that ”



### 01 Support

Most women felt **unsupported** by child and family services  
Mothers felt **judged** and **frightened** when seeking help  
Insecurities of the care system

### 02 Transparency

Uncertainty from **changing expectations**  
**Lack of communication** and **exclusion from decision-making**  
**Distress** from **unclear reunification processes**

### 03 Trauma

Sudden switch from being treated as **vulnerable child** to being viewed as **‘risky parent’**  
**‘Branded’** because of past experience in social work  
**Underdeveloped life skills and parenting skills** (A ‘hidden harm’ of care?)



# SOCIAL WORK PRACTICE GUIDE

## Social Work Practice Guide Informed by Service Users

Harris, Loughran, Broderick & Niece, 2024

### 1 Be Respectful

Acknowledge parent's distress, fear and concerns

Respect parent's love and attachment to their child.



### 4 Knowledge & Understanding

Recognise the change processes associated with substance use.

Develop understanding of the interactions between parenting, substance issues, and broader social challenges.



### 2 Build Trust

Be reliable, consistent, and manage change sensitively.

Communicate honestly and openly, even in difficult conversations

### 5 Offer Compassion & Support

Be compassionate about separation for parents and children

Help mothers access additional supports (e.g. parenting programmes, childcare, counselling)

### 3 Trauma-Informed Practice

Offer stability, predictability, and collaboration.

Engage with compassion towards parents, respecting traumatic experiences to avoid re-traumatisation.



### 6 Be Transparent

Be clear, honest and consistent about expectations, especially for reunification and voluntary care orders



## NEWS / CONTINUING PROFESSIONAL DEVELOPMENT

### FOUR COMMISSIONERS APPOINTED TO HISTORICAL SEXUAL ABUSE IN SCHOOLS COMMISSION

"Four commissioners have been appointed to the Commission of Investigation into the Handling of Historical Child Sexual Abuse in Schools.

Ms Justice Mary Ellen Ring, senior legal consultant Roddy Bourke, and child safeguarding experts Kieran McGrath and Michele Clarke will join Mr Justice Michael MacGrath, who was appointed as chair last year, in leading the work of the Commission.

Minister for Education Hildegard Naughton, under whose department the commission was established, said the combined expertise of the appointees would be critical in underpinning the "independence and effectiveness" of the commission." (Conneely, 2026, RTÉ News).

Kieran McGrath and Michele Clarke are social workers and are leading on the survivor engagement arm of the Commission. [Click here](#) to read more.

### ACJRD CONFERENCE 2026 ON 11 JUNE

The 29<sup>th</sup> Annual Conference of the Association for Criminal Justice Research & Development (ACJRD), on designing safer communities from systems to streets, will take place in the Ashling Hotel, Dublin on 11 June 2026.


[Click here](#) for more information.



**ANNUAL CONFERENCE**

**PREVENTION FIRST: DESIGNING SAFER COMMUNITIES FROM SYSTEMS TO STREETS**

**REGISTRATION NOW OPEN TO NON MEMBERS**

 Thursday, 11 June 2026

 9.30am-4.30pm

 Ashling Hotel, Dublin 8



 [www.acjrd.ie](http://www.acjrd.ie)

Registration is now open for the ACJRD Annual Conference 2026



## VIDEOS

### Soilse - A Day In The Life

This is a documentary about addiction and recovery. Based on an immersive play that was made and performed by a Recovery programme called "Sóilse". with some expert views on each scene of the performances, it gives the viewer an insight into addiction and recovery that most people never get to see. Directed & Edited by Frankie King



### The Best Free AI Tools for Research (2026)

Dr Andy Stapleton helps navigate Academia & AI by breaking down the insider secrets of academia so you can work smarter, publish faster, and stay ahead with the best AI tools by your side.

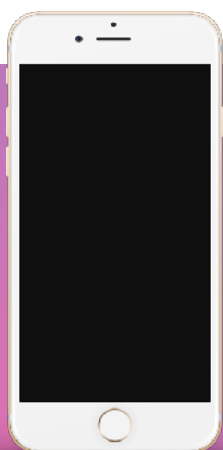


## VIDEO PODCAST

### Mind the Kids Podcast: 'Adolescence and Appearance. AI eat your words.'

AI chatbots can feel warm, human and tailored, but this brings real risks when the advice is wrong or incomplete, especially for vulnerable young people with eating or body-image concerns.


Dr. Florence Sheen talks to hosts Dr. Jane Gilmour and Prof Umar Toseeb. They highlight three big issues: we rarely know what sources the chatbot is drawing on; there is no built in safeguarding link back to parents, schools or services; and its list style "here's what to do" responses may particularly appeal to perfectionistic or rigid thinkers, potentially fuelling disordered behaviours rather than challenging them.



# APPS, AI, & SOCIAL MEDIA



## ONLINE SUPPORT

**togetherall**  A supportive community for your well-being. For people aged 16 to 30 in Ireland. Get 24/7 support in a safe, anonymous online community. Whether you're facing challenges, looking for guidance, or simply need a space to express yourself, you're not alone. This service is provided in partnership with the HSE.

[Togetherall](#)

## LinkedIn



### [Community Foundation Ireland](#)

The philanthropic hub on an Equality mission for People, Place and Planet.

### [Dr Rosarii Griffin FRSA](#)

Academic in Teaching & Learning; Researching AI & Ethics in Higher Ed; Science Diplomacy, STEM, Disability, Gender; Qual/Quan Research Methods (Dip to PhD). Coordinate ACE courses, University College Cork (UCC), Ireland.

## AI Apps and Platforms

### [Microsoft Dragon Copilot](#)

Speech recognition app for clinical documentation, increases efficiency with an extensible AI workspace that scales across specialties, care settings, and devices.

### [Perplexity AI](#)

AI-powered search engine with cited answers. [App Store](#) | [Google Play](#)

### [Poe \(Quora\)](#)

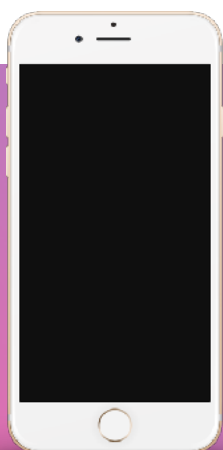
Platform to access multiple AI models in one app. [App Store](#) | [Google Play](#)

### [Asta](#)

A scholarly research assistant that combines literature understanding and data-driven discovery. Asta uses 108M+ abstracts and 12M+ full-text papers to find, summarize, and analyze scientific evidence.

### [Research Rabbit](#)

Created to transform the entire literature review process into a streamlined and joyful experience.



# APPS, AI, & SOCIAL MEDIA



## *Effects of Social Prescribing for Older Adults: An Evidence and Gap Map*

ELIZABETH TANJONG  
GHOGOMU, VIVIAN  
WELCH, MOJDE YAQUBI,  
OMAR DEWIDAR,  
VICTORIA BARBEAU,  
SIERRA DOWLING,  
YANFEI LI, HIND SABRI,  
MOHAMED  
ELMESTEKAWY, ESAM  
ALJUFRU, BERNIA ALIYAR,  
YUEWEN PAN, ABDULAH  
AL AMEER, ALI AL  
ZUBAIDI, MOSTAFA  
BONDOK, WALEED KOJAN,  
MOHAMAD TAREK  
MADANI, KATHY TONG,  
ADEDEJI IREFIN, ISHA ROI  
RAMPERSAD, ZOE TSAI,  
FATIMA JAHEL, SRIJA  
BISWAS, KIFFER G. CARD,  
SONIA HSIUNG, CAITLIN  
MUHL, MICHELLE L. A.  
NELSON, DOUGLAS M.  
SALZWEDEL, MARIANNE  
SARAGOSA, CINDY YU,  
KATE MULLIGAN, AND  
PAUL HÉBERT

**The EGM in brief:** Mapping the evidence on the effectiveness of social prescribing interventions and social prescriptions addressing a non-medical need for older adults shows that many of the systematic reviews are of critically low quality, most articles come from high-income countries, and few articles, if any, look at material-support and nature-based interventions, health equity as a community-level outcome or assess adverse effects.

**What is this EGM about?** Many older adults experience health disparities that are often associated with complex health and social issues. Social needs may not be routinely addressed by healthcare providers but are equally important as health conditions. Social prescribing is an intervention that can help primary care providers and other connectors to meet these social needs by connecting older adults to social supports in the community. Decision-makers need to know which social prescribing interventions and social prescriptions are effective at addressing a non-medical need in this population.

**What is the aim of this EGM?** To show available evidence from systematic reviews and primary studies on the effect of social prescribing or social prescriptions that address a non-medical need for older adults in clinical and community settings.

**What studies are included?** This EGM includes 662 articles (232 systematic reviews and 430 primary studies) that assessed and reported the effect of interventions which connect individuals to non-clinical services and activities to improve their health and wellbeing. Studies

could be in any language and come from any region.

**What are the main findings of this gap map?** Most of the evidence is from high-income countries, with very little from upper- and lower-middle-income, and none from low-income countries. The majority of evidence has been published in 2019 or later, and over half of the systematic reviews are of critically low quality.

**What do the findings of the map mean?** The evidence on social prescribing interventions and social prescriptions is concentrated on psychosocial and health system interventions with less on material support and nature-based interventions. Few studies assessed community-level outcomes and adverse effects. There is a need for more high-quality research as many included systematic reviews are of critically low quality. This map can guide interest holders to identify interventions that connect older adults to non-clinical services and can help researchers and funders consider areas of major gaps as priorities for further research.

Read the full review [here](#).



## *Interventions for preventing falls in older people in hospitals*

CHARLOTTE  
MCLENNAN, SUZANNE  
M DYER, WING S KWOK,  
JENNI SUEN, TANIA S  
MARIN, MELANIE  
HALEY, GEOFFREY R  
MURRAY, KATY  
SUTCLIFFE, DYLAN  
KNEALE, CATHERINE  
SHERRINGTON, IAN D  
CAMERON

### **Why is reducing falls in older people in hospitals important?**

Falls by older people in hospitals are common events that may cause loss of independence, injuries, and sometimes death. Effective interventions to prevent falls are therefore important.

### **How do we report the interventions used to assess falls?**

Trials testing interventions designed to reduce falls in older people are grouped by type, guided by the fall prevention classification system (taxonomy) developed by the Prevention of Falls Network Europe (ProFaNE).

### **What did we want to find out?**

We wanted to know which interventions reduce falls in older people in hospitals in terms of the rate of falls (the actual number of falls over a period of time) and risk of falling (the likelihood that an individual will experience a fall). We also examined the impact on risk of fractures, unwanted effects, and economic outcomes.

### **What did we do?**

We searched for studies that compared falls outcomes in people who received fall prevention interventions with falls outcomes in people who did not receive fall prevention interventions. We compared and summarised the results of the studies and rated our confidence in the evidence based on factors such as study methods and sizes.

### **What did we find?**

We found 55 studies involving a total of 104,474 participants. On average, participants were 79 years old, and 45% were women.

Education (staff, patient/family and multicomponent) probably reduces the rate of falls and risk of falling.

Service model changes in acute hospitals probably reduce the rate of falls. We are uncertain about the effect of service model changes on the risk of falling. There were no trials of service model changes in subacute settings.

We are uncertain about the effect of exercise on the rate of falls. Exercise may have little or no effect on the risk of falling in hospital settings overall.

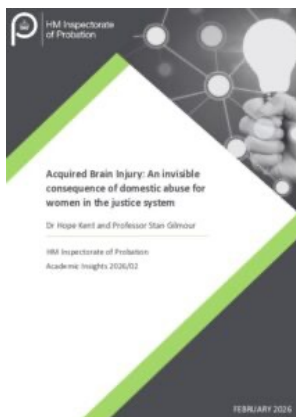
We are uncertain about the effect of medication optimisation on falls.

Multifactorial interventions probably reduce the rate of falls and risk of falling, although it is also possible these interventions have no effect or slightly increase falls.

### **What are the limitations of the evidence?**

We have moderate to very low confidence in the evidence. Our confidence was limited because people in most of the trials were aware of which treatment they were getting, and not all studies provided information about everything that we were interested in. Also, there were problems with the way data were collected in some studies.

Read the full review [here](#).

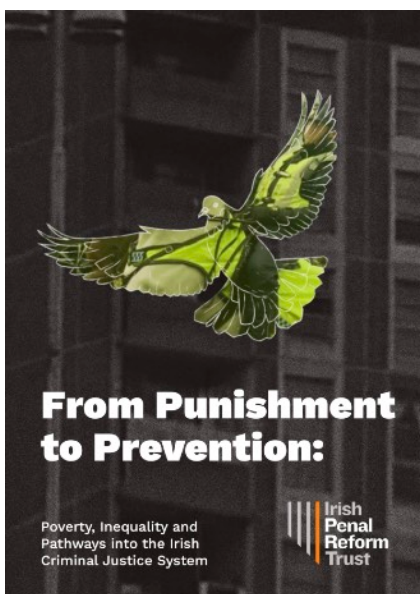


Two *Academic Insights* reports have been published by HM Inspectorate of Probation. The first, by Dr. Hope Kent and Professor Stan Gilmour, highlights the prevalence of Acquired Brain Injury (ABI) and links to domestic abuse in justice-involved women. The second, by Dr. Sophie King-Hill, considers the importance for probation and youth justice of understanding current constructions of masculinity. Both reports are **[available here](#)**.



## UNDERSTANDING AND USING 'RAPPORT' IN WORK WITH MEN WHO USE VIOLENCE IN INTIMATE RELATIONSHIPS

This article by Fliss Holmes, Nicole Renehan and Will Hughes, and published in *Probation Quarterly*, discusses the challenges of creating a 'safe space' that holds men to account and is available on open access on **[this link](#)**.



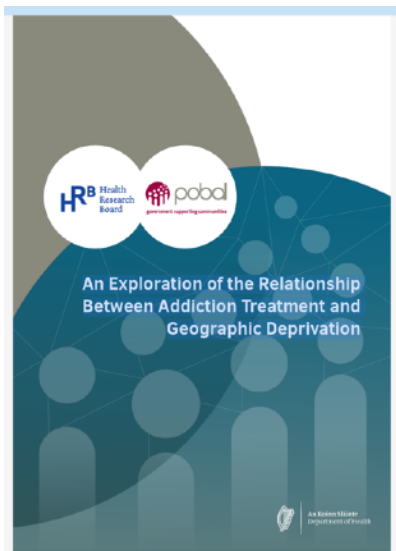
## IRISH PENAL REFORM TRUST REPORT ON PATHWAYS INTO THE CRIMINAL JUSTICE SYSTEM

The Irish Penal Reform Trust (IPRT) has published a report that examines how poverty, inequality and community-level deprivation influence engagement with the criminal justice system in Ireland. The research, undertaken by Clare O'Connor, Aaron Sunderland Carey and Robert Cullen, provides an updated evidence base on the intersection of socioeconomic disadvantage and contact with the criminal justice system.

The report is **[available here](#)** to download.

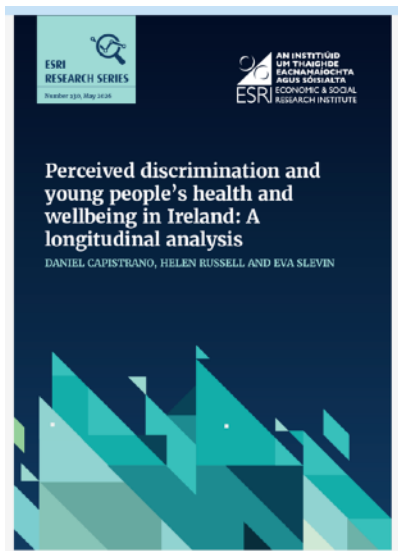


# NEW PUBLICATIONS & REPORTS



Read the full report [here](#).

Read the full report [here](#).



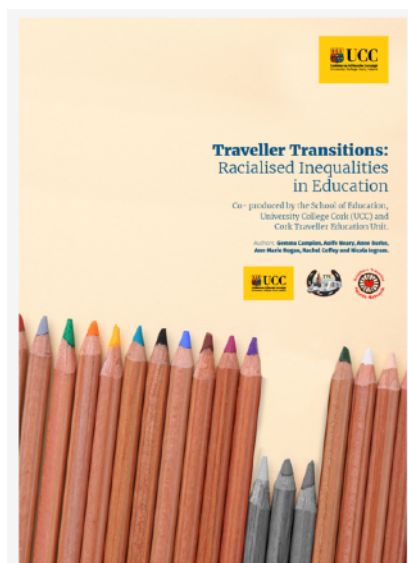
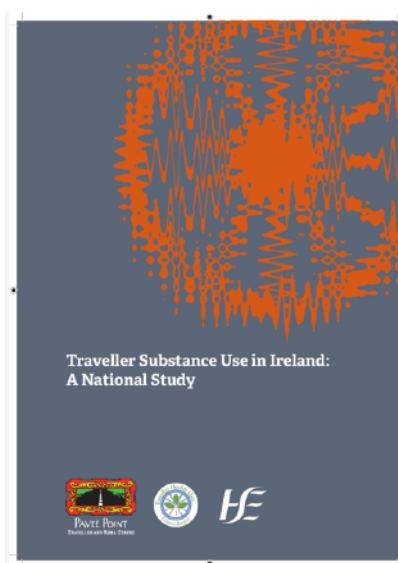
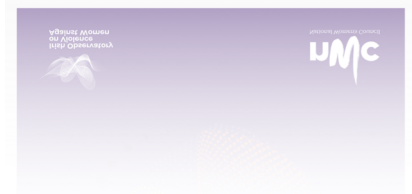
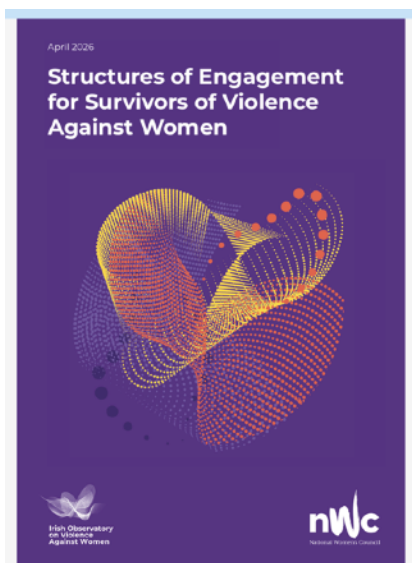
Read the full report [here](#).

Read the full report [here](#).



Read the full report [here](#).

Read the full report [here](#).





## EXPLORING THE RELATIONSHIP BETWEEN ADDICTION TREATMENT AND DEPRIVATION

The report ***An Exploration of the Relationship between Addiction Treatment and Geographic Deprivation*** explores how patterns of deprivation intersect with drug and alcohol treatment provision. The relationship becomes more pronounced as area-based deprivation increases, with the highest rate of treatment episodes seen in the most deprived areas. The rate of addiction treatments in the most disadvantaged areas is 13 times higher than in the most affluent areas. For certain drug types, the relationship is more pronounced. Heroin treatment is 41 times more prevalent in disadvantaged areas compared with the most affluent areas. The pattern of higher treatment rates in more disadvantaged communities holds across every deprivation band and across every drug type. The relationship between deprivation and treatment is weakest for alcohol, although rates are still 7.5 times higher in the most deprived areas compared with the most affluent ones. The relationship between deprivation and addiction treatment was most apparent in urban settlements, particularly cities, and much less pronounced in rural ones

- There were 20,970 treatment episodes recorded in the NDTRS in 2024. Of those, 19,339 included an associated Small Area, which allowed for geospatial analysis and deprivation classification. The data comprised of 14,449 episodes (69%) from outpatient services; 4,474 (21%) from inpatient services; followed by low threshold services (1,815 episodes, 9%) and GPs (232 episodes of Opioid Agonist Treatment (OAT) treatment only, 1%).
- Alcohol was the most common type of substance for which treatment was provided, accounting for 40.5% of all treatment episodes in 2024. Close to one quarter of treatment episodes relate to cocaine use (powder and crack), with heroin, cannabis and benzodiazepine (BZD) the other most common drug types for which treatment was provided.

Addiction treatment and the Pobal HP Deprivation Index:

- Just 3.8% of the population live in areas classified as very (or extremely) disadvantaged, these areas accounted for 15% of treatment episodes for all drug types. While those living in areas classed as 'disadvantaged' represent 10% of the population but 20% of treatment episodes.
- The majority of the general population (71%) live in 'marginally above average' or 'marginally below average' areas while those areas account for only 56% of all treatments.
- This skew towards disadvantaged areas is strongest for heroin, crack cocaine, powder cocaine and benzodiazepines, and weakest for alcohol and cannabis.
- Differences in the strength of the relationship between deprivation and drug treatment were observed across HSE Health Regions (HRs): HSE Dublin and North East has the highest treatment rates within the most disadvantaged areas, while HSE West & North-West is the lowest.

**[Click here to link to the report](#)**



The *Green Zone School Project Report* was launched in Dublin on **13 May 2026**. This was an aligned project of the [TARA Project](#).

The Green Zone School Project evaluated the impact of trauma-informed practices (TIPs) in a DEIS Band 1 primary school in Dublin in 2025. These practices were integrated into school processes to support the complex needs of pupils living in a community with high levels of socio-economic disadvantage and crime.

The research team included Dr Maria Lotty, Academic and Research Advisor (Lecturer), and Eithne Nic Dhomhnaill, Project Researcher (Primary School Teacher), from the School of Applied Social Studies, University College Cork. The research was funded by Sláintecare and Dublin City Council.

[Further](#) details about the project and access to the full report are available on the TARA website under [Trauma-informed Practice in Education](#).

**The Green Zone School Project**  
**An ED- TARA Primary School Evaluation**  
 For Sláintecare and Dublin City Council | Eithne Nic Dhomhnaill and Dr Maria Lotty  
 31<sup>st</sup> December 2025

Logos for UCC, Dublin City Council, and Sláintecare Healthy Communities.

## NEW RESEARCH PUBLICATION FROM THE UCC SOCIAL MEDIA, ONLINE, & DIGITAL ABUSE AND HARASSMENT STUDY

In this new article, published in *Child Abuse Review*, the authors spoke to social workers and managers in the Child and Family Agency about their experiences of social media, online and digital abuse and harassment in Ireland. The article is free (open access) to read on [this link](#).

A further output from this study and article was the creation of a new free-to-access tool for practitioners, managers, and services to figure out where the line is crossed from fair commentary into abuse and harassment. This new tool, based on the experiences of those who take part in this study, and other free tools and videos, are available on this [UCC website](#).

The study was part funded by the Child and Family Agency.

[Check for updates](#)

**Child Abuse Review**

ORIGINAL ARTICLE [OPEN ACCESS](#)

**‘Crossing the Line’: Child Protection and Welfare Managers’ and Social Workers’ Experiences of Social Media, Online and Digital Abuse and Harassment in Ireland**

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**Received:** 10 December 2025 | **Revised:** 6 April 2026 | **Accepted:** 17 April 2026

**Keywords:** abuse and harassment of workers | child protection and welfare | cyberbullying | Ireland | social media | social work

**ABSTRACT**  
 Users of child protection social work and/or their families are fully entitled to express their dissatisfaction with the professional or service through both formal and informal channels. Fair criticism and dissatisfaction can sometimes, however, escalate and cross the line into violence, harassment and abuse (VHA). Social media online and digital platforms have made it possible for professionals to be subjected to VHA around the clock, in front of a wider audience, all the while making it very difficult to escape or disconnect from. But what constitutes ‘crossing the line’? The findings presented in this paper are from the qualitative phase (Phase 2) of a mixed-methods exploratory study of social media and online abuse and harassment of social workers and probation officers in the Republic of Ireland. Nineteen semistructured interviews were conducted with experienced child protection and welfare managers and social workers. The study found that most participants believed child protection and welfare workers were at increased risk of VHA and expected some level of abuse or harassment due to the serious nature of their work. Participants demonstrated an empathic understanding towards the motivations behind the VHA behaviour by the person instigating it. The paper presents a new ‘crossing the line escalation scale’ based on the experiences of social workers and managers in child protection to assist with the assessment of social media, digital and online abuse. The contribution of this study is to provide first-hand accounts and analysis from child protection workers and managers on where this line might be.

**1 | Introduction**  
 Violence, harassment and aggression (VHA) is often accepted and normalised as part of the ‘nature of the profession’ (Lee et al. 2021, 1100) of social work. This is particularly the case in child protection and welfare. Child protection workers ‘often handle clients who might not want their involvement’ (Parveen et al. 2023, 5964). The increased exposure to VHA could partly explain why these professionals rationalise this treatment as an occupational norm (Parveen et al. 2023). Due to the ubiquity of smartphones and social media platforms, workplace violence, abuse and harassment are no longer confined to the physical, in-person workplace or during scheduled working hours (Burns et al. 2024; Halvey et al. 2024). Digital technologies have blurred professional boundaries so that professionals, including child protection workers, can be subjected to abuse and harassment day or night. Before the internet and social media, a letter of complaint was seen only by your manager. Online and social media communications are visible to a global audience, potentially harming a professional’s reputation. For example, if someone makes an allegation on

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*Practice signposts provide links to high-quality, research-informed databases and publications. Some of the databases at a quick glance may seem too medical/health orientated, but contain great resources to support social work and allied professionals' practice.*

### OPEN ACCESS RESEARCH DATABASES:

Trinity Access Research Archive (TARA) - [click here](#)

Cork Open Research Archive (CORA) - [click here](#)

Galway Open Access Research Archive (ARAN) - [click here](#)

TU open access (Arrow) - [click here](#).

### RESEARCH DATA ARCHIVES:

Irish Qualitative Data Archive - [click here](#)

Irish Social Science Data Archive (ISSDA) - [click here](#)

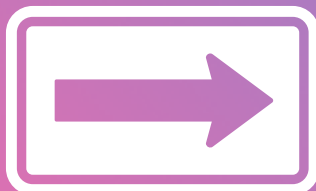
### OPEN ACCESS (FREE) JOURNALS

Journal of Early and Intensive Behaviour Intervention; International Journal of Child and Adolescent Resilience (IJCAR; Journal of Global Social Work Practice; International Journal of High Risk Behaviours and Addictions; Journal of Indigenous Social Development; Critical Social Work; International Journal of Child, Youth & Family Studies; The Irish Journal of Applied Social Studies; Comparative Migration Studies; Irish Social Worker.

### SYSTEMATIC REVIEW DATABASES:

Cochrane Collaboration Library - [click here](#)

Campbell Collaboration Library - [click here](#)



***Practice signposts: data sources to support your practice***

### PRACTICE GUIDANCE, DATABASES & PUBLICATIONS:

Addiction Technology Transfer Centre Network (USA) - [click here](#)

CES - Centre for Effective Services - [click here](#)

Child and Family Agency Publications and Reports - [click here](#)

Drug and Alcohol Information and Support (drugs.ie) - [click here](#)

Growing Up in Ireland - national longitudinal study of children. [Click here](#)

HSE Health Promotion Publications - [click here](#)

HSE Publications and Reports - [click here](#)

HRB National Drugs Library - [click here](#)

HUB na nÓg Young: Voices in Decision-Making - [click here](#)

NICE - National Institute for Health and Clinical Excellence (UK) - [click here](#)

Mindfulness Based Relapse Prevention Resources (free audio tracks) - [click here](#)

Probation Service Publications - [click here](#)

Social Care Institute for Excellence (SCIE) - [click here](#)



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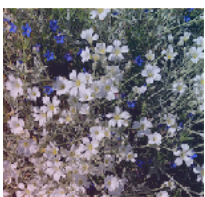
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