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| <b>Title</b>                        | A discussion of international, national, discipline and institution contextual factors that impact on the design /redesign of a Post Graduate Social Work Programme in Ireland |
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| <b>Publication date</b>             | 2009   |
| <b>Publisher</b>                    | University College Dublin. School of Applied Social Science  |
| <b>Item record/more information</b> | <a href="http://hdl.handle.net/10197/3013">http://hdl.handle.net/10197/3013</a>  |

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**Cite as : O'Brien, Valerie (2009) : Working Paper Series**

**A discussion of international, national, discipline and institution contextual factors that impact on the design /redesign of a Post Graduate Social Work Programme in Ireland.**

## **Introduction**

Professional social work education is generic and provides a set of practice skills that can be applied in a broad range of settings. According to O' Reilly and Quin 2008 p2 'there have been limited opportunities in Ireland for generically trained social workers seeking further training in particular areas of practice'. This finding is critical when the recent debate about whether social workers are equipped to fulfil a counselling role is considered (McCarthy 2004, NSWQB, 2006, p 53; O'Reilly & Quin 2008 p 3). The NSWQB in 2006 called for continuing advocacy and proactive promotion of the profession in the broad healthcare field to address the perceived lack of understanding of the social work skill set in a multi-disciplinary context. While this call is to be welcomed, I would suggest that there is a need to address the inter-relationship between limited post-qualifying training, lack of understanding by other professions of the skill set and the debate about legitimisation of social workers involvement in counselling and therapeutic work.

The purpose of the paper is to examine what international, national and institutional influences need to be considered in appraising the need and design of a post-qualifying training in therapeutic or counselling social work. It is my view that such a programme could augment both the existing social work counselling skill base and could provide a mechanism whereby social workers identity and work opportunities in the therapeutic and counselling roles would be enhanced. This paper will examine the feasibility of the programme and the issues/ influences that need to be considered in the design of the curriculum.

## **The Programme**

The Masters in Therapeutic Social Work Practice is a two-year part time programme. It is aimed at professional social workers with at least two years post-qualifying experience. The entry requirement is a National Qualification in Social Work (NSWQB), but it is likely that many Irish candidates will already have obtained a Masters degree in Social Work in addition to the professional qualification. The programme is a partnership initiative between Senior Social Work practitioners in St John of Gods, Rathgar, Dublin and staff at the School of Applied Social Science, UCD. I am the academic coordinator for this programme, and it is envisaged that we will have our first intake either in September 2009 or January 2010. A maximum of 20 places will be offered.

The programme aims to provide students with an in-depth knowledge of three psycho-therapeutic approaches and an opportunity to apply this knowledge and skill level in a range of social work settings. The modalities are:

- (1) Cognitive behavioural social work;
- (2) Psycho-analytical approaches in social work; and
- (3) Systemic and relational approaches in social work.

At this stage, the course has been sanctioned by the college approvals process. However, the detailed course design needs a major re-appraisal since this original sanction was obtained in 2008.

### **A Snap-shot of the Social Work Profession in Ireland**

The NSWQB 2006 survey showed that the Irish social work labour market was a growing sector, with a total of 2,337 social workers in 2,237 posts in place at the time the survey was conducted in 2005. The changes in the labour market from 1999 to 2005 are presented in Table 1.

**Table 1 Number of Social Work Posts in Ireland**

| <b>Year</b> | <b>Posts</b> | <b>Increase</b> | <b>% Increase</b> |
|-------------|--------------|-----------------|-------------------|
| 1999        | 1390.3       | -               |                   |
| 2001        | 1992.6       | 602.3           | 43.3%             |
| 2005        | 2237.4       | 244.8           | 12.3%             |

(Source NSWQB 2006)

The NSWQB survey (2006) shows that social workers are employed in a large number of settings. The HSE is the major employer of social workers, with nearly 60% of all posts located across its various services. The Probation and Voluntary /Community sectors both account for 13% each. Other large employers are Hospitals (10%). Local authorities, one of the smallest sectors, employ 4%. The HSE employs 72% of newly qualified social workers, who are predominantly involved in delivering front-line services in the broad family and children areas (NSWQB 2006).

Social work is still a predominantly female occupation. The survey showed that the workforce was comprised of 83.2% females and 16.8% males. Social work was seen to be a young person's profession, with 36.2 % of workers under 35 years of age. The proportions in the 36-45 (26%) and 45- 55 (25%) age range are almost equal. The gender and age distribution may prove to be significant factors in attracting social workers to a training programme. Balancing family and work commitments is a challenge for most, and it is especially critical when parents of young children are dealing with the demands of work and child-care simultaneously. There is evidence that many women carry a disproportionate part of the workload of child care and domestic duties, even when they are working full-time in the labour force (Fanning et al, 2004; Fahey 2006)

## **INTERNATIONAL FACTORS THAT MAY SHAPE THE COURSE PROVISION**

### **Economic**

Uncertainty arising from the world-wide economic crisis has had a major influence on the Irish economy, and this in turn raises a question mark on the feasibility of many educational programmes at post-graduate level. In a context of severe cutbacks in public sector funding, the provision of funding for ongoing training has been a major casualty. As a result, assumptions made a few years ago in course planning need to be reviewed in light of this landscape change. However, the current recession is likely to see increased international movement of labour, and there is a need to ensure that Irish graduates and professional social workers are educated to international benchmarks which ensure they are employable abroad. It is also possible that additional education and skills enhancement, achieved during recessionary times, will pay dividends when an upturn occurs in the global economy. These two factors may be pertinent in campaigns aimed at attracting participants to the programme.

The move, almost to parity, in the exchange rate between the Euro and Sterling is a factor that needs consideration. In 2008, at the inception of this programme, Northern Ireland social workers were seen as a potential market. There are currently 2,551 social workers employed in 2,295 posts in Northern Ireland. The ratio of population for each social work post in Northern Ireland is 734.2 per post, compared to 1,892.8 per post in the Republic (NSWQB 2006, p48). The current exchange rate may however now be seen as making the fee costs too high for this market segment. This is exacerbated by the lower levels of income earned by Northern social workers, compared to those in the Republic.

Another international issue, which also may have impact on this course, is the migration of social workers into Ireland. A major shortage of social workers emerged in 1999, and many organisations, especially the HSE recruited in South Africa, Australia, UK and USA. As a result, many professional social workers were recruited and came to Ireland from these countries. Returning Irish emigrants and emigrants from abroad accounted for one third of the labour force in 2005 (NSWQB 2006). While this trend has now stopped, many of the workers already here are a potential market pool for a course such as we are proposing. Social workers would be expected to obtain post-qualification education in these countries also. There is evidence that many of the migrant professionals tended to see their stay in Ireland as temporary, and were interested in returning to their own countries eventually (IAA Report, 2008). Therefore, if planning to return home at some stage, they may see this course as an opportunity to fulfil that training need. While this may be a factor boosting the potential market pool, it may also require the curriculum to have an international focus in practice delivery.

Recruitment of greater numbers of overseas students to graduate programmes is currently part of higher education institutions strategy to counteract the depressed domestic economy. The possibility of charging large fees is seen as economically advantageous to the institutions. However, this is a highly competitive international market, and as such it is unlikely that a programme of this nature would attract international students in the first instance. However, there may be opportunities further down the line to recruit

internationally. The School of Applied Social Science is hosting an International Social Work Mental Health Conference in 2010. Such a high profile international conference could be used to show case the innovative aspects of the course. It is envisaged that staff and students associated with the course would raise the course profile through submitting abstracts for workshops and presentations to the conference. This is attractive as there is a no or very low marketing cost for the School.

### **Legislative**

International conventions such as the UN Convention on the Rights of Children and the European Convention of Human Rights are pivotal in providing principles on which services and education courses are built. Specific international legislative instruments, however, do not bind the provision or development of therapeutic social work in Ireland. While EU legislation has an influence on general work practices, there are no EU professional registration criteria in place as yet. However, this may occur if the Registration of Professionals provisions, contained in the Health and Social Care Act, 2005 are implemented. However, the role of counsellor or psycho-therapist is not one of the designated professions contained in the legislation, while social work is. The Irish Council for Psycho-therapy (ICP 2008), is advocating for a legislative change to include the title psycho-therapist, as registration criteria currently being developed at European level (ECP 2008) will have implications for use this designated title. This issue will have implications for the curriculum design, only in so far as how this course positions itself as a social work only qualification, or as a qualification which is recognised as fulfilling partial requirements for a psycho-therapy qualification. This issue will be discussed further under the National section of this paper.

The issue of the social worker's role as therapist and counsellor is a critical issue in the design of this course, and the pathway that this course may take its graduates. Other related professionals, such as nursing, psychology and social care are availing of post-graduate training to equip them to work in the therapy and counselling domains. It is relevant that in the last month, three courses aimed at multi-disciplinary audiences in the social and medical fields have been advertised offering training opportunities in addiction, mental health and hospice care in the Irish Times in the months of Feb and March 2009. All of these courses envisage the students acquiring counselling experiences. To that end, it is important to appraise what is happening internationally.

### **Political**

The role of the International Federation of Social Workers (IFSW) in ensuring or advocating for the social workers' role in the provision of counselling services, and for post-qualification training in this area, appears limited. A search of the IFSW-sponsored "Journal of International Social Work" found few references to this issue. This lack of reference does not imply necessarily that this issue is unimportant in individual countries. It may be more that a critical mass has not yet been reached in the international field to warrant a special issue or focus on this topic in the journal.

Nonetheless, it is important to consider what is occurring in terms of therapeutic work for social workers internationally. Such consideration needs to take account of the difference in educational criteria and standards in various countries. While the Bologna Declaration 2000 has had a major influence on providing a framework to enhance standardisation of education and qualifications, there are still significant variations. In the UK, a three-year course is considered sufficient for qualification. In Ireland, an undergraduate qualification in social science (which included social policy) followed by a two years masters programme is the normal requirement. The Irish model is more similar to the USA and Australia than it is with many European countries. The job description of the social worker in countries that require Masters Standard of education is different from those not requiring this level of qualification. It is interesting to note that it is in countries that already require masters level education that there is more demand for enhanced post-qualifying training in therapeutic skills, and that the issue of the legitimisation of social workers as therapists and counsellors has arisen most.

A further factor that is shaping this debate internationally is the public-private mix in service provision and funding. In countries that have a high level of insurance-funded, privately-provided therapeutic service e.g. Netherlands and USA, it is the insurance companies that stipulate the qualifications required (or what they will pay for). This has been a driver of developments in these countries. It likely that as insurance companies expand the range of alternative therapies they are willing to pay for here, the issue of who is eligible for funding to provide therapy and counselling services, and the standardisation/ recognition of qualification will increase in significance.

In summary, the international trend that may impact on the shape of this programme is the serious economic downturn, and the migratory patterns for professionals associated with the downturn. Irish people, or returning migrants, may consider that additional training will augment their chances of employment (or better quality employment) when they travel overseas, or when they return to their country of origin. This could be used in the marketing strategy, but will be challenged by the significant fee charges at a time of cuts in incomes, slashed support for training and reduced employment opportunities. Large-scale funding by any of the major employers for course provision is unlikely in the foreseeable future, and it is more realistic to assume that participants will be self-funding the costs.

I will now turn to consider the specific factors in the National and Social Work Discipline spheres that may be influential in indicating the likely success of this programme.

## **NATIONAL AND DISCIPLINE FACTORS THAT MAY SHAPE THE COURSE PROVISION**

### **Political and Social Drivers**

The emergence of ‘therapy’ and therapist and ‘counselling’ and counsellor as separate designations from social work is a major challenge for the profession. The limited involvement of the social work profession in the conversation and in developments in the counselling and therapy field (Irish Association for Counselling and Psychotherapy, 2009; Irish Council for Psychotherapy, 2008) has resulted in the profession being ‘outside the loop’ in many ways. As mentioned earlier, the challenge to what may have been perceived as a traditional social work role, where allied professionals are providing a counselling service, is a major driver. Despite the history, social workers are in a good position to reclaim a significant stake in counselling/ therapy activity as the ‘Social Worker’ is a designated profession in the Health and Social Care Professionals Act, 2005, while ‘therapist’ and ‘counsellor’ are not.

The job descriptions of many of the 2,237 social work posts in the country identify counselling as part of the wide range of social work activities. Yet, there is evidence that when specific counselling and therapy services were set up - e.g. Service for people involved in Institutional Abuse (Eastern Health Board, 1994) - only professionals with a specific therapy /counselling qualification were employed. Social workers were not considered to be fully qualified for inclusion in the competition. This issue was not addressed by the profession at the time, and since then there have been similar developments in other services. The lack of attention to this subject may be associated with the extraordinary expansion of the social worker profession over these years. This expansion/ change can be tracked to new statutory requirements, changes in political priorities, service needs, media scrutiny and public expectations of high quality services in child protection.

In many multi-disciplinary teams, the specific counselling role can be threatened by levels of confusion about what is involved and by the lack of visibility of what is involved. Currently, in a context of scarce resources, there is likely to be pressure for more focused or clearly visible solutions than what counselling can offer. The challenge remains for social workers to show the fit between what they can do and the changing contexts of which they are part.

It may be that the over-identification of social workers with child protection has impacted on the professions image in the public mind in Ireland, and thus the public may not see or expect social workers as providing therapeutic services capability. If this is the case, specific marketing may be required to counteract this perception, among both potential customers and funders for the course.

There is a well-established pattern of UK service delivery trends being replicated in Ireland, even if it there is up to a ten-year lag! In the UK, many social work posts in multi-disciplinary teams in child and adolescent mental health service teams (CAMHS) were replaced by Systemic Therapists and Cognitive Behavioural therapist posts and only social workers with recognised qualifications in these areas of practice were eligible to apply for them. The critical issue is it represented a move from a designated social work job to a therapist job. The provision of post-qualifying specialist training may be a

significant counter to this happening here in Ireland, and retaining the social work profession in such teams.

Other initiatives may be needed to enhance understanding, and changes may be needed in the structure of multi-disciplinary teams that will enhance efficiencies, effectiveness and user and funder satisfaction with the services delivered. The social work profession can respond to this challenge, and advanced training can pave the way.

The evidence-based practice debate is critical in any appraisal of the factors that influence curriculum design (Norcross & Lambert 2006, Lambert et al 2006). There is some evidence of the influence of this debate here in Ireland (Carr, 2009) but it is not as evident as it is in the UK and USA. The therapeutic programme must demonstrate that it is firmly committed to evidence base and in the process, it needs to take account of how social workers create and use research. It must also provide a framework within which students on the programme will obtain a greater appreciation of the need for evidence in their practice. A focus on what actually works in therapy will be central in the course. There is a need to focus on the evidence for what helps people stay with plans and what are the factors that account for clients prematurely leaving services. There is evidence to show that the relationship developed between client and therapist is central, and that the differences in approach is less a factor in creating and sustaining therapeutic change.

The need for continuous professional training is a requirement in the 2006 Act, and while the relevant aspects of the legislation have not yet been commenced, professionals are already mindful of the need. The therapeutic social work programme is timely in that it will meet the demand for such a programme, as identified by the NSWQB 2006, the IASW 2007 and by individual practitioners in the field. The willingness of social workers to avail of post-qualifying training, even prior to this legislation, is evident. A sizable number of those now registered by the Irish Council of Psychotherapy are social workers, and many continue to hold social work posts. Specific data is not available regarding the exact numbers of social workers now registered. As one who plays an active role in the Family Therapy Association of Ireland (FTAI), I have been able to observe overall trends. Key to the appraisal of this programme is that social workers have demonstrated that they have been willing to undertake training at substantial cost. Psychotherapy training is now 4 years part-time in duration and the total cost is of the order of 36,000 Euros. Specific data as to the reasons why social workers have undertaken psychotherapy training is not available but from observation it is connected with the following

- Wish to enhance skill-base;
- Improve competence in therapeutic work, by acquiring in-depth knowledge and practice know how;
- Open up career opportunities;
- Opt to work in private practice or hold part time social work post in addition to private work.

Of critical importance to the curriculum features and viability of the programme are social workers' willingness to avail of a two-year, part-time training /educational option aimed specifically for their profession. Also will there be sufficient numbers with an

interest in pursuing post-qualification training who wish to hold on to a specific social work identity. Or is the attraction of having either a social worker /psychotherapist therapist or having a psychotherapist /therapist identity stronger? The appraisal of these questions will be assisted by examining the economic context and specifically the funding issue for this programme.

### **Economic**

This course must cover its costs, including overheads, as a minimum. Based on detailed costings, a minimum of 20 participants is required at a fee of 7,500 euro each, would provide a total budget of the €150,000 required. At this stage of the programme development, there are three possible funding options for consideration:

- The first is a scenario where an organisation (e.g. the HSE) might sponsor all twenty course places at a cost of 150,000;
- The second option is one where the course is comprised of individuals that will self fund; and
- The third option is where the course is comprised of a mix of sponsored and self funded participants.

The likelihood of finding an employer in a position to fund a new course is low in the current economic climate, when the issues identified in Section One are considered. Nonetheless, different options worth exploring are as follows

- HSE : Different parts of the organisation who have specific interest in the therapeutic/ counselling area could be approached i.e. Primary Care, Mental Health and Child Welfare
- HSE : Focus specifically on one of the above sectors and dove-tail the programme to their specific needs
- Voluntary Sector e.g.: Barnardos : Adoption Related Services; Other voluntary bodies that may employ social workers across a range of services e.g. Daughter of Charity

In the event of block-funding not being available, the only alternative option is to assess the extent to which individuals are willing to self-fund. The training budgets normally available to re-imburse individual public sector staff who undertake courses have been stopped, and as yet the facility to apply for unpaid leave to study has not changed. The impact of the recent nett reductions in salaries, and the uncertainty associated with the forthcoming budget are very real financial constraints, even for people who are strongly motivated. It would be necessary to run a targeted advertising campaign, and the programme would have to be presented as offering some or all of the benefits below to the participating social workers:

- Provides an opportunity to up-skill, and give greater sense of competence to individuals in their daily jobs;
- Meet forthcoming legislative requirements for continued professional training;
- Improves multi-disciplinary relationships, through recognition of increased professional competence;

- Provides a better quality and more assured service to clients;
- Career development/ alternative path potential within public service provision;
- Improves possibility of getting senior practitioner jobs.

To that end, the curriculum must aim for a quality standard that will ensure that these benefits will be realised. The final part of this paper will now consider the principal institutional aspects that need to be considered as part of the curriculum development.

## **INSTITUTIONAL FACTORS THAT MAY SHAPE THE COURSE PROVISION**

The key issues that warrant attention as part of the institutional context are the partnership component of the programme, the mandate within the School and the University, and the programme structure and the course content.

### **Current Situation**

This course has been approved within the UCD structures, and a limited amount of staff time has been allocated for course development. A course content framework was put forward as part of the original proposal in 2008, and module descriptors were submitted. These descriptors were devised principally to comply with college procedures, and they were not necessarily detailed in the way that the course needs to develop. Further work is needed on curriculum design approaches and the balance between clinical and academic course content required.

Preliminary costing have been devised and while this too needs more detailed work, key costings such as organisational overheads and staff time in respect of teaching, administration, programme direction, have been identified.

### **Partnership**

This course has been devised as a partnership between St John of Gods and UCD but draft contracts have not yet been prepared. It is envisaged that most of the course will be delivered in St John of God premises, but as it now appears there will be less of a direct clinical role for the students that was originally intended, it is likely that the students will spend more time in UCD. This would enhance their connection and identification with the School. Three senior social work practitioners from St John of Gods are to be involved in course delivery. Additional social work professionals that already have specialist training have been identified, but they have not yet being formally approached. They are a potential resource for the course, as clinical supervisors or as teachers, depending on the balance decided on.

There is need to devise a robust partnership agreement that includes an outline of the structure, principles and the demarcation of tasks and roles. I have experience of being on the Board of Studies for a Masters Programmes in Psychotherapy, which was provided in external settings. In these cases, the organisations involved had a formal teaching hospital status with the university. With this current proposal, this would be a first collaboration between the two organisations. There is a history of good professional relationships between the players involved in discussions to date. Key issues will be

- How to structure the ownership of the course in such a way that UCD can engage with additional clinical settings to deliver this programme if this is necessary?
- Are college procedures flexible/ robust enough to facilitate the agreement necessary? Are there certain 'administrative' issues that we can anticipate?
  - What level of induction is required for the external staff and UCD staff involved?
  - Is there a clear view of who is going to undertake the significant blocks of work necessary to develop and run such a course?
  - Are there sufficient mechanisms to monitor delivery (and adjust as required) to meet the expectations of students and academic and practice requirements?

The course has been devised for course approval purposes, but there is a need to develop the programme in greater detail. Best practices in teaching and learning will inform the course development and plan. This will take account of the level of experience of the students, their learning needs and the challenge of equipping them with clinical skills that will enhance service delivery for employers, clients and the professionals involved. As yet, there are no parameters for post-qualifying courses laid down by the accreditation body NSWQB. However, it is intended to submit this programme for accreditation as soon as the detailed course content has been decided. Under the legislation, the NSWQB will be replaced by a council and the current board's terms of office has just been extended for another year. Obtaining accreditation from this social work specific body would be useful, prior to the establishment of the new Council. The new Council will carry responsibility for all health and social professionals, and it is likely that they will take some time prior to being fully conversant with social work specific issues.

The last issue that needs to be considered is the level of support for this programme within the School context. Support from the key players such as the Head of School and staff group is required. In the current climate, research is seen as the most important currency for promotion/ tenure purposes, and therefore all parties that will be involved need to be aware that their involvement will be valued. Therefore the question of how to ensure that the priority given to this course can be assured for staff promotional purposes needs to be formally addressed with the Head of School and the Principal in the College. This is critical, as currently there is a level of discontent among staff towards this new additional programme, as it is seen as adding further to the teaching load at a time when the research output needs to be increased. There is support for the general idea, but staff are wondering if it is feasible to develop and deliver it? Furthermore, there is a view that even if money is raised, the embargo on staff recruitment would impact and they would be expected to carry the heavier load. These institutional issues need to be fully considered, together with the critical issue of sufficient self-funding students being willing participate in this programme

### **Conclusion**

In this paper, the international, national, discipline and institution contextual factors with the potential to impact on the design of the master's programme in therapeutic social work practice have been described. The key drivers of this programme's viability are the need for different stakeholders within the social work profession to have access to continued professional development, the encroachment by other professionals on the

historical role of social workers as counsellors, the emergence of counselling and therapy as distinct professions that threaten the social work profession's future work opportunities, and a greater emphasis in service provision by funders and users for quality and evidence-based practices.

While there are many drivers for a programme of this nature, the current economic situation and the lack of public sector funding for continued training means that the viability of the programme is under serious question. This is a critical threat, and the market needs to be tested prior to investing hugely in this project. If the course is to be provided, investment needs to be made in working up the detail of course content and addressing the institutional issues identified. To that end, it is proposed that a small budget for market research is obtained in the school. The key messages identified in this paper can be used for strategic marketing and the campaign needs to be run to the target audience between mid-April and mid-May, as this is the time period when potential candidates make their decision. When we elicit the level of interest, and the probability of making the necessary commitment among the potential pool of students, the decision to resource the next stage of course development can be made.

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