Young People, Food and Alternative Education And Care

Proceedings of Children’s Research Centre Seminar, 23 November 2011
Food, Young People and Alternative Education and Care

Proceedings of a Seminar held on 23 November 2011 at the Neill/Hoey Lecture Theatre, Trinity Long Room Hub Building.

Michelle Share and Marita Hennessy (Editors) January 2012


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Background & Context

The Children’s Research Centre, Trinity College Dublin hosted this seminar as it believes that the topic of young people, food and alternative education and care has received little attention within the broad debate on young people, food and eating.

The seminar showcased Irish and UK research that considers food and nutrition issues for young people in alternative education and care settings. It provided an occasion to network, to progress debate and to inform policy and practice by bringing together individuals and organisations from a range of disciplines and sectors.

Following four 20-minute presentations, participants were given the opportunity to pose questions to the speakers and participate in round table discussions. These discussions considered the implications from these studies for research, policy and practice and where to from here.

Opening Address

Professor Robbie Gilligan welcomed everyone to the event and highlighted the unique opportunity to bring together a range of disciplines and sectors to share and discuss experiences around food issues for young people in alternative education and care settings.

Professor Robbie Gilligan (Professor of Social Work and Social Policy, Trinity College, Dublin)
Overview of Presentations

Ms Deirdre Byrne (IRCHSS Scholar & PhD Student, Institute of Technology, Sligo)

Food and residential care for young people
Ms Deirdre Byrne, IRCHSS Scholar, Institute of Technology Sligo

Ms Byrne gave a brief history of food in residential care settings ‘from Oliver Twist to Jamie Oliver’ that forms part of her PhD thesis. She recounted experiences of food in a range of settings, from foundling hospitals, to workhouses, to industrial and reformatory schools (1850s to 1970s), to Group Homes (1970s to 1990s) and finally to residential care in modern times. She highlighted that from 1703 until the 1970s, the children in residential state care in Ireland were very often hungry. The National Nutrition Survey carried out in the late 1940s (Department of Health, 1952) found that the diet of the majority of lower income families in Ireland was similar to the diet provided in the institutions. The diet lacked variety and choice but the survey concluded that the average nutritional intake was adequate at that time. A notable absence in the studies on food and residential care from the 1970s onwards is - what are the young people in residential care today actually eating? If the trend of how we have fed young people in care continues, then their food and eating practices may be similar to the young people in the National Teen’s Food Survey who were eating more the recommended daily allowance of sugar, salt and fat (Irish Universities Nutrition Alliance, 2008). They were eating mainly white bread and processed meats. Their fruit and vegetable intake was low and their consumption of fibre was inadequate.

Ms Byrne concluded that her research would continue with the exploration of care and control within residential care centres with particular reference to food. The analysis of power relationships between young people and residential care workers that are played out through food practices will make a significant contribution to: the knowledge of everyday life within residential care centres; to an understanding of the attitudes and practices of residential care workers and more broadly to the institutional food practices in Ireland.

1: Irish Research Council for the Humanities and Social Sciences
Dr Emond provided background to a study she conducted in 2007 and 2008 with Samantha Punch and Ian McIntosh, on the use of food in residential care. She highlighted the power of food in the everyday life within residential care settings in terms of the ‘nurture of body and soul’ and the complexity of residential life in which past, present and futures collide.

Fieldwork was conducted between January 2007 and March 2008 in three residential care units in central Scotland. It involved three blocks of participant observation over a 12-week period and group and individual interviews. Twenty-one children (14 boys and 7 girls), aged between 9 and 18 years, were resident in the residential care units during the course of the fieldwork. Sixteen children (11 boys and 5 girls) and 46 members of staff (26 women and 20 men) participated in an individual interview and/or a focus group.

Dr Emond focused on four particular themes that emanated from the study:
1. Creating a home in an institution and workplace
2. Care and control
3. Expressing and repressing feelings
4. Making relationships.

The social aspect of food was emphasised and its symbolic, and therein emotional nature discussed. Dr Emond concluded her presentation by highlighting implications for practice:
- moving beyond nutrition;
- food provision as the window to the culture as well as the individual;
- food as ‘therapy’/recovery;
- food as the link to ethos and aims of the service; and
- the power of the everyday.
Early school leavers and nutrition: A needs assessment
Ms Marita Hennessy, Children’s Research Centre, Trinity College Dublin

Ms Hennessy provided an overview of developments with this study, which is currently being undertaken by the Children’s Research Centre, led by Dr Michelle Share in collaboration with the University of Ulster. The study, funded by safefood, investigates the nutrition needs of early school leavers on the island of Ireland.

Early School Leavers were defined at the outset as young people who leave (or are excluded) from the formal education system on (or before) reaching the statutory school leaving age and/or without achieving upper secondary educational qualifications (aged 16-20). The study aims to establish the key structures for accessing early school leavers, identify relevant health promotion activities and appropriate programmes that could be implemented in early school leaver settings that focus on healthy eating and lifestyle issues.

An overview of the study methodology was given and preliminary findings, from the ROI dimension of the study, discussed. Ms Hennessy emphasised the social role that food played in early school leaver settings, as well as nutritional aspects. A number of issues concerning the diets of young people were identified (e.g. under/over nutrition, over-reliance on convenience food, neophobia and barriers such as lack of skills, cost, lack of interest/time) and how settings address these. There are, however, concurrent issues such as drugs and mental health. Existing health promotion activities in settings focus on the curriculum, policy/environment and links/partnerships with other organisations.

Ms Hennessy noted that there is limited evidence in the literature of interventions amongst early school leavers and in related settings. Intervention programmes about nutrition and healthy lifestyles focus mainly on the formal school setting. Ms Hennessy outlined a number issues for consideration when addressing food and health issues for young people in alternative education settings:

- The need for a holistic approach and the consideration of literacy needs;
- The potential of interactive media literacy approaches and peer education programmes;
- The synthesis of existing curricular programmes in order to bridge the knowledge-behaviour gap; and
- The need for a more sustainable approach; much work relies on the enthusiasm of key personnel, funders measure success quite narrowly (focus is on certification) and young people bridge home and centre environments.

Ms Hennessy concluded her presentation by thanking the study participants, funders (safefood), collaborating partners (Dr Barbara Stewart Knox and Jenny Robinson, University of Ulster) and the Study Advisory Group members (Susanne Shevlin, Health Service Executive Dublin North East; Dr Dermot Stokes, Department of Education and Skills-Youthreach; Irene Thompson, Southern Health and Social Care Trust; and Jude Whyte, Belfast Metropolitan University).
Dr Share began her presentation by highlighting key disability policy developments in Ireland in the last 15 years. She noted the limited or no reference to food/nutrition/diet in these policies and that gains in inclusion for people with disabilities are likely to be compromised by poor health outcomes. While the general population has been the target of much attention around smoking, drugs, alcohol, physical activity and diet, little or no attention has been given to these issues for people with intellectual disabilities.

An overview of diet-related health issues among people with disabilities was provided, these included:

- overweight and obesity (Rubin et al, 1998)\(^4\)
- poor dietary practices (Adolfsson et al, 2008)\(^5\)
- diabetes (Reichard & Stolze, 2011)\(^6\)
- poor dental health (Desai et al, 2001; Svatun & Heloe, 1975)\(^7\)
- unmet health needs (WHO, 2011)\(^9\).

Issues concerning the social aspects of food and eating in the disability setting were explored. These included cooking skills; poverty, poor housing, social isolation; lack of understanding about need for balanced diet; lack of experienced staff specialist eating support at meal-times; food as a site of control and resistance; infantilisation of young adults; and food and identity in terms of stigmatization.

Examples of good practice internationally were provided, including Eating well: Nutritional and practical guidelines for children and young people with learning disabilities (Caroline Walker Trust, 2007)\(^10\) and Nutrition rights for individuals with intellectual or developmental disabilities (Montana Disability and Health Program)\(^11\).

Dr Share concluded her presentation by stating that good practice exists but it needs to be documented and shared. In Ireland there is a lack of evidence of the nutritional status of people with intellectual disabilities. Carers of people with intellectual disabilities are also an important group. Their needs must be considered in terms of their level of knowledge and skills in catering for the nutrition and health needs of young people. For the young people’s families and health professionals there needs to be education and awareness of this issue. A more socially inclusive response to food and health issues for young people with intellectual disabilities is urgently required. Rather than passive dietary health promotion, young people and their families need empowerment on this issue.

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Highlights from Panel & Workshop Discussions

Workshop discussions centred on the three themes suggested by the organisers:

1. personal experiences of mealtimes;
2. the function of mealtimes in alternative education and care settings; and
3. what should be done to advance the debate on food and health issues for young people in alternative education and care?

Personal experiences of mealtimes:

- Pleasurable experiences in most instances – although some not so positive, e.g. eating occasions at other people’s houses and in boarding school
- Many participants recounted experiences of spending time alone with mothers/fathers, various roles assigned around mealtimes (e.g. setting the table) and high regulation, life on farms, the gender divide and the changes that have taken place in the food supply chain.

Function of mealtimes in alternative education and care settings:

- Nutrition; social interaction and learning; life skills development; communication; problem solving/raising issues; inclusion; breaking down barriers (e.g. between adults and young people); role modelling
- One participant offered the international symbol for breastfeeding as being applicable in describing the role of food in care settings, in terms of its nutrition and caring components. The reciprocal relationship between food and caring was discussed
- Hierarchies can be evident: teaching/care staff – young people – cooking staff
- The key relationship that can develop between young people and cooking staff was highlighted. The fact that cooking staff are often undervalued was noted
- The importance of consistency (in terms of staff, mealt ime practices and quality of food) and reliability, along with a degree of flexibility, was stressed.

What should be done?

- Train staff around food and nutrition, including cooking skills
- A focus on undergraduate programmes in social care and social work is required
- Create an awareness of the social role of food provision in addition to meeting dietary requirements
- Advance the discourse around food and mould a positive, rather than negative focus; currently the obesity debate presents a negative view of food in everyday life
- Capture the voice of young people in terms of research and practice
- Work with parents – bridge settings that young people move between
- Ensure those responsible for purchasing food within settings understand the importance of providing good nutrition
- Focus in particular on the development of knowledge and skills (e.g. shopping and cooking) of young people who are about to leave care
- Seek a champion to advance the issue and get it into public consciousness
- Develop a manifesto on the nutrition rights of children and young people
- Draft regulations for children in residential care
- Disseminate existing practice and knowledge
- Undertake/commission research to develop the evidence base.
Concluding Remarks

Dr Share thanked everyone for their valuable contributions to the seminar. In particular she thanked Carol Farrell (Special Olympics Ireland), Maurice Fenton (Rainbow Community Services), Sinead Keenan (Healthy Food for All), Clodagh Morris (safefood) and Mary Russell (Health Service Executive) for facilitating the workshop groups.

By means of follow-up from the day, Dr Share stated that the Children’s Research Centre (CRC) would produce seminar proceedings. She said that the CRC was interested in hosting future similar events and potentially hosting a network for interested parties. She highlighted that the needs assessment of early school leavers from a nutrition perspective will be completed in March 2012 and that the CRC would continue to progress research interests in nutrition health promotion for young people with intellectual disabilities.
Speaker Biographies

**Deirdre Byrne**

Deirdre Byrne is an IRCHSS postgraduate scholar and is undertaking a PhD in the Department of Humanities at Institute of Technology Sligo. Having completed the BA (Hons) Applied Social Studies in 2010 she commenced her study into Food and Residential Care. In 2011 the project was awarded funding by the Irish Research Council for Humanities and Social Sciences. She qualified as a chef in 1987 and worked in various roles in the catering industry before coming to academic study.

**Dr Ruth Emond**

Ruth Emond is a part-time Senior Lecturer in Social Work in the School of Applied Social Science at the University of Stirling. She has conducted research in a range of areas relating to children and young people who have experience trauma and neglect, particularly those in residential care. She works part-time as a social worker and play therapist at Family Change in Perth Scotland, a therapeutic service for children and their families who have experienced trauma.

**Marita Hennessy**

Marita works as a Research Assistant with Dr Michelle Share on a safefood-funded study that is examining the nutrition needs of young people in early school leaver settings on the island of Ireland. She holds a MA in Health Education and Health Promotion from the University of Limerick (2008), a Diploma in Youth and Community Work (2011) and a BSc (Hons) in Nutrition (2001) from University College Cork. Previously, Marita was a Research Fellow at University College Cork where she had lead responsibility for projects in food poverty, men’s health, and obesity. She is currently a Board Member of Healthy Food for All.

**Dr Michelle Share**

Michelle Share is a Senior Research Fellow and is currently Acting Director of the Children’s Research Centre, Trinity College Dublin. Michelle has designed and conducted large-scale programme evaluations, in child and youth settings in relation to nutrition, smoking, mental health, and school health education. Michelle has considerable experience in conducting needs assessments and research in areas of socio-economic disadvantage and with marginalised groups of children and young people. She has carried out research on dietary and food issues amongst women dieters, asylum seekers, older people in community settings, and children and young people. She has considerable experience in conducting all-Ireland food and nutrition research with young people and education providers. Her doctoral thesis ‘Risk, responsibility and choice: food and eating in Irish second level schools’ examined food provision and education issues amongst students, teachers, parents and caterers in different school types in Northern Ireland/Republic of Ireland. She is currently the Principal Investigator of the safefood-funded all-Ireland study of Early School Leavers and Nutrition that is being conducted in a partnership with the University of Ulster.
Abstract

The Management of Eating Disorders, Disordered Eating and Asymptomatic Eating and Weight Concerns among Boys in Residential Child Care Environments by Social Care Workers and Social Care Managers

Gary Broderick B.A. (Hons), B.D., Dip Addiction Studies

A thesis submitted to the Higher Education and Training Awards Council, in fulfilment of the requirements for a Master of Arts Degree by research, School of Humanities, Athlone Institute of Technology, October 2011

Supervisor: Dr Ashling Jackson

Introduction:

Eating disorders, problem eating, disordered eating, asymptomatic eating and weight concerns are increasing public health concerns. A disturbing number of boys and male youth are presenting to a range of mental health professionals with weight preoccupations and with psycho-social issues similar to those recorded for boys in residential social care. Currently there is no formal system in place for capturing accurate information on these issues pertinent to males in residential child care environments in Ireland and this very significant gap in the literature is acknowledged.

Methodology:

This thesis focuses on the management of eating disorders by social care workers and social care managers. The research employs a qualitative, inductive analysis of the data which was co-created through thirteen semi-structured, multi-site interviews. Further information was augmented by observations while on residential child care sites and a small focus group discussion.

Results:

The primary contribution of the study is empirical, as it provides detailed narratives on the existence of food-related issues among boys in residential child care settings with the existence of all of the food-related behaviours examined, confirmed. The study also notes gaps in knowledge on diet, nutrition and safe organisation of food and kitchens; gaps in identification of food-related issues by staff in residential care settings; and difficulties in accessing external services for food-related problems.

Conclusion:

The study shows that these food-related behaviours are a concern in these settings; that many residential child care staff do not have sufficient training in the area to competently identify these problems. The study argues that increased knowledge of eating disorders, disordered eating and asymptomatic eating and weight concerns is necessary and could be assisted by the use of a continuum of eating disorders. More generally, the thesis has demonstrated the need for further research into this area – both in residential child care and wider social care settings.

Further information:
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## Attendance List

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<tr>
<td>Deirdre Byrne</td>
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