

Evaluation of Hopscotch Capacitar Project

REPORT PRESENTED TO COMMUNITY AFTER
SCHOOLS PROJECT (CASPR)

Louise Kinlen & Elaine Mac Donald

KINLEN MAC DONALD RESEARCH CONSULTANCY | JULY 2017

Table of Contents

LIST OF TABLES	2
LIST OF FIGURES	2
SUMMARY OF ABBREVIATIONS & TERMS	3
ACKNOWLEDGEMENTS	3
1. OVERVIEW	4
2. METHODOLOGY	5
2.1 OVERVIEW	5
2.2 INITIAL MEETINGS AND BASELINE DOCUMENTATION	5
2.3 QUANTITATIVE DATA COLLECTION	5
2.3 QUALITATIVE DATA COLLECTION	6
2.4 ETHICAL ISSUES	8
3. CONTEXT	10
3.1 COMMUNITY AFTER SCHOOLS PROJECT	10
3.2 SOCIO-ECONOMIC ENVIRONMENT	10
3.3 CAPACITAR & OTHER WELLNESS PRACTICES WITH CHILDREN	11
3.4 CAPACITAR WITHIN CASPr	13
3.5 PREVIOUS EVALUATION OF HOPSCOTCH	14
3.6 CAPACITAR PRACTICES CURRENTLY IMPLEMENTED IN CASPr	16
4. CHILDREN'S FEEDBACK ON CAPACITAR	18
4.1 OVERVIEW	18
4.2 QUESTIONNAIRES	18
4.3 FOCUS GROUPS WITH CHILDREN	23
5. PERSPECTIVES OF STAFF, BOARD, SCHOOL TEACHERS & PARENTS	29
5.1 OVERVIEW	29
6.2 WHAT IS THE BACKGROUND TO CAPACITAR WITHIN THIS SETTING?	29
5.3 WHAT PARTICULAR STRESSES EXIST IN THIS AREA THAT CAPACITAR TRIES TO ADDRESS?	31
5.4 HOW IS CAPACITAR IMPLEMENTED WITHIN SCHOOLS?	32
5.5 HOW HAVE THE CHILDREN BENEFITED FROM CAPACITAR?	33
5.6 HAVE ANY DIFFICULTIES/NEGATIVE ASPECTS BEEN OBSERVED?	35
5.7 ONE OF THE AIMS OF CAPACITAR IN THIS SETTING HAS BEEN TO PREVENT ABUSE, WHAT LINKAGES CAN BE OBSERVED?	35
5.8 IS CAPACITAR BECOMING EMBEDDED WITHIN CASPr AND THE WIDER COMMUNITY?	36
5.9 HOW HAS THE INTRODUCTION OF A BODY BASED, HOLISTIC PROGRAMME BEEN RECEIVED?	37
5.10 FUNDING AND LOGISTICAL ORGANISATION	38
5.11 PARTICIPANTS RECOMMENDATIONS FOR THE FUTURE	39
6. SUMMARY OF KEY FINDINGS AND SWOT ANALYSIS	41

6.1	KEY OUTPUTS AND OUTCOMES	41
6.2	CHALLENGES ENCOUNTERED	42
6.3	SWOT ANALYSIS	44
7.	CONCLUSIONS AND RECOMMENDATIONS	45
	APPENDICES	48
	REFERENCES	61

List of Tables

Table 1	Summary of Research Participants	8
Table 2.	Structured mindfulness programmes for children (Ortiz and Sibinga, 2017)	13
Table 3	Key Learning points from 2015 Evaluation (Dolphin, 2016)	14
Table 4	Breakdown of questionnaire respondents	18
Table 5	Overview of schools & focus groups	24

List of Figures

Figure 1	I like doing Capacitar	19
Figure 2	I like doing Capacitar by class	19
Figure 3	I feel relaxed after Capacitar	20
Figure 4	I feel less tired after Capacitar	20
Figure 5	I feel calmer after Capacitar	21
Figure 6	I feel more able to deal with difficult situations	21
Figure 7	I tell my family about Capacitar	22
Figure 8	favourite things about Capacitar	22
Figure 9	Strengths, Weaknesses, Opportunities and Threats	44

Summary of Abbreviations & Terms

Capacitar	A multicultural wellness education programme. The word Capacitar is a Spanish word meaning 'to empower, to encourage, to bring each other to life'
CASPr	Community After Schools Project
DCYA	Department of Children and Youth Affairs
DEIS	Delivering Equality of opportunity In Schools
NEIC	North East Inner City

Acknowledgements

The researchers are extremely grateful to all who provided assistance with this evaluation. The staff, management and wider community in CASPr were a joy to work with and they gave of their time and expertise in an honest, open and insightful way. CASPr is always a welcoming place to visit and we would like to thank all the schools who opened their doors to us in such a welcoming and accommodating way, and who went the extra mile to ensure that paperwork was filled out and space and time was made available for filling in questionnaires or conducting focus groups. The teachers and parents were very generous with their time in participating in the interviews. We would really like to thank all the wonderful children who were fun to chat with and who gave their honest and heartfelt opinions. Special thanks are due to the Capacitar trainer, Marian Baker, who walked or drove with us all over the North Inner City of Dublin and accommodated us in every way possible.

1. Overview

This report sets out the results of the evaluation of the Hopscotch project of the Community After schools Project (CASPr). CASPr is a community development agency, which aims to counter educational disadvantage by removing or addressing every impediment to educational attainment, either structural, physical, emotional or situational in Dublin's North East Inner City. The focus of this evaluation is on the Hopscotch project, delivered by CASPr in conjunction with Capacitar Ireland. Capacitar is a multicultural wellness programme that helps participants to develop skills to move beyond stress and trauma. The Hopscotch project has been funded since 2015 by Help for Children and its principal goal is to develop a response to emotional and social needs among children and families as a protective factor against abuse and neglect.

This evaluation covers the time period of October 2016 to June 2017 and includes retrospective and current perspectives of participants and other stakeholders. It includes both summative and formative approaches, and aims to provide in-depth analysis of the impact of Hopscotch on the children and wider community, as well as examining some of the structural and contextual factors influencing its delivery. The environment, processes and structures in which it operates play an important role.

The report is divided into different sections, starting with a methodology outlining the research methods employed. This is followed by a section on the context and operating environment of the project, outlining the background to CASPr, Capacitar and other body based wellness programmes, the Hopscotch project and how it is currently implemented. Importantly there is reference to the often difficult environment of the North East Inner City (NEIC) in terms of its impact as both a stressor and in normalising what would otherwise be perceived as an aversive environment for growing children. Section 4 analyses the feedback provided by the children in both the questionnaires and focus groups. This is followed by the perspectives of the adults involved in the implementation of the programme including CASPr staff, teachers and parents. Section 6 provides a summary of the key project outcomes, challenges and a SWOT analysis. The final section makes some concluding observations and proposes a series of recommendations.

2. Methodology

2.1 Overview

This evaluation was conducted using a combination of both summative data on the implementation of the project and a formative approach. It contained elements of action learning, through which the project evaluators together with key personnel examined the learning gained during the project. A series of research questions was set out at the outset and this guided the evaluation. We also looked out for unintended outcomes. The processes, structures and methods of delivery were all examined in addition to the data on outputs for those who participated in the Hopscotch project.

The overall objective of the evaluation was:

To assess the overall effectiveness of the Hopscotch Capacitar programme as a wellness education programme for children.

The specific questions that were addressed included:

- 1) How does Capacitar in this setting work?
- 2) What are the outcomes of Capacitar in this setting?
- 3) What specific impact has Capacitar had for the children in terms of their emotional, mental and physical well-being?
- 4) One of the aims of the project has been to help children to stay safe and to prevent child abuse. What linkages can we make between the programme and the prevention of abuse?
- 5) Is there evidence of Capacitar becoming embedded within a) the organisation and b) the wider community?
- 6) What challenges have arisen and have they been overcome?
- 7) How could the staff of Capacitar/Hopscotch, and the wider CASPr staff, continue to monitor the effectiveness of the programme?
- 8) What recommendations can we make for the future?

The evaluation methods were broken down into a series of steps:

2.2 Initial Meetings and Baseline Documentation

Two meetings were held with the project management team for Hopscotch at the outset. These were invaluable in understanding the background and context of the project. The final evaluation proposal was presented and agreed at the second meeting.

Project documentation was also sought at these meeting, such as previous evaluations, Capacitar manuals and baseline data on participants.

2.3 Quantitative data collection

The first stage of data collection involved a short questionnaire, which was distributed to all children who had recently participated in Capacitar sessions. The questionnaire was designed specifically for this evaluation and drew on other child-friendly evaluations of body based programmes. A Likert scale of 'smiley faces' was used to ask children to what extent they agreed with the statements. They were also

asked to name what they liked / did not like about Capacitar. The questionnaires were administered by the trainer at the final Capacitar sessions. The questionnaires were completely anonymous and no names were used. The questionnaire used is contained in the appendices.

The questionnaires were analysed by the researchers using MS Excel, and statistical charts were generated.

2.3 Qualitative Data Collection

A series of interviews were held with the project management team, CASPr staff, teachers, children participating in schools and an after school.

Children

The interviews with children were conducted as small focus groups with three to four participants in each group. A total of 27 children participated in the focus groups. Before carrying out the focus groups, written consent was sought from their parents. Children were only interviewed once these consent forms were returned. The teachers provided assistance in organising these and discreetly ensured that only children with consent forms participated. Consent was then sought from the children and the information sheet was explained to them orally. The older children also took the time to read it. The children were then asked whether they still wished to participate and were asked to sign (or put a symbol on) the consent form. Just one child said he did not wish to participate, but he still wanted to stay with the rest of the group. He made some observations during the focus group, but these were not written down or used in the report.

The focus groups were relatively relaxed and informal and were adapted to the setting, age of the children and time allocated. In some cases, the Capacitar trainer was also present and helped them to remember some of the practices, which they demonstrated. In two cases, the children asked to do some Capacitar as a class and a short session was conducted after the focus groups. This also gave the researchers an opportunity to observe Capacitar in practice in the classroom/after school setting. All teachers were very accommodating and assisted in organising the focus groups, sending home and collecting consent forms etc.

A broad schedule of questions was used for the focus groups, including questions on their likes/dislikes about Capacitar, particular exercises, the extent to which they have used any of them outside the session, why they think they undertake Capacitar and the benefits it brings (especially for the older children). They were also asked about whether they talked about or showed Capacitar to any other family members. The children were very vocal and forthcoming in their answers. Occasionally, the discussion moved onto other topics that were not strictly related to Capacitar. This was allowed to continue for a limited time, and in some cases, it demonstrated some of the issues, thoughts and fears that the children had on an everyday basis. The focus groups were not recorded, but detailed notes were taken. For some of the groups both researchers were present and one took notes whilst the other facilitated.

No child became visibly upset during the focus groups. If this had arisen, the child's teacher and the Capacitar trainer would have been notified and follow up support would have been offered. One issue of mild concern following a group discussion was notified to a teacher, without providing names.

The children were assured anonymity and confidentiality and no names of who said what were recorded. In using quotes, no identifying information or name of the particular school are given.

Project Management Team

In-depth interviews were held with the four members of the project management team. These were carried out individually and took ca. 45 minutes each. They were all recorded and transcribed verbatim. As with the other interviews, a written consent form was used. In using quotations from these interviews, the exact identity of the interviewee is not revealed in order to preserve anonymity. In some cases, it may not be 100% possible to preserve anonymity. It is hoped that where this arises, the information is not of a particularly sensitive nature.

The questions asked of the project management team were in-depth and included most of the research questions posed at the outset of the evaluation. The processes, structures and environmental context of the implementation of the project were explored in addition to project outputs and outcomes.

Staff members of CASPr

The staff members who interact with children in the after school and who themselves have also participated in the Capacitar training were also interviewed. This also included an outreach worker (Tusla funded). These interviews were adapted to each individual and included questions on their own experiences of Capacitar, their observations of children's participation, the perceived benefits, any difficulties and any suggestions they had. Five staff members in total were interviewed.

Teachers

Three teachers were interviewed from three separate schools. As with all the other interviews, express consent was taken and they were given an information sheet and signed a consent form. The teachers were asked about the involvement of Capacitar in their class, their observations of its impact on children, their interest in pursuing Capacitar further and any recommendations for the future.

Parents

Two parents were interviewed who had participated in joint parent/child Capacitar sessions. Efforts were made to engage other parents, but the plans fell through. The parents who participated were asked about their own experiences of Capacitar; its benefits; anything they did not enjoy and any recommendations.

Detailed notes or transcripts of interviews were kept in a secure place, to which no third party had access. The notes were written up following the interviews and these along with the transcripts were analysed using a thematic approach. Excerpts of the transcripts were coded according to various themes, based both on the original research questions and new themes that were noted in the responses.

A summary of research participants and the research method used with each group is contained in the table below:

Table 1 Summary of Research Participants

Group	No. of Participants	Research Method
Children	68	Written questionnaire
Children	27	Focus groups
Teachers	3	Semi-structured interviews
Parents	2	Semi-structured interviews
CASPr staff	5	Semi-structured interviews
Project management team	4	Semi-structured interviews
<i>Total interviews/focus group participants</i>	<i>41</i>	

2.4 Ethical Issues

This research involved working with vulnerable populations, and therefore there were additional ethical issues that had potential to arise. The researchers were very aware that carrying out research with children, who may also be experiencing various forms of trauma in their lives, carries great responsibilities. We were both committed to following ethical procedures as laid down in the DCYA's Guidance for Developing Ethical Research Projects involving Children (2012). The following ethical procedures were adhered to.

- As with all evaluations, in-depth interviewing can raise sensitive issues and it is important that interviewees can talk freely. Discussions took place with the key staff about the most sensitive way for such information to be treated in the reporting of the data.
- No names were used in the report and identifying information was not provided. Every effort was made to present viewpoints of participants as anonymously as is possible. The project management team were provided with a draft version of the report, with an option to remove or edit any quotations where they felt that a person's identity may be identified.
- In interviewing children, particular regard was had to ensuring that they understood the purpose of the research, provided informed consent and were not uncomfortable or upset during the process. The informed consent of their parents was also obtained. All participants were provided with an opportunity to stop the interview at any stage or to decline to answer particular questions. This was outlined to participants both orally and in writing in the information sheet.
- This evaluation focuses on a body based wellbeing programme for children and the wider community. In order to assess its impact for children, they were asked how they felt after participating in the programme and situations in which they think could use it within their daily lives. This had the potential raise sensitive or difficult issues. In some cases, children spoke about

their fears or worries, but did not become visibly upset or uncomfortable. Where an issue was deemed to be a little personal or sensitive, the children were not probed for further details. The researchers followed the Children First guidelines (Department of Children and Youth Affairs, 2011) and were both Garda vetted. They had a duty to report any suspicions of abuse to the relevant designated officer. This did not arise during the focus group interviews.

- The confidentiality of all data collected was of utmost importance and the researchers did not discuss individual participants with staff members (unless it was required for the welfare of the child). All data collected was stored in a safe manner, with password protection and individual files did not contain the full names of participants.

3. Context

3.1 Community After Schools Project

Community After Schools Project (CASPr) is a community development agency whose overall mission is to counter educational disadvantage in Dublin's North East Inner City. It has a head office located in Portland Square, and it runs two after school projects, a homework club and a crèche. The agency also organises a range of cultural and sporting outings for children such as trips to the local swimming pool, residential trips to a centre in Cavan, farm visits, cinema trips etc.

CASPr works primarily with children aged 5-12 years. 24% of the children who attend their services are from an international or ethnic minority background. 17% of the families of children attending experience some form of substance abuse. Many of the children come from homes where their parent is raising them without the support of a partner. All of the children attend the local DEIS schools.

CASPr is a QQI accredited training centre that offers FETAC level 4, 5 and 6 supported training to staff who work directly with the children who attend the projects. The staff are also an integral part of the Hopscotch Programme and are beneficiaries of the same Capacitar programme as the children.

Previous programmes that have been implemented with children include the Doodle Den literacy project, the CASPr music programme and drama project on heroes and heroism. CASPr also works closely with local schools and has rolled out the Capacitar programme in four local schools and an after school project outside the remit of CASPr.

The main focus of CASPr's work is to counter educational disadvantage in order to support children to remain in school, and adults to enter or re-enter training and employment. Its support for adults includes adult education opportunities, parenting and child development support and advice and support in areas such as housing, wellbeing, addiction and personal development.

CASPr currently operates two Community Employment (CE) schemes and its current staff complement consists of two full-time paid staff, eleven part-time paid staff, thirty-nine CE staff and seventeen volunteers.

A small dedicated project team manages the implementation of Capacitar, made up of the manager of CASPr, the chairman of the board and a development worker. They work closely with the Capacitar trainer in the development and delivery of the programme.

3.2 Socio-economic Environment

CASPr is located within the North East Inner City (NEIC) of Dublin. The overall socio-economic context of the Dublin North City has undergone a period of change since the 1990s, with some patches of considerable affluence around its new financial district (IFSC). CASPr has undertaken an analysis of the small area levels and has demonstrated that there are ten small areas classified as *very disadvantaged* and a further twenty classified as *disadvantaged*. It is within these small areas that CASPr works. Of those who stated their level of education, 46.95% (41.18% of the total) had either no formal education or primary education only. 2.15% stated they had a third level (degree level or national diploma) qualification or higher (1.89% of the total population). Not one person has a Ph.D. or higher in the

disadvantaged small areas (CASPr, 2016). Educational disadvantage is clearly evident in the disadvantaged small areas. Almost half of the population has primary education only (or less). 2% have a third level education, whereas the Dublin average is 34%.

The Mulvey Report (2017) was recently commissioned by the Government *in response to the series of gangland murders in the North East Inner City and beyond arising from the ongoing feud between certain criminal gangs and which are related largely to the drug trade and other related criminal activities within Ireland and abroad* (ibid, p. 6). A feud between two drug cartels has resulted in multiple shootings in this part of the city and there is a visible presence of armed Gardaí and daily checkpoints. Some buildings are watched permanently by armed Gardaí in order to protect the residents who may be at risk. The Mulvey Report made a series of recommendations in a three -year plan for 2017-2020 for the overall long-term socio-economic regeneration of the area. The four key priority action areas included tackling crime and drugs; maximising educational/training and employment opportunities; creating an integrated system of social services and improving the physical landscape. It spoke also of creating a new positive narrative for the area, a tailored local approach which is community led and the need for services and infrastructure to be connected and integrated. It remains to be seen how the plan will be implemented and resourced, and what its impact will be.

CASPr is acutely aware of the problems evident in the community and the effect they are having on children. At a practical level, this has on occasion led to closing an after school project or not allowing children leave the building due to large numbers of people dealing drugs outside the door. Children are aware of shootings, deaths and threats made and begin to recognise Gardaí who are constantly stationed in particular places. The staff of CASPr have on many occasions changed arrangements, spent time explaining to children or implementing programmes that are a direct response to the difficulty of living in this dangerous and volatile environment that can change rapidly.

The staff and board of CASPr spoke about the various strains and stresses many members of the community are under. The role of gangs and young boys in particular, being targeted to join gangs was a concern that was noted. The impact that crime, conflict, violence and substance abuse has on the children are issues that CASPr hopes to address. The Capacitar programme was viewed as one way in which children could be given tools to become more self-aware and strengthen their emotional expressions skills. Whilst Capacitar and other programmes working with children (e.g. Restorative Practices, Friendship Programmes, Stay Safe Programmes - often facilitated by a trained staff) could not remove the broader structural difficulties, it was envisaged that that Capacitar would be a key element in its family support strategy.

3.3 Capacitar & Other Wellness Practices with Children

Since 1988, Capacitar works with children and families in local communities around the world to offer simple wellness practices for use in the classroom, daily life and in the home (Capacitar for Children Teacher Handbook, 2005). Capacitar for Kids is a programme in multicultural wellness education and aims to offer wellness practices to children, especially those caught in a cycle of violence and trauma in their communities. Before describing Capacitar for Kids in more detail this section will begin with a broad

discussion of the use of wellness practices with children and will then reference the work of other related programmes.

The rationale behind the use of wellness practices with children is that negative childhood experiences cause continuous stress responses and poor health in children. Children's experience of adverse experiences can negatively affect them both during their childhood and across their lifespan into adulthood. These experiences include neglect; physical, sexual or emotional abuse; exposure to violence, mental health difficulties; imprisonment of a family member; substance abuse in the family; parental absence; and low socioeconomic status (Ortiz and Sibinga, 2017). The continuous experience of adverse experiences can lead to toxic stress within the child. Toxic stress occurs when life's demands consistently outpace a person's ability to cope with those demands (Shonkoff et al. 2012).

There is increasing evidence that teaching wellness or mindfulness practices to children can reduce the effects of adverse experiences. Mindfulness based practices support children to expand their abilities to self-regulate, and be resilient in the midst of stress and trauma. Mindfulness originated in Buddhism and was introduced to Western culture through structured instructional programmes such as that developed by Jon Kabat-Zinn entitled Mindfulness Based Stress Reduction (MBSR). It has since been expanded and applied to diverse populations. The outcomes of structured mindfulness programmes with children and youth indicate improved mood and more regulated emotions.

Improved child outcomes are observed when people in the child's system also learn mindfulness, such as parents and teachers. Less parenting stress, increased parental warmth and attention to the child may protect against poor health outcomes in children. In a randomised controlled trial involving inner-city families with a parent on methadone maintenance, mindfulness skills were included to address parental affect regulation, a significant problem for this group of parents. At 3- and 6-month follow-up, parental child abuse potential had significantly reduced (Dawe and Harnett, 2007).

The Inner Resilience Program (IRP) (www.innerresilience-tidescenter.org) equips school staff and parents with the skills necessary to build their inner strength and resilience, and to model this way of being for the children. IRP facilitates weekend residential retreats for school staff, professional development workshops, individual stress reduction sessions and parent workshops in schools. Another structured mindfulness programme for children, Mindful Schools (www.mindfulschools.org), believes that because the roots of toxic stress lie deep in the nervous system, children need tools that directly target the nervous system. To transform children's habitual responses, they need to regularly practice skills when they are not in 'fight – flight – freeze' mode.

The following table outlines some of the key structured mindfulness programmes for children.

Table 2. Structured mindfulness programmes for children (Ortiz and Sibinga, 2017)

Programme Title	Website
Inner Resilience Program	www.innerresilience-tidescenter.org
Mindful Schools	www.mindfulschools.org
Learning to Breathe	www.learning2breathe.org
Mindfulness in Schools Project ("Stop and Be!")	www.mindfulnessinschools.org
Still Quiet Place	www.stillquietplace.com
Stressed Teens	www.stressedteens.com
Wellness Works in Schools	www.wellnessworksinschools.com
Center for Mindful Awareness	www.centerformindfulawareness.org

Generally, schools offer the most appropriate environment to reach a broad spectrum of children across developmental stages, socioeconomic circumstances, and stressor exposure (Johnson et al. 2016). Other formats have been suggested including short home practices of 5 minutes. To enhance participation, regardless of the format, programmes have facilitated transportation to class, reminder phone calls, and providing snacks (Kerrigan et al. 2011).

In common with the programmes described above, Capacitar aims to introduce wellness practices to children and support them in practicing them in structured and calm teaching environments. The facilitator engages the children in a series of practices with the intention of embedding them over a series of sessions so that they function as tools for the children to use in stressful or traumatic situations. The practices include breathwork, visualisation, cross lateral exercises, Tai Chi, Pal Dan Gum (ancient Chinese and Korean exercises) Salute to the Sun, balancing energy, acupressure and hand massage. The practices are also introduced to assist children in healing from previous adverse or traumatic experiences, and in finding their own internal power. It can be used across settings to address children's concentration, strong feelings, pain, trauma, spiritual selves, and boundaries. As well as focussing on the internal emotional worlds of children, Capacitar for Kids shares the wider Capacitar mission of using wellness practices to transform patterns of violence in communities. CASPr, understanding this, took up the challenge to future protect a community in trouble by offering Capacitar to all in CASPr (staff and children) and in many of the local schools.

3.4 Capacitar within CASPr

Capacitar was introduced to CASPr in 2015, with a grant provided by Help for Children (Hedge Funds Care). It became known as the Hopscotch Project. It was targeted mainly at children aged 5-12 and their caregivers inclusive of parents, staff of CASPr and their teachers. It was introduced initially to the staff of CASPr and then to the children attending the after school in CASPr. In 2016, it was rolled out to four

schools in the area, two of which have children who also attend the CASPr after school. All four schools are designated as DEIS schools (Delivering Equality of opportunity In Schools).

The objectives of Hopscotch have been defined as:

- To develop a response to emotional and social needs among children as a protective factor against abuse and neglect.
- To initiate and embed CASPr's delivery of training of Capacitar's Wellness programme to children's parents, and local adults working within CASPr and other local organisations.
- To facilitate the continued development of emotional expression and language skills among local childcare workers.
- To continue to develop the Hopscotch Project as a valuable, innovative evidence based pilot project of repute, in order to build a case for its efficacy and relevance to the prevention of child abuse and neglect.

A logic model has been developed for Hopscotch in line with the funder's requirements. This is contained in the appendices.

The Hopscotch project has been funded by Help for Children since 2015. There has been an increase in the amount of the grants over the course of the three years that CASPr have been introducing Capacitar into the NEIC.

3.5 Previous Evaluation of Hopscotch

In 2016, a short evaluation was conducted of Hopscotch (Dolphin, 2016). Overall it found that it *made a significant contribution to strengthening the social and emotional resources of participating children, parents and families, and empowering them to deal with situations of stress and trauma*. It concluded that the major project outcomes had been met within a very limited budget. Some of the key learning points from that evaluation are outlined in the table below.

Table 3 Key Learning points from 2015 Evaluation (Dolphin, 2016)

1. Comfort zones	<ul style="list-style-type: none"> ● For people who have no previous experience of holistic work, the body based exercises such as Tai Chi, dance, Pal Dan Gum will inevitably be a stretch out of their usual comfort zone. People's response to this stretch will vary. ● In the evaluation session when the Evaluator used an Emotional Intelligence framework (see Appendix 1) to support the discussion, participants responded very positively and commented that it would be useful to have had such a framework explained and used throughout the training. ● Capacitar is a holistic approach to well-being. Where people are unused to such an approach, it may be necessary to 	<ul style="list-style-type: none"> ● Future Capacitar Trainings should include framework/s that supports participants who have no experience of holistic methodologies to make the mental stretch beyond their normal comfort zone for the benefit of their own well-being. ● Time should be built into the training at the beginning and throughout to use the framework/s so that participants are empowered and supported to stretch beyond their normal comfort zones.
------------------	--	--

	<p>spend time and create framework/s that support them to make the mental stretch beyond their normal comfort zone for the benefit of their own well-being.</p>	
<p>2. Impact of sessions on energy and emotions of participants</p>	<ul style="list-style-type: none"> ● In the staff workshop a small number of people commented that they didn't like how they felt after some of the Capacitar sessions. ● In the children's workshops one of the children who had recently suffered bereavement made a comment that some of the music <i>'makes me sad.'</i> ● Capacitar's mission is 'Heal Ourselves, Heal Our World'. While the Capacitar practices are very gentle, they are designed to support and empower physical and emotional healing at an individual and group level. As such they may bring blocked emotions to the surface in order to release them. ● If participants have experienced significant trauma and have done little or no emotional work on themselves, they need to have a framework of understanding of this process. Participants will then be more empowered to understand, reflect on and discuss the impact of the practices and take ownership of their own process. Some people may need to be supported in this at an individual level. 	<ul style="list-style-type: none"> ● Building on 1 above, Capacitar training should support participants to understand the journey of emotional healing, particularly if they experience a negative impact from the work on their energy and emotions. ● This support can be at a group level through relevant framework/s and backed by the option of individual support if needed.
<p>3. Structure of sessions</p>	<ul style="list-style-type: none"> ● Related to both the above issues, 2 suggestions were made at the Staff workshop about changes to the structures of the sessions: ● Some felt that the 2 hour sessions were too long and should be shortened to one hour sessions twice a week ● <i>'When Tutor started to finish the session with upbeat music, made a difference.'</i> 	<ul style="list-style-type: none"> ● Adapt the length of the session depending on the needs and attention span of the group ● Finish each session on upbeat music and upbeat energy.

The current evaluation was mindful of these learning points outlined. It should also be noted that the current evaluation focuses more on the experiences of children undertaking Capacitar. Whilst it also includes staff who participated in Capacitar training, they spoke more about the effect of Capacitar on children rather than themselves. Many of the recommendations made in the previous evaluation do apply to both adults and children and some of the same issues emerged in this evaluation.

3.6 Capacitar Practices currently implemented in CASPr

Overview

A number of Capacitar practices were observed either directly or indirectly and one of the researchers also participated in a Capacitar training session. A detailed manual on Capacitar for Kids has been developed by Capacitar (Cane and Duennes, 2005), which outlines the various practices and their functions. Broadly, they are divided into wellness practices that address the following:

- Improve learning and mental focus (e.g. visualisation, cross lateral exercises)
- Promote energy flow (e.g. fingerholds, Tai Chi)
- Heal the body (e.g. Pal Dan Gum, holds, hand massage)
- Promote emotional balance (fingerholds, acupressure for emotions)
- Nurture the spirit (e.g. mindfulness)
- Heal traumatic stress (e.g. protection and boundaries, head-neck-shoulder release).

In the observed Capacitar sessions and in the interviews with the children, exercises under all these categories were observed (possibly with less under the last category). A sample of some of the exercises that the children mentioned frequently are provided below.

Cross-lateral Exercises

Cross lateral exercises involve right or left limb crosses over the visual field to the opposite side of the body. They are designed to help the movement and flow of energy between the right and left sides of the brain and can help children who are feeling off balance to think more clearly and improve co-ordination. Some children found them a little difficult to do.

Pal Dan Gum

Pal Dan Gum is a series of ten stretching and punching exercises which are energetic and fun. The practice gives children the opportunity to shout and roar like a lion while releasing tension and anxiety from pent up emotions. When practiced regularly, this exercise purifies and recharges the internal organs, improves the circulation of blood and body fluids, promotes flexibility and resilience in the muscles and joints, improves posture and eliminates many chronic ailments.

Holds

The holds are made up of four simple energy contacts that can be done on oneself or another person. They can be used for anxiety, emotional or physical pain, strong emotions, insomnia, traumatic memories or deep relaxation. The children often spoke about the head holds that they practised with each other. The pictures below were taken at parent and child joint Capacitar sessions as part of the Hopscotch project. In the first two pictures, the mothers and daughters are carrying out head holds and in the third hold, the girl is doing a heart hold with her mother. Written permission was obtained from the participants for the use of the photos.



Celebration and Body Movement

Movement, dance and music are used throughout Capacitar for children and are seen as powerful ways to release traumatic stress and balance energy. There is a strong evidence base for using music as a mechanism for healing throughout various cultures. Dancing, and particularly free form dance, is a way to

release blocked energy and for children to express themselves. Various songs and dances were used in the Hopscotch project, with examples including 'El Malama' or 'the African dance'.

4. Children's Feedback on Capacitar

4.1 Overview

This section analyses the feedback given by children about their experience of participating in Capacitar in the Hopscotch Project. It includes both the questionnaires given to the children at the end of a set of four to six sessions, and the results of the small focus groups held with the children.

4.2 Questionnaires

The first step in obtaining feedback from children on their experiences of participating in Capacitar was to administer questionnaires to children in schools/after-schools who had recently participated in a group of Capacitar sessions. The questionnaire items were developed based on the evidence base for the use of body based wellness practices with children.

The breakdown of children who filled in the questionnaires is summarised in the table below:

Table 4 Breakdown of questionnaire respondents

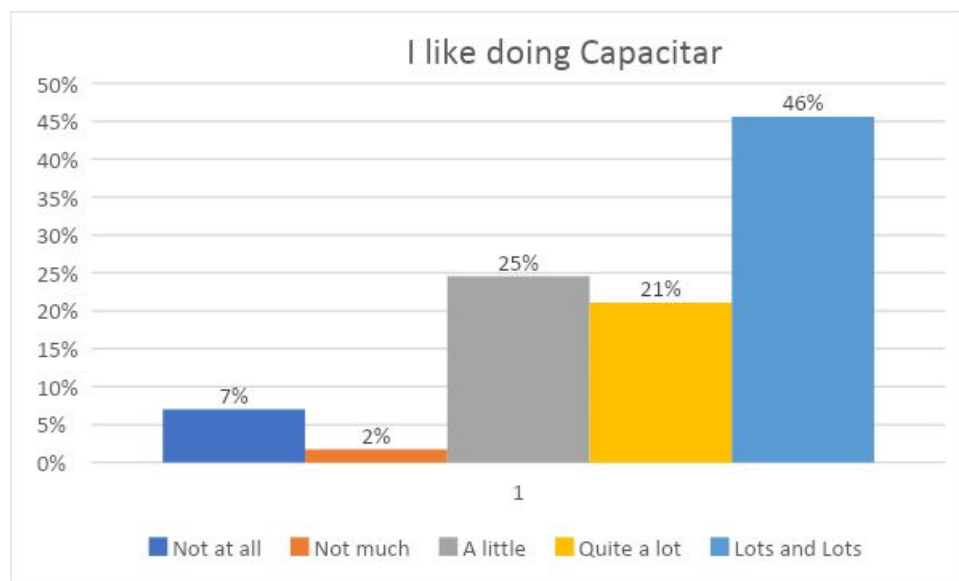
Name of School	No. of Questionnaires Completed*	Class of Children	Gender
Central Model Senior School	7	6th	Girls (from a mixed school)
St Vincents	12	Senior Infants	Boys
O'Connells	20	2 nd Class	Boys
Gardiner Street School	26	1 st Class	Mixed
Sherriff Street After school	3	Junior Infants	Mixed
TOTAL	68		

* Some questionnaires filled in by very young children were not considered valid as the responses did not appear to be accurate. Only the questionnaires where it appears that children understood the questions are included.

Not all questions were completed by each child and therefore the total count for each question is not always 68.

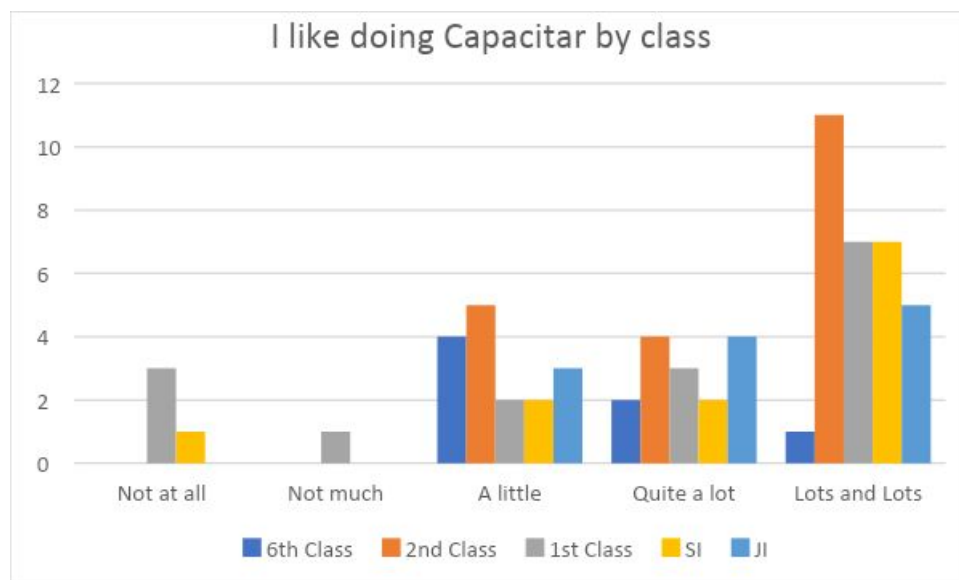
The first question on the questionnaire asked children to what extent they agreed with the statement 'I like doing Capacitar'. As can be seen, almost half of the total children said they like it 'lots and lots' and only 9% said 'not at all' or 'not much'.

Figure 1 I like doing Capacitar



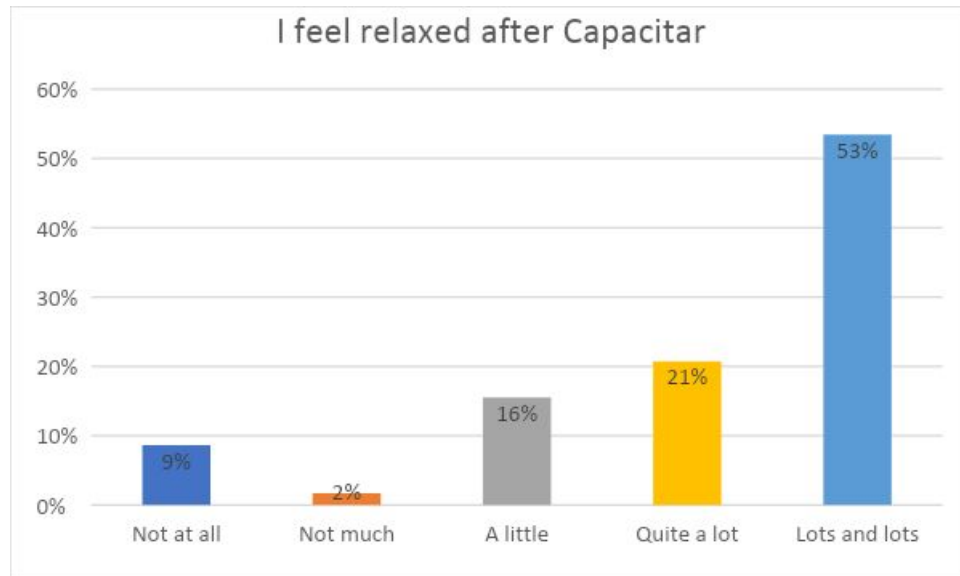
In the figure below, this question is broken down by class, with numbers of responses for each. As the numbers completing from each of the classes vary, this is not directly proportionate, but demonstrates that those who said they did not like it so much were in 1st class and senior infants. The children in 2nd and 6th were more likely to say that they liked Capacitar.

Figure 2 I like doing Capacitar by class



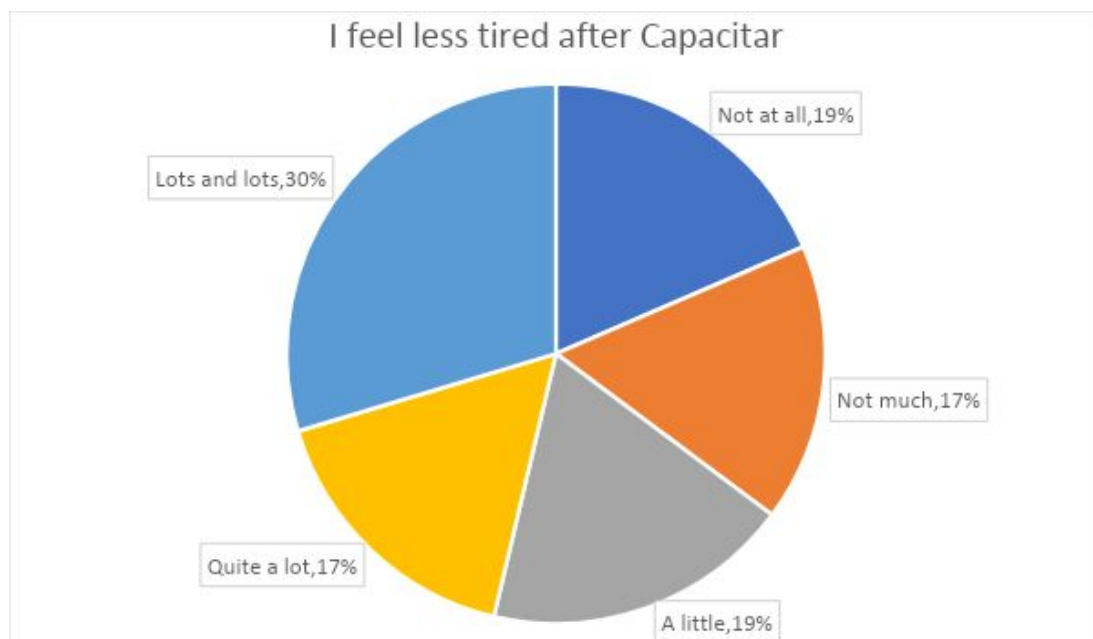
The majority of children stated that they felt relaxed after Capacitar, with only 11% responding 'not much' or 'not at all'.

Figure 3 I feel relaxed after Capacitar



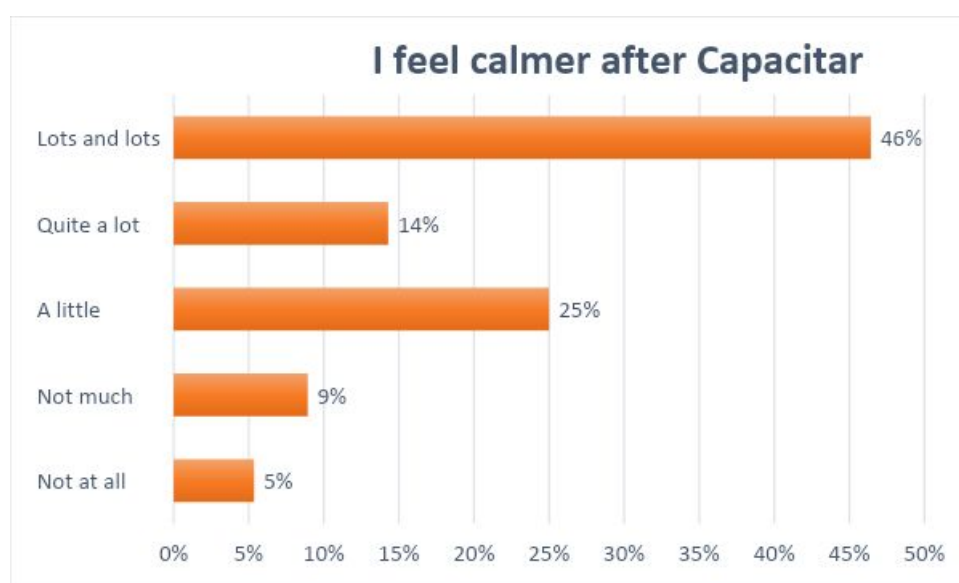
The next question asked to what extent the children feel 'less tired after Capacitar'. As observed later in the sessions and the interviews with the children, some of them feel tired and sleepy afterwards and this may be part of the calming effect of Capacitar. As expected, only 30% replied 'lots and lots' with the other responses divided equally between the other four points on the scale.

Figure 4 I feel less tired after Capacitar



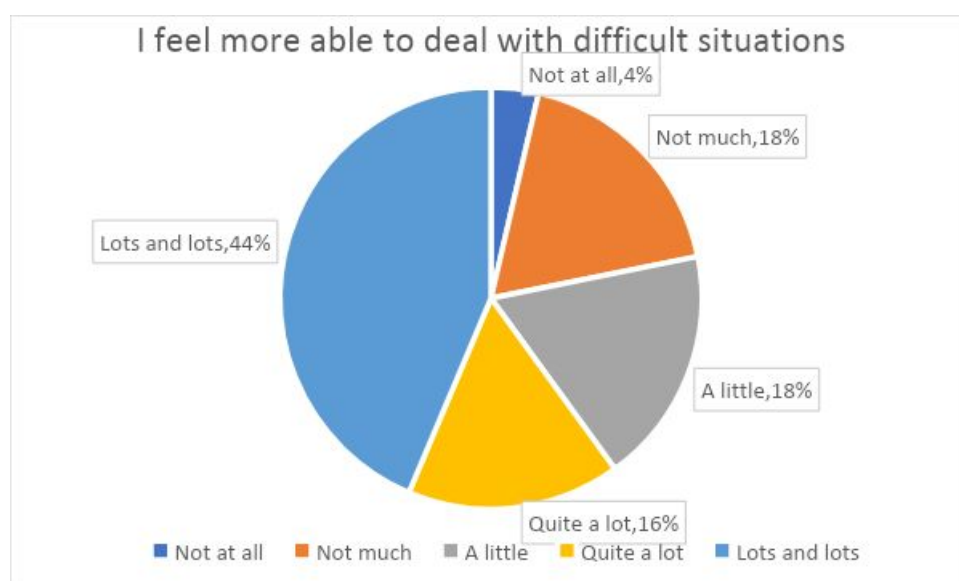
The children were asked to what extent they feel calmer after Capacitar. Almost half (46%) stated 'lots and lots' and a further 39% combined felt 'quite a lot' or 'a little' calmer. This was to be expected and was also borne out in observations, focus groups and interviews with teachers.

Figure 5 I feel calmer after Capacitar



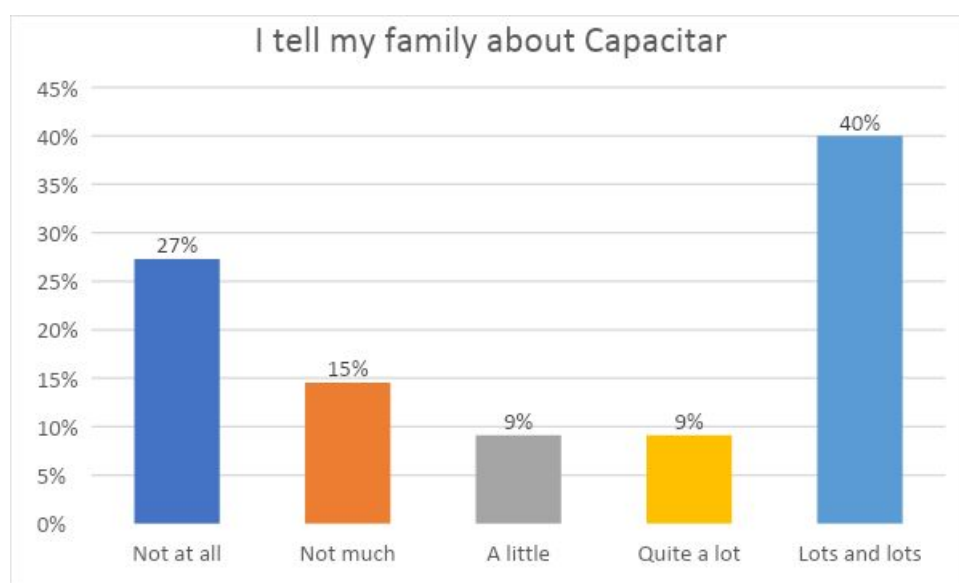
The next question was more challenging and asked the children about how they feel about dealing with difficult situations since starting Capacitar. The direct linkages between Capacitar and coping with adversity are difficult to establish, but this question may give some indication of whether the child feels that he/she has gained some coping mechanisms through the practices of Capacitar. The vast majority of children (78%) replied that they do feel more able to deal with difficult situations. Examples of this were also provided by the children in the focus groups.

Figure 6 I feel more able to deal with difficult situations



The children were then asked about the extent to which they tell their family about Capacitar. 27% responded not at all and 40% 'lots and lots'. This was discussed further in the focus groups with the children and similarly there were varying responses about whether and how Capacitar was discussed or demonstrated in the home with other family members.

Figure 7 I tell my family about Capacitar



At the end of the questionnaire, the children were asked what were their favourite parts of Capacitar. The most popular elements across all classes were tai chi, dance, throwing the energy ball and marching. The older children in particular placed emphasis on being relaxed and calming down.

Figure 8 favourite things about Capacitar

They were then asked what they did not like about Capacitar and the majority of children left this blank. The responses given here included:

- Tai Chi (x5)
- Massage (x2)
- Sometimes it is boring
- Tiring

Interestingly Tai Chi also appeared as the practice that was the most popular, indicating that it is something that may either greatly appeal to the children or not at all.

A space was provided for further comments and the only comments provided were:

- I felt tired
- It is more tiring than relaxing
- It is fun and relaxing at the same time.

The links between feeling tired and relaxed were explored in greater detail in the focus groups, where the word 'sleepy' was often used.

4.3 Focus Groups with Children

The questionnaires provided a very broad overview of children's perspectives of Capacitar in a quantitative format. More in-depth and nuanced discussions were held with the children in small focus groups in their school or after-school setting. The trainer who had delivered the Capacitar sessions attended some of these focus groups and helped to remind the children of what they had covered, which was useful particularly where some time had passed since the last session. All of the focus groups took place towards the end of the school year and the Capacitar training sessions had been completed.

The researcher explained the purpose of the focus groups to the children and asked for their consent to participate. Only children whose parents had provided written consent were included in the groups.

Written consent was taken from the older children and in the case of a younger group, oral consent was deemed sufficient. A broad series of questions was used to guide the focus groups, with variations used depending on the ages of the children, their levels of engagement and the time available to conduct the focus group. In two of the classes, the children were divided into two or three separate focus groups. These sessions were conducted consecutively.

Some demonstration of Capacitar practices took place during the focus groups, both with the Capacitar trainer and sometimes spontaneously by the children. In two settings, a short Capacitar session was held afterwards by the Capacitar trainer, which gave the researchers an opportunity to observe some sessions in practice.

Profile of Participating Schools & Children

O'Connell's School: This is an all-boys school catering for 2nd-6th Class, located off the North Circular Road. One of the 2nd classes was chosen to participate in Capacitar. One focus group was held with the boys from this class whose parents had provided consent forms.

St Vincent's School: This is an all-boys school catering for Junior Infants to 1st Class, after which they generally move to O'Connell's school. A Senior Infants group was chosen to participate in Capacitar. A large number of parents had completed consent forms for the focus group interviews and they were divided into three separate groups of four children.

Gardiner Street School: This is a mixed primary school off Gardiner Street catering for Junior Infants to 6th class. A first class group participated in Capacitar and two groups of children participated in focus groups.

It was not possible to gain access to the remaining participating school due to their closing earlier at the end of the school year. They did however provide completed questionnaires from the 6th class participants (all girls).

Table 5 Overview of schools & focus groups

Name of School	No. of children participating in focus group(s)	No. of focus Groups	Class of Children	Gender of Children
O'Connell's	7	1	2nd	Boys
St Vincents	12	3	Senior Infants	Boys
Gardiner Street	8	2	1st	Mixed
Sheriff Street After school	9	1	Pre-school/ Junior Infants	Mixed
TOTAL	27	6		

What children liked / enjoyed

Overall, the children in the focus groups in the schools were overall very positive about the Capacitar sessions they have participated in to date. The focus groups generally started with helping the group to recap and remember what they did and what they enjoyed. In many cases, they demonstrated the various practices with great enthusiasm. Many of them remembered the practices and the names of them. The ones that the children said they particularly enjoyed, in order of frequency, were Tai Chi; Pal Dam Gun (x5); tapping (x3); singing (x3); dancing (with various different dances mentioned); the music;

foot tapping; 5 ducks a swimming; bow and arrow (Tai Chi exercise); acupressure points; finger holds; head holds; breathing in and out, the energy ball and cross laterals.

In some cases, the children remembered all the exercises spontaneously and in others, their memories were jiggled from the other children or through the Capacitar trainer. Below are some quotes from the children about why they enjoyed particular exercises:

My favourite part is where we throw the ball to someone else

When we do breathing in and out, I feel really relaxed

I like the energy ball. It's like my imagination

What children disliked

All of the groups were asked about whether there was anything they did not particularly like. Most children did not think of anything. The most common negative aspect reported by children was that it made them feel sleepy or in some cases it stirred some negative emotions such as sadness. Some of the comments included:

I don't like the song. It takes too long

I feel sad when it's over.

It's tiring, we're moving a lot.

Tai Chi - it's boring. It makes me sleepy, I always want to be awake.

I didn't like tap tap. It's too close to my eyes.

Emotions children feel when doing Capacitar

The children were all asked to describe how they feel after doing Capacitar and each child was given an opportunity respond. The children were articulate in describing their emotions, sense of physical wellbeing or other reactions. The various feelings or emotions described are discussed here.

Sleepy

The word 'sleepy' was mentioned by several children across most of the groups and at least two children reported how they had fallen asleep before whilst doing the exercises. The hand massage was mentioned as one that made children feel sleepy.

The time of day Capacitar is done may also influence this. It was also noted by the researchers that the children who participated in the focus group after lunch appeared sleepier than those who participated in the morning. The concept of 'sleepy' or 'tired' is not always negative and in some cases, it could refer to feeling relaxed. One child described the feeling as 'nice and sleepy', using it a more positive sense.

Calm/relaxed

Another feeling that was often mentioned was 'calm' or 'relaxed'. One child said *how it (tapping shoulders) is like a massage and it makes me feel calm*. A child described Capacitar as *lots of peaceful stuff*.

Sadness

In some cases, it appears that Capacitar stirred mixed emotions and some children opened up about particular memories it triggered or sad feelings. The children who expressed these feelings also said that they really enjoyed Capacitar. These included comments such as:

It made me feel sad, I don't like it

I felt sad doing the headholds

I feel a bit sad, I miss my mummy.

The girl who said this repeated this a few times during the session. It was not considered appropriate however in the group session to delve further into why this was the case, or how Capacitar triggered this response. As with other children, it seems that Capacitar practices during a busy school day allowed the children to contemplate in a calmer space and in some cases, this brought various emotions to the fore that they may be less conscious of during the rest of the day. As noted in the previous evaluation, emotions can come to the fore when practising Capacitar.

Happiness

Happiness was also mentioned as an emotion that some children felt during or after the sessions. This also included feeling better afterwards compared with before the sessions.

Other emotions/feelings

Some children used colourful language to describe how they felt after particular exercises, such as *after tapping, I felt like a carrot* or *doing head holds, or doing the head holds I felt like a burger* (possibly referring to the sense of one's head being held by two hands). The exercise of the swords stirred a range of interesting emotions and the children described how they felt like a *lion, a king* or a *dinosaur*.

Another child was less enthused by the idea of swords and described how they could make him feel unsafe and how he could cut his head. The notion of swords and warrior-like language may have the potential to stir up images or fears of violence or not feeling safe. Others suggested however that the swords made them feel protected.

One child described how strange it felt at the beginning and how they did not know what to expect, but it became easier as they became accustomed to it.

Using Capacitar practices in everyday life

The children displayed a great understanding of Capacitar and many made strong linkages between what they did during the sessions and how it could be used in various situations outside the sessions. Numerous examples were given, with some very explicit anecdotes of how they used the practice and the impact it had.

Sleeping difficulties

A common theme that arose among several children was difficulty sleeping, which could be an indicator in some cases for anxiety, or may also be related to background noise in their homes or outside. In some cases, children spoke about accessing various devices such as phones or playing video games late at night with scary creatures, which made them feel afraid. Another child spoke about he watched horror films

with his dad when he was unable to sleep. For many children, the middle of the night was presented as a scary time and Capacitar was seen as a way of coping with some of these fears. Some examples given included:

When I can't sleep at night, I tap here (demonstrates on his throat) and then I fall asleep.

Sometimes I do the swords if I can't sleep.

Sometimes I have a bad dream. It's too scary to tell.

I do tapping when I dream.

At night I can't sleep because I hear bad people outside with guns. I can hear them. I suck my thumb then and I feel better.

I had a spooky dream and I woke up and couldn't fall asleep. I used the finger on my acupressure point and then I fell asleep.

Once at 3am Krampus¹, the enemy of Santa called me. He knew my name. I said nothing. I used my middle finger – fear finger. I felt less afraid.

The quotation above was from a discussion that arose in one focus group where several children spoke about characters from Minecraft and their interactions with them in the middle of the night. It was unclear whether all the stories were factual or part of their imagination or the game, but it was a recurring theme within that focus group.² This child recalled how he received a phone call from this character at 3am and how holding his fear finger helped him to feel less afraid.

Feeling fearful or sad

The children spoke of other times when they felt fearful and holding their fingers or doing various tapping exercises helped to alleviate these fears. Examples included:

I used it at the animal museum. I felt scared.

I used it once when my Dad got mad at me. I did my finger hold, my fear finger. It helped me to feel stronger.

I do finger holds – I know my angry finger, my fear finger

I missed my mummy, so I held my sad finger and I felt a bit better.

Health and wellbeing

Some children made associations between the exercises and their potential healing powers. One boy described how some people in the class sometimes feel sick but *when you do Tai chi it makes you stronger*. A few children said they used it specifically for hiccoughs and one said she showed her mother how to do tapping exercise (acupressure points) to help with headaches. Some spoke of how they generally liked to practice what they learnt, such as Tai Chi.

I use it for hiccoughs.

It makes us relax and takes away our stress.

¹ Krampus is an evil character from the Minecraft game, whose origin comes from the 'anti Santa' from the old Norse tradition, who would torture children who had been bad.

² Without revealing any child's identity, some of these issues were mentioned to the children's teacher.

It makes me strong in my heart.

I do a lot of Tai Chi.

Showing/Discussing Capacitar with Family Members

There was more limited recounting of how children use Capacitar at home with other family members. All children were asked whether they talk to others at home or demonstrate Capacitar practices. Some said they talked about it, but did not provide much more information and others said they did not. A few children recalled that they did some of their practices with other family members. None of the children in the focus groups were part of the group that had participated in the joint parent/child Capacitar sessions. It is possible that they viewed Capacitar as something they did at school that may be useful, but the linkages with other family members understanding or practising it did not appear to be very strong.

I do it with my Ma or my little brother

One child recalled that his mother had done the class and this helped to calm her down when she became angry.

When my Ma gets angry and tells me to go to bed, I don't tell her. She knows as she has done the class. It helps to calm her down.

Other issues raised

When asked whether they would like to continue Capacitar after the Summer, the vast majority of children stated they would and many were quite enthusiastic about continuing it. A small minority of children (3-4) stated that they did not want to and this was mainly because they found it 'too tiring'. It was observed among some children that their energy levels appeared to be very low. This may also be attributable to the time of day (afternoon) and warm classroom. The number of children who spoke about having difficulty sleeping was also relatively high, which again may contribute to tiredness.

In one class, some of the children suggested that they could draw pictures of what they did in Capacitar at the end of the sessions. They had experienced this with another outside facilitator/author who had asked them to draw pictures of what they had covered. One child said she would draw her favourite things, such as the finger holds and another said she would draw pictures of them doing Tai Chi.

After school Observations

An informal focus group was also carried out within an after school (not under the management of CASPr). The children in this group were younger (some in pre-school) and the environment, which was not school based was different and less structured. The visit took place in the afternoon when the children had already spent the rest of the day at school or pre-school and some appeared a little tired. The trainer engaged them in some Capacitar practices and the researchers spoke to them as they did the practices and beforehand. The children in this group were less verbal in their responses about Capacitar, possibly due to age, time of day and environment which was less structured than school. A few children showed great enthusiasm in participating in the practices and four children refused to participate. Although these children did not stand up to do the dances etc., they could be observed tapping their feet and showing other responses to the music. Some of the younger children were also observed as having a very good memory of the sequences demonstrated by the trainer.

5. Perspectives of Staff, Board, School Teachers & Parents

5.1 Overview

In this section, the perspective of the adults involved in organising, delivering or supporting Capacitar. These include the staff in CASPr, the trainer, board members, school teachers in the participating schools and two parents whose children had done Capacitar and had also participated themselves. The transcripts and notes of these interviews were all analysed and some common themes emerged. Many of these themes were linked to the original research questions posed at the outset of the study. These themes are outlined here, drawing on the perspectives of the various research participants.

The fourteen adult research participants include the following:

- *Project management team (3: 1 male, 2 female)*: The chairman of CASPr, the Manager of CASPr, a development worker involved in bringing Capacitar to CASPr and Capacitar trainer. These interviews were recorded and transcribed verbatim.
- *Capacitar trainer (1 female)*: The main Capacitar facilitator/trainer for all the schools/after schools/ adults' sessions etc. This interview was recorded and transcribed verbatim.
- *Project staff (5: 1 male, 4 female)*: The staff/supervisors of the after schools/creches run by CASPr where Capacitar is delivered and the outreach worker for CASPr.
- *School teachers (3: 1 male, 2 female)*: They were from three separate schools and were the teachers of three classes where Capacitar has been delivered recently. Children from their classes participated in the focus groups.
- *Parents (2 female)*: Two parents who had participated in child/parent Capacitar sessions within a school were interviewed.

In order to preserve the anonymity of the research participants, the exact description of the participants is not necessarily provided for the quotations used.

6.2 What is the background to Capacitar within this setting?

Four of the research participants from the project management team were very involved in bringing Capacitar into CASPr in 2015. They were all asked about the background to bringing Capacitar into CASPr and how and why it started. They described how they were seeking an initiative to work with the children of CASPr and of the NEIC to try to address some of the stress that is palpable in community and to give children an outlet for their emotions. Linkages were established between Hedge Funds raised in the IFSC in Dublin and administered through Help for Children International, based in the US. The social work department in Trinity College Dublin recommended CASPr as a potential project. One of the management team in CASPr had experience as a Capacitar tutor and proposed it as a way of giving children a language for their emotional selves.

One of the management/board members described why Capacitar (or Hopscotch) was considered particularly apt for the local community:

We brought it in because we work in an environment that is on edge. People going to school see people out of their heads on drugs. They don't have option of extra-curricular stuff. There is no money. We try to give them as much developmental support as possible. 2-3 years ago, down at

the school there was a mother out of her head on drugs. It's totally unacceptable for children to see, but it becomes the norm. This is going on for years- drugs, garda presence. I don't think there's enough support and resources for the area. If someone dies, the adults are all on tender hooks and that feeds back into the children and they are seeing this on a daily basis. So, Hopscotch is about giving children something to deal with the stress in their lives, express themselves and build confidence.

Another described how the area is very stressed and we put forward this programme as a way to keep children safe, deal with tension, offer respite or a resolve: To give children a tool for dealing with the stress or saying that's not good. Capacitar was also described as a method of giving children a language for their emotional selves, and tools to calm themselves down. The recurrence of stress in the lives of people in the community came across in many of the interviews with management, staff and teachers. One of the board/management members described the history of intergenerational stress and how Capacitar has the potential to make a difference in the lives of young children as a way of helping them to prepare for a more positive future.

The area has a historical intergenerational, huge tolerance for stress, they think. However, it's not a tolerance, it takes its toll. It doesn't have to be like this but in order to get at it, the only thing we can do is - the only people we deal with really are younger children. Our way of trying to make a dent in some of this was to take on Capacitar. We saw it as a way of bringing in a programme that would teach them how to deal with stress and combined with restorative practice programme, how to deal with conflict. The teachers in school are all doing stay safe and friendship programmes. There is a package and together those four things might build up a resilience - maybe later on, do even better and make some child who becomes a young man or woman say actually this is unacceptable, it is unacceptable that we have to react to it. It is unacceptable that we should have to medicate the tension by putting in these things.

This quote above demonstrates some of the frustration of working in an area where stress and tension become normalised and others spoke of a continuous stress disorder, whereby stress becomes the norm and it is difficult to see a different way of being.

When Capacitar was first introduced in CASPr, it was first introduced to the staff and gradually to the children in the after schools projects. By the stage that the children started it, the staff were reasonably familiar with it and it was hoped that this would help to embed it within the organisation (this is discussed in a later section).

Efforts were also made to engage adults and parents in Capacitar, but this proved to be relatively difficult to sustain. In its progress report, CASPr noted that parents of the children attending were the most difficult group to engage. Other ways were then sought to spread Capacitar and to embed it within the community. Schools were seen as a good method of spreading it further and linking it with restorative practice and SPHE programmes in school.

Once people got aware of the programme it began to spread and people asked for more of it. We are now going to the various schools and a lot of schools have the Croke Park hours and they often bring in someone to speak on issues. We have turned up and give them a flavour of what Capacitar is about and often they say can you come in and do it with ours.

It has now been rolled out in four local schools (two of which are outside the CASPr catchment area) and within the CASPr after school and another after school project in the area. There has also been demand from other schools, including secondary schools. In one school, a joint group of parents and children

participated in Capacitar. Attendance was mixed, with the group starting with six parent participants and then reducing to two regular attendees. These two parents participated in the interviews.

5.3 What stresses exist in this area that Capacitar tries to address?

Capacitar is a multicultural wellness programme that aims to respond to the emotional and social needs among children and offer protective factors. The social and emotional needs of children were seen by all participants as very important, and most felt that Capacitar was a vehicle through which some of them could be partly met. There was also agreement and in some cases a sense of pessimism about the area, and the extra volume of stress that the community was living under. Many participants expressed concern about the effects that this was having on children, who may not always have the language to express what they were feeling. One member of the project management team described it as:

There has always been a stress. Certain things come to the fore. At the moment children at the butt end because they are vulnerable and doubly vulnerable because their parents feel afraid. A child doesn't feel afraid when their mam or dad is there, but when a parent is afraid, that exacerbates the fear and the tension in the area. When children go to school and are told it won't open till half nine because there is a funeral of this or that guy. When children have to pass by a car and they know the guard's name because it's the same one on the duty for the last six weeks outside that house. And they know why and someone could come down their road and shoot and try to kill somebody. They have tried before.

The impact of the recent feuds in the area was seen as a worrying development and one staff member commented:

There's a fear in the community now that wasn't there before. Before, during the heroin epidemic parents marched on their street. Now no-one says anything and it's stressful. There are gun shots... Children don't understand the fear, but they feel it. They know the names of the gangland leaders from what is said on TV. They know where they live because the Gardaí are watching the house, so the person is not shot. Now if they can't get the gangland leader, they will get someone else.

Others commented on how funerals take place of those who have been shot and schools may not open until later as a result. It was also recognised that women have also become fearful of being a target of the violence. Many expressed concern about the impact this was having on children. The children in their focus groups also made some direct and indirect references to violence and conflict and a sense of fear, particularly at night.

Young boys were seen as potential targets for gang recruitment and the lack of sufficient positive male role models was seen as an issue for concern. One commented on how children are often recruited to deal drugs and it was seen as more profitable than going to school. CASPr as a project tries to offer developmental opportunities to children and to help them engage with education for as long as possible.

Capacitar was seen as a way of breaking down the cycle of stress and showing people that it was alright to seek a positive way to deal with their stress. A manager described it as:

People here don't get opportunities. If you don't work, you don't get money. Anything to do with people looking after themselves is very new and inaccessible. We are trying to break the cycle and change the culture. I hope it will say to parents you are entitled to learn to deal with stress- you don't need drink and drugs. Particularly women around here, they have taken all of the lone parents off the CE scheme and that has a massive effect. They don't know how to relax or get a massage or go to talk to somebody. If you go to talk to somebody around here, you're in trouble

because it's social workers or there is something wrong with you mentally. You don't hear people saying I might go for a swim or this to look after myself. That doesn't happen.

The teachers in the schools also echoed this sense of stress among the children. One teacher described how some information is not necessarily sheltered from children and they may talk in detail about distressing events happening in their families. The poverty and disadvantage within the area were seen by the teachers as creating extra difficulties for the children. Violence, drugs and family breakdown and conflict were mentioned as issues that some children were dealing with. Some of the fathers of the children were in prison, creating extra strains for the families.

5.4 How is Capacitar implemented within schools?

Most of the focus groups with children were based within school settings and the teachers and Capacitar trainer provided perspectives on how it is implemented in schools. Some observations of Capacitar in practice were also made.

Capacitar has now been introduced in four schools; in each school it is delivered to one class at a time. In one school, a group of children from different classes who were seen as most in need were initially put together for the sessions. It was found by both the school and the trainer that this format was not the most effective, and it was subsequently delivered to one class at a time. It was delivered in classes from senior infants up to 6th class. In the case of the 6th class group, it was delivered to a smaller group of girls rather than the whole class.

The Capacitar trainer introduced Capacitar to the staff in each school first. The schools then decided which class to offer it to. It was normally introduced for six sessions of one hour, delivered on the same day and time each week.

The Capacitar trainer explained the content of the sessions delivered in the schools:

What I do is, I would start with Tai Chi, fingerholds and Pal Dan Gum on day one and then most times I would start a session with Tai chi. Then I would introduce something new each week and then go back on things we did prior. It's actually amazing how I see the children respond. They love doing the Pal Dan Gum as it gives them the opportunity to shout and roar like a lion. It's fun and once they're introduced to that - they ask can we do the ho ho ho. It has huge advantages. For the digestive system and all the physical benefits and the emotional benefits, they are punching the air and roaring like a lion. They love also the cross lateral - scissors exercise and the tapping. We sing a song with the tapping. They also respond very well to the head holds. That's a series of holds that brings the person into a state of profound relaxation.

The head holds were seen as being particularly relaxing and many of the children spoke about how they felt relaxed after them. This involved working with a partner and holding each other's head in turn for two to three minutes. The trainer observed how:

You would hear a pin drop in the room and some classes have 23 boys. I was doing it in a school and they took a little bit of time to get into it and then the teacher said I have never seen them as quiet.

A series of dances such as El Malama (African dance) were also used and these appeared to be very popular with the children. The teachers also spoke about how the children really enjoyed the music and

the rhythms. One teacher spoke about the hand massage with cream and how the children liked the sensory side of it and having some luxury.

The teachers in general found that the children were very relaxed after Capacitar, with one teacher describing them as a little sleepy. It was described by teachers in very positive terms such as:

A lovely change to normal routine

Capacitar has highs and lows. It's not just about being still but about channelling energy in specific ways

It gives them tools to calm down and relax. They don't necessarily have quiet time at home.

It can offer a physical response to stressful situations.

The teachers who participated in the interviews appeared on the whole very engaged with Capacitar and were interested in developing it further within their schools. The trainer and management of CASPr were particularly welcoming of classrooms where the teacher joined in as this offered a very positive role model to the children. In one classroom, the teacher spoke about how they had introduced some of the practices into the everyday life in the classroom. She explained how the children had suggested breathing exercises when the children were stressed before their Drumcondra (national assessment) tests. In some classes, posters of the fingerholds were observed on the walls.

The Capacitar trainer also observed how some teachers appeared to be using it in between sessions, such as doing hand massages, but recognised that it was difficult for all teachers to do so. The pressures on teachers to teach so many aspects of the curriculum and various new initiatives was acknowledged. Whilst some teachers may have been very positively disposed towards fully embracing Capacitar within the classroom, it was recognised that for some it may be seen as break for the teacher and not necessarily something to embed in everyday life in the class.

The physical space of the classroom and the number of children were also seen as playing a role and it was easier to set up circles etc. in some classes where the space allowed it. The trainer was cognisant of disrupting the class as little as possible, and therefore did not ask to have desks moved etc.

Capacitar was generally offered for one hour sessions and for 45 minutes in one class. One teacher observed that an hour was perhaps too long, and that it was difficult to engage children in an activity for such a long period of time.

5.5 How have the children benefited from Capacitar?

All research participants spoke positively about the benefits of Capacitar for children (and adults) including teachers, staff, management and parents. The benefits listed were multiple and included the following:

- Space to relax and be calm
- A body based, physical response to the stresses of everyday life
- A way of building up resilience and empowering children
- A new emotional language for children to express themselves
- Promotes physical wellbeing

- A way of releasing tension
- A way to deal with trauma
- A way of healing physical pain and illness
- A way to stop and breathe in the midst of chaos
- It gives the children a sense of luxury and learning how to care for themselves
- A method to forget about all the tension and be present in the moment
- The children who participate are more likely to open up about other issues
- Supportive, trained staff that can assist with any disclosures
- Gives children the ability to self-regulate and self-soothe
- Children who are fidgety and unable to stay still may find new ways to relax.

One of the staff members looking after the children on a daily basis explained how the children are learning to express themselves and how the hurt or fear they feel comes out in various ways. She explained how they become so much more relaxed after the sessions even if there is a very high noise level beforehand. The teachers also observed how children were more relaxed after the sessions and one commented on how it gave some children a new emotional language. Another teacher described how the children were learning ways to self-regulate and how they themselves suggested quiet, relaxing time when they were very giddy.

One of the project management team described the overall benefits as:

The children enjoy it and they think differently about things. A lot aren't used to taking a breath and relaxing. And even the bodily part of the hands etc. they got more out of it than they thought. The younger age would have less inhibitions and less articulate about saying what they got out of it. But you would have older children who are more reticent and then think it was not as bad as they thought. Because it was done regularly and also meant that children who for one reason or another might not have fitted in as easily found a place in this that could tolerate them and found a peace and perhaps enjoyed it more so. In every class, there are children who are giddy and maybe that's all, or maybe they have other difficulties. Isn't that the point, that you're trying to give children a tool to help them relax, protect, understand, realise and give them a bit more reassurance.

Another spoke about the tools it has given children to self-soothe and regulate their emotions.

I think it has given them simple tools that they will have for life. It gives people to deal with the stresses and strains of everyday life. If we give them to children at a young age, they can be so self-reliant. They can self-soothe. It really gives them that empowerment and a sense of independence. They will tell me and they're only a couple of weeks into it and they would say... I met a kid on Sheriff street and he said I was angry the other day and I held my angry finger. They are starting to use it.

Some of the research participants were asked about how children deal with external stress that may be beyond their control. Most felt that whilst Capacitar could not address all the social issues in the lives of people living in the area, it gave children their own sense of control. No equipment was needed and children just needed their own body and it could be used anywhere. Examples were given of how children related when and how they had used Capacitar practices in their everyday lives. This was corroborated in the focus groups with the children.

The parents who were interviewed also spoke about the very positive benefits of Capacitar for themselves and their children and found it difficult to understand why more parents had not participated. They both said that they practised it at home with their children and how the children were sad when the sessions came to an end. Its healing and relaxing powers were recognised and one felt that it perhaps appealed more to people who were spiritual.

5.6 Have any difficulties/negative aspects been observed?

Overall, there were very negative comments about the implementation of Capacitar. Some small suggestions were made to improve it but no research participant was particularly critical of the project. Some of the areas where participants felt that some improvements could be made included the following:

- The length of the sessions was considered a little bit too long for some.
- Some observed that the children were sleepy after the sessions and suggested making it a little more lively (this was also noted in the previous evaluation).
- Some schools would have liked more Capacitar for other classes and recognised that working just with one class was limited.
- One participant observed that it seemed to work better with girls and with those who are like to listen and follow instructions and suggested 'we need to avoid imposing Capacitar on the children'.
- The changes in Community Employment are having a detrimental effect on the structure of the project and the continued expansion and delivery of Capacitar will be strengthened and guaranteed with a more stable staffing arrangement.
- It can be difficult to engage older children if they start it for the first time at 11-12 as it is very new to them and they may be self-conscious.
- Not all schools had engaged with the programme to the same extent and there was more evidence of Capacitar practices being embedded in school life when the teacher was more involved.
- Engaging parents and adults in the community has been more difficult.
- The reliance on one trainer for all sessions can make it difficult to spread Capacitar wider within the community and schools would welcome if additional people (e.g. teachers or SNAs) could be trained to deliver it.
- One expressed concern about the children touching each other and asking for permission to touch each other. There was a worry that this could be relayed and understood out of context by parents.

5.7 One of the aims of Capacitar in this setting has been to prevent abuse, what linkages can be observed?

Help for Children (Hedge Funds Care) who fund the Capacitar programme in CASPr provide grants in seven countries including Ireland whose primary purpose is the prevention and treatment of child abuse. The Capacitar programme is a wellness programme, which responds to physical, emotional and social needs of children. It is envisaged that this in turn acts as a protective factor against abuse and neglect. Previous international studies of Capacitar show that the regular use of the practice lead to a lessening of

physical and emotional symptoms linked to traumatic stress and an overall increase in wellbeing (Condon and Cane, 2011). Some of the research participants were asked specifically about the linkages between the implementation of Capacitar and the aim of abuse prevention. For most of the respondents the linkages were very clear and for others they were more nebulous.

Whilst it was acknowledged that the abuse prevention elements of the programme were not always explicit, there were implicit elements of Capacitar that allowed children to be more in tune with their bodies, their emotions and to grow in confidence and self-awareness.

The trainer explained how this happens during the sessions:

They are made aware of their own bodies, emotions, we talk about what emotions are. I don't talk an awful lot. I would ask them if they know what emotions and feelings are. It gives them tools if they are afraid, they have the finger holds for fear....I do use the term feeling safe. When we do this, this can help you feel safe. At the end of Tai Chi I ask them to cover themselves and protect themselves with the light. How much that means I don't know.

The theme of self-awareness and confidence building were also recognised by important elements in abuse prevention by other participants.

By strengthening a child's awareness of themselves and perhaps giving them confidence and the tools to say this isn't OK. If you're with an adult determined to do something, maybe not, but the child might speak up sooner. Or it might come up in one of the sessions. I don't think this has happened. It starts to build a child's awareness of themselves and their own autonomy and this is OK to trust their feeling that it is not OK.

The practices give children the confidence to express themselves. To know what is right and wrong and to be able to address it and I think that's how it happens.

The participants also spoke about how children may reveal certain things about themselves and how they are feeling during the sessions and certain music may make some children sad. This gives them a vehicle through which they can express their emotions.

In a sense it does - when children are revealing and saying things. We had a boy from the boys school and he said when he finished - 'hope'. He is living in a hotel- they are homeless. I think abuse comes in different forms - not just sexual. A lot of the children we deal with, their backgrounds are difficult.

Some of the teachers interviewed did not immediately see the linkages with abuse prevention, but recognised that Capacitar overlapped with other abuse prevention programmes run in schools.

I don't think there really is a link there. There is not a huge opportunity to talk. Some of the children hated being touched though. That could be a warning sign. Teachers also talk about safe touches in SPHE so there could be some overlap.

5.8 Is Capacitar becoming embedded within CASPr and the wider community?

Capacitar practices were first offered to all the staff within CASPr as a way of ensuring that all the adults coming into contact with the children in CASPr would be familiar with Capacitar. It was also hoped that it would bring benefits to the staff for themselves and they may be able to start a multiplier effect, whereby it would spread to other members of the community.

Interviews were carried out with the manager of CASPr, the project management team and five other staff members in CASPr and all had a sense that Capacitar was beginning to feel a little embedded within the organisation. It was recognised that this would take time and that it was still the beginning of a process.

Both the staff and management spoke about how the staff in CASPr are beginning to use practices in their everyday lives, despite some reticence at first. Examples included using practices and recommending it to others for issues such as headaches, high blood pressure, insomnia. **Some of the staff spoke about the sense of relief that they gained from participating in Capacitar training.**

Some of them (the staff) would have really taken to it. And would be putting it to use. They would remember little things. Some have shared it with their parents. Some of them would have used it with their own children and babies.

One day.. I was amazed. When you do them, you think I always do that. They are innate, we are not aware we use them all the time. I had some sessions with the staff in Mountjoy Square. I was walking with one of the women and she met a man who said he had a terrible headache and he couldn't go to work and she said why aren't you doing your tapping - I told you.

In order for Capacitar to be fully embedded within CASPr, participants made some suggestions about what success would look like and the tools that could be used to achieve it.

We would be running parent and child Capacitar programmes that are well attended. That the staff use the tools in their everyday interactions with the kids. Instead of have some crisps, they do the head holds. That the prize at the end of the day is 30 mins Tai Chi

I think to embed it in CASPr, develop protocol and brain storm with staff how do we speak about this every day, that they would share with each other instances of John fell and this is what we did so it's a very conscious thing.

One of the management committee suggested that a facilitated time could be set aside to talk about how they would use Capacitar practices in their work. Having this facilitated at least at the outset would help in drawing up specific targets and would make it more serious.

The idea of a 'Capacitar school' that would champion Capacitar practices and become a model for other schools and the wider community was also mooted. This may involve Capacitar being introduced to all the staff and students and integrating it into their everyday lives.

In school instead of being sent for time out or outside the door you could sit in the corner and do the practice like hand holding. Let's look at another way of reprimanding children. For children to go into school or after school and take 5 minutes to ground themselves. That is embedding it. Also to use the practice to change negative thinking into positive thinking. It calms a child down and I think it is much easier to deal with children who are calm. For parents it's an alternative to tablets, drink etc.

5.9 How has the introduction of a body based, holistic programme been received?

The previous evaluation of the programme carried out in 2016 stated that 'for people who have no previous experience of holistic work, the body based exercises such as Tai Chi, dance, Pal Dan Gum will inevitably be a stretch out of their usual comfort zone' (Dolphin, 2016). It was recommended that future Capacitar training should include a framework that supports participants who have no experience of holistic methodologies to make the stretch beyond their normal comfort zone and understand the

journey of emotional healing. It is unclear whether the programme has helped all participants to make this stretch and logistical and time constraints have possibly made it difficult to dedicate sufficient time and energy to supporting staff and the wider community to make those stretches.

There was some evidence that the staff members were mostly engaging more with Capacitar, understanding its purpose and becoming more comfortable with its holistic and body based nature. One staff member explained how it had helped her with communication:

The ball of light, throwing to each other and the hand massage are good for communication as otherwise people are shy with each other. You might see someone on the street time and time again, but you won't say hello. Capacitar helps you to make contact.

One of the management/board members reflected on how Capacitar was received initially and how some were sceptical at the beginning:

Some think that's auld shite! That's Dublin 1 ... They can be very hard to break down. Because we're here 20 years, it's not like we're fly by night, people think ok we'll take it. The staff think I can see some benefit. And the way it is pitched at people as well, you could kind of say well most things are worthwhile, I'll give it a chance. You might get something from it and it doesn't mean you're this or that if it doesn't suit you. Don't throw it away straight away. It can be something positive.

It was also noted that it can be difficult to engage men and other than the male childcare staff in CASPr, no other men had engaged with Capacitar.

Some might be a bit giddy or I'm not doing that. You have to trust if someone says I don't want to do. The difference between giving something a go and intuitively know they are not ready for something, unless they are being deliberately destructive. Men may have more of a challenge around it.

This also shows the difficulties some people may face who have very little experience of similar programmes. Adults may feel more inhibitions than children. The children who participated in this evaluation appeared very open and enthusiastic with equal reactions observed among girls and boys.

Spreading Capacitar to the wider community has been more challenging. The engagement of schools has been largely positive, but both schools and those working in CASPr recognised that it was more difficult to get parents on board. Discussions were held with participants about how it was communicated to parents and it was suggested that clearer information about what Capacitar is exactly in verbal and written formats could be provided. The logistics of spreading Capacitar to a much wider audience may also be challenging given the small size of CASPr and the number of people trained to deliver Capacitar or to train other people to do so. This is discussed in more detail in the next section.

5.10 Funding and logistical organisation

The Hopscotch project in CASPr has been funded by Help for Children since 2015, with its current funding for 2017 at €19,600 per annum. This funding is relatively low and is needed to cover all programme costs such as administration, delivery, evaluation, overheads etc. Currently there is one trainer who is contracted to provide all the Capacitar education programmes (for staff, after schools and schools). This creates a considerable reliance on one person. The trainer was found to be extremely competent, professional and had established a very good rapport with the team in CASPr, the schools and children.

Some teachers suggested that it would be useful if more people were available to deliver Capacitar training and some suggested an interest in being trained in it. It was also proposed that some Special Needs Assistants (SNAs) could also be trained to deliver it.

Outcome 3 of the Logic Model for Hopscotch envisaged the development of a FETAC Level 5 training module in Multicultural Wellness Education. A number of meetings were held between CASPr and Capacitar Ireland with a view to advancing this, but it has not been possible to achieve to date. The management/board explained how a module was developed and QQI validation was sought but was not possible to progress due to ownership of the module. CASPr was considered to be too small for it to work in the way they had intended. This has meant that it is now difficult for CASPr to provide QQI recognised training in Capacitar. This has created a catch twenty-two situation, whereby it is difficult to grow and to spread Capacitar and this may be partly due to the small size of CASPr. One of the management team acknowledged that the efforts to introduce train the trainer programmes had not yet borne fruit but efforts are ongoing.

To be honest, we need to pull back. It is costing us more than €19k and in an effort - not to own it but to train the trainer.

This situation was considered frustrating as it would be less costly if other people from outside agencies could be recruited for the training as it would subsidise the cost of the training.

Yes If we could share it out, it would be less costly, if we had twenty people doing the training then we would fill up the room with other people. Yes why we want to run a module and get funding to train people to deliver Capacitar and particularly get childcare trained people to deliver it, but we haven't made it work yet. We are too small to do that. We are not big enough.

In the meantime, the management team recognised that the need for continued funding was a worry and that the current funding arrangement may not last forever.

As long as they (Help for Children) keep funding it that is great. Who knows - they might decide they have new focus. They have an event every year and they might not raise the same amount every year

5.11 Participants recommendations for the future

Participants on the whole were very positive about the implementation of Capacitar. They were all asked whether they had any suggestions for improvement. A few small suggestions were made, some of which have already been alluded to in previous sections.

- 1) Overall participants would like to see **Capacitar spread further** and have a greater 'multiplier effect'. Ways in which this could happen included training more people to deliver it, including teachers and childcare staff.

I would like to see us double the staff. For lots of reasons, one we could offer it to other schools, but more than that the training that comes out of it means that the people who train here go back into the community. They are the example to the community, particularly if their own school experience was poor that they can come back around and say look I learned afterwards.

The need to **engage more parents** was recognised as important and it would help to embed it within the home and the community.

I think we would do it the same way, but to get more parents involved. If mam and dad could do it, children learn hugely by example. Here it's mainly mummies. It's still very difficult to get parents involved -for anything.

- 2) The limited funding and small size of CASPr made it difficult to **manage the demand** and to respond to the identified needs of the community.

The demand. There is greater demand than we can manage. In fairness to (trainer). She is very relaxed and she can make it work. Although each situation is not ideal, she can get the most and make it work.

- 3) The need to **embed Capacitar within everyday practices in CASPr** was recognised and this may mean developing protocols and guidelines around how and when it might be used.
- 4) Schools were recognised as an important vehicle for reaching large numbers of children and reaching out to the community at large. Having a **Capacitar school** was suggested as a way of embedding it further within the community.
- 5) The **funding situation was recognised as a limitation to the development of Capacitar** and its potential to reach more people in the community. Alternative sources of funding could be explored to address this.
- 6) The project is twenty-two years old and has, like so many projects, been subjected to cutbacks that are continuing to take a toll. The reduction in staff that the project currently experiences is only getting worse and will mean that this coming November (2017) service delivery to the after schools service is uncertain.

6. Summary of Key Findings and SWOT Analysis

6.1 Key Outputs and Outcomes

Overall this evaluation has shown that Capacitar has had a very positive effect for participants, with the benefits for children being particularly noteworthy. It is an effective wellness programme, which has achieved many of the desired outcomes. The children who have participated appear to have embraced Capacitar wholeheartedly, with enthusiasm and a hunger for more. The evidence would suggest that they are beginning to find a new emotional language and to find new ways of expressing themselves. It was evident that some of the children suffered from some distress and traumatic situations in their lives and for some Capacitar offered a way to begin to deal with some of these stresses. As noted in the previous evaluation however, the opening up of emotions and feelings needs to be done carefully and follow up support may be required.

The outputs³ of the Hopscotch project include:

- The participation in Capacitar training by over 100 children in four schools and two after schools
- The training of over 20 childcare and other staff in CASPr
- Training sessions offered to teachers in four schools
- Parent and child Capacitar training delivered in one school (involving up to 6 parents)
- Initial negotiations conducted on obtaining QQI accreditation for Capacitar Train the Trainer training.

It is hoped that the project will make a long-term impact to the emotional wellbeing of children who participate. At this stage, it is not possible to determine the longer-term outcomes, but some short to medium outcomes⁴ have been observed in this evaluation. A caveat should be noted however, that the evaluation did not follow particular children in depth nor contain detailed longitudinal data on areas such as behaviour, social and emotional wellbeing. The evaluation did capture both quantitative and qualitative data from the children about their participation in Capacitar and their immediate responses to it. The observations from adults interacting with them such as teachers and childcare workers also formed a core part of analysis. Drawing on these, it can be concluded that the Hopscotch project to date has delivered the following outcomes:

1. The project has been delivered successfully and almost all listed outcomes in the logic model have been reached, with explanations provided where difficulties have been encountered (e.g. engaging parents and obtaining QQI recognition for the training).
2. Four schools and various teachers have engaged with Capacitar and have mostly demonstrated a great willingness to develop it further in their schools. This has added to the multiplier effect of reaching more people within the community.

³ Outputs here refer to immediate deliverables of what has been achieved.

⁴ Outcomes in this context refer to the more medium-term results of what has been achieved and involve some assessment and analysis of quantitative and qualitative data. The outcomes here are based on the current evaluation data.

3. The project management and administration is carried out in a professional and competent manner and all project documentation was available
4. **All the staff in CASPr have participated in Capacitar training and are demonstrating an increasing level of understanding and use of Capacitar practices both for themselves and in their work with children.**
5. The children have demonstrated the highest levels of benefits from participating in Capacitar. The trainer has established a very positive rapport with the children and many looked forward to their sessions with her. They have not only enjoyed participating, but have shown that they feel more relaxed, more in tune with their emotions and demonstrated evidence that they are starting to self-soothe and practise self-care, through the use of Capacitar practices. As with many tools, they need to be practised regularly and the children could benefit from additional sessions on an on-going basis.
6. Capacitar may assist in the prevention of abuse in all its forms by giving children the means to express themselves and indicate when they do or do not feel safe. It provides a new emotional language, which may offer a protective factor. Similarly, it may help in the prevention of substance abuse, by giving people the option to find other ways to self-soothe.
7. Capacitar can release emotions and this was evident in the discussions with the children and one or two said it made them feel sad. Whilst this may appear negative, it may also be a way for children to release and deal with what they are feeling. As noted earlier, follow-up support for children who become emotional may need to be built into the programme.
8. The tensions and stresses in the area are manifold and the children demonstrated evidence of being affected by issues such as insomnia, violent noises at night
9. There is considerable scope to further develop and embed Capacitar within CASPr and the groundwork has been laid. Suggestions for how this could be done are contained in the recommendations.

6.2 Challenges encountered

Overall, Capacitar has been implemented relatively smoothly and no unsurmountable obstacles have been encountered. A few small challenges arose during the implementation of the project.

1. The **engagement of parents and embedding Capacitar within families** has been a struggle for the project. It was also difficult to recruit parents to participate in the evaluation. Many of the children spoke about using Capacitar themselves, but did not present it as something they practised with their families (with a few exceptions). Such practices would be more effective and embedded within children's lives if they were adopted by the whole family. It is hoped that over time, more parents will become interested as the children talk more about it. It is important not to give up hope and consider new ways of engaging parents. Suggestions for how this could be done include providing information sheets to parents for children who participate at schools (e.g. here is what I did at school today with a picture of Capacitar practices); embedding Capacitar more within schools, which may lead to more parental engagement; offering more taster courses

possibly combined with some other event/incentive that is likely to entice them to come; developing more visual materials such as posters/flyers explaining what Capacitar is in a way that makes sense and asking children to demonstrate some Capacitar practices when their parent collects them from after school/school.

2. CASPr struggled with **developing QQI accreditation for a Capacitar train the trainer module**. It was hoped that this could be offered as a FETAC module, but this has not been progressed to date. It is understood that negotiations with Capacitar and QQI took place, but that the size of CASPr made this difficult. It would be very useful if these negotiations could resume and if a mutually agreeable solution could be found that would allow CASPr (in conjunction with Capacitar Ireland) to deliver recognised training to a wider group of people. This would give the programme greater validation and would also assist in multiplying the benefits of Capacitar to a wider audience.
3. There was a sense among some participants that **not all schools were as willing to engage with Capacitar as others**. The researchers did not notice any reticence among teachers who were interviewed, but it was clear that the levels of engagement varied. Schools are under pressure to deliver a wide range of programmes and curricular developments and Capacitar may not be the highest priority. It may be useful to show the benefits it can have for children's emotional well-being and some teachers reported having a class that was calmer and able to find ways to self-regulate.
4. The **funding of the project has been relatively low and is delivered on an annual basis**, with no long-term security. This has made it difficult to make long-term plans and there was a fear among some of the project management team that it was costing more to run and was financially precarious. Alternative and more secure sources of funding could be sought. It could possibly apply for funding through the Mulvey Report or from Tusla/the HSE due to the health and wellbeing benefits of the programme.
5. **The CASPr model is organic and responsive to the needs of the Community. Like many projects that work closely with Community Employment Schemes, there needs to be a review of systems that now pervade in communities of severe deprivation to ensure that sincere projects like CASPr can operate creatively as is expressed in their offering of the Capacitar Programme.**

6.3 SWOT Analysis

Figure 9 Strengths, Weaknesses, Opportunities and Threats



7. Conclusions and Recommendations

The overall conclusion of this evaluation is that the Hopscotch project has delivered a wide range of outputs in a timely and cost-effective manner. The implementation of practices such as Capacitar in a context where people may have had little or no experience of such holistic practices is challenging. It appears that the greater challenge of getting people to be open to such a programme and engage with it has been with adults, particularly the parents of the children participating. The children who participated on the other hand demonstrated a great enthusiasm and openness towards the programme. This was also facilitated in part by teachers who undertook the training themselves and engaged with the programme in their classrooms.

The Capacitar training delivered has been of a very high quality and the trainer has been flexible and responsive to the needs of each group she works with, ranging from pre-school children up to adults. The sessions with the children are fun and engaging, while also allowing for the personal and emotional development of the child. Some children report feeling sleepy after the sessions, which may also be an indicator of deep relaxation or general tiredness. The opening up of emotions is an important area and one which may require further support.

There is great evidence of need within the area and the interviews with the adults (teachers, staff, project management team etc.) elaborated on some of the strains people are living under. Some of these were also alluded to indirectly by the children. Capacitar on its own will not address all these issue, but as a tool within a suite of supports offered to families and the wider community, it can help to foster greater emotional and physical wellbeing. As one interviewee stated, it can also offer an alternative to tablets, drugs or alcohol and may assist in substance abuse prevention.

The key recommendations of this evaluation are as follows:

- 1) The work on **embedding Capacitar within schools** should continue and where feasible should be extended to more children. The option of providing training to teachers or other staff to deliver it should also be explored, but with on-going support from a more experienced Capacitar trainer.
- 2) The possibility of a **Capacitar led school** should be developed, starting with discussions with schools who may be interested. Examples of international practice from Capacitar International could be drawn on. Capacitar practices could be used in conjunction with restorative practice in dealing with conflict, emotional issues and general wellbeing. Ideally it would be used by both staff and pupils within the school and would also be extended to parents.
- 3) New **ways of engaging parents** should be explored. This could start with schools and involve the CASPr Staff. It could also involve finding ways for children to communicate what they do in Capacitar at school with their parents. New visual materials (see below) could be developed that would help to communicate what Capacitar is.

- 4) Some of the **communication about Capacitar** could be formalised and a short communication strategy should form part of any new plans. Currently Capacitar may be called Tai Chi or meditation or a wellness class. Different terms appear to be used. It should not necessarily be assumed that people will not understand what it is and it may be useful to use the correct term Capacitar and to provide an explanation of what it is (using visual graphics where appropriate).
- 5) The staff at CASPr should continue to be positive role models for Capacitar practices and could explore **new ways of embedding it within the organisation**. This might mean incorporating Capacitar practices into regular meetings, or starting and ending the day with a short Capacitar practice. It should not be assumed that it is always an hour long session and the integration of Capacitar into other everyday activities should be explored.
- 6) The on-going **monitoring of the project could be streamlined**, with regular short evaluation questionnaires administered to adult and child participants at the end of each group of sessions. It would be interesting also to follow participants who have participated in more than one group of sessions and to note whether they have deepened their understanding and use of Capacitar practices over time. Over the longer term, a longitudinal study looking at children who have participated could be conducted to observe any long term changes. On-going monitoring could also include documenting how Capacitar practices are being used on a daily basis on CASPr and keeping a note of any changes made.
- 7) **Linkages with other agencies providing services to families and children in the area** could be developed further, particularly with a view to embedding Capacitar within the wider community and other organisations. Whilst CASPr may continue to be the lead organisation for Capacitar, it would be useful to communicate its benefits to a wider audience. This may also assist in the leverage of funding. Clearer communication materials about Capacitar and its benefit would help in this regard. It may be useful also to inform mental health professional and social workers about the work of Capacitar and to explore linkages with them.
- 8) Some of the children and a teacher suggested that the **length of the Capacitar sessions** (one hour) in schools was possibly too long and made the children a little sleepy. For the younger children, this may have been a little shorter. The ideal timeframe and time of day should be discussed in advance with each teacher and 45 minutes may be sufficient.
- 9) As suggested by one of the children, **the children could be asked to capture how they feel after Capacitar visually** as well as orally. If time allowed, they could be asked to draw a picture of how they felt afterwards or a particular Capacitar exercise. This may help them to process their feelings and provide the trainer and teacher with an indication of how they are feeling.
- 10) **All of the above recommendations are underpinned by credible staffing numbers and CASPr must engage with all the stakeholders to ensure that there is no further erosion of staffing**

numbers and that all efforts are concentrated in reversing what is the current trend of staff reduction.

- 11) As noted in the previous evaluation, **follow up support for participants who become emotional or distressed** should be embedded further in the project. In schools, this can be difficult as the trainer conducts a session and then leaves. It could be useful if the trainer and the teacher had more unbuilt regular communication, with the possibility for each to provide feedback and iron out any issues that arise. A mechanism for support for any child who becomes upset could be established.

Appendices

Help For Children Grant Narrative Progress Report

CASPr – 2nd February 2017

Name of organization: Community After Schools Project (CASPr)

Date: 2nd February 2017

Amount of grant: €19,600

Progress on Original Outcomes

(Cumulative for the Grant Year)

(Please add outcomes as needed based on your logic model)

Original Outcome 1 (state outcome exactly as listed in your logic model, including numbers, percentages, and measures):

60 children will improve emotional and social well-being after participating in an internationally recognised 15 week Multicultural Wellness Education program

- **Progress to date:** *provide specifics based on activity listed on the logic model including number served and services provided (if possible, please provide a summary chart). *All numbers must be unduplicated*
 - In CASPr itself 25 children participated in the Wellness Education programme for 8 weeks
 - 71 children in 3 local schools attended the Wellness Education programme which ran for 4 weeks in two schools and 8 weeks in the third school.
- **Explain any circumstances that resulted in inability to meet objectives or changes in objectives or timeline:**
 - Because of our relationship with local schools some teachers asked us to do a taster session with them which resulted in the roll out of the programme in 3 local schools.

Original Outcome 2:

50 parents/childcare staff will improve their emotional awareness and expression after participating in an internationally recognised 10 week Multicultural Wellness Education program.

- **Progress to date:**
 - 5 parents of CASPr children attended 2 x 2 hours taster sessions
 - 20 parents from a local school attended 4 weeks of Wellness Education
 - 20 teachers (including the principal and vice principal) in a local school attended a 1 hour taster session

- **Explain any circumstances that resulted in inability to meet objectives or changes in objectives or timeline:**
 - It is exceptionally difficult to engage the parents of these children. They are known as 'the most difficult to reach' part of the population. When we struggled to get our parents to engage with the programme we approached the Home School Completion Liaison teachers in 1 local school and have been running a weekly programme there, where we meet parents as they drop their children off to school. This is a slow process but does seem to be gathering a little traction.
-

Original Outcome 3:

A FETAC Level 5 training module in Multicultural Wellness Education

- **Progress to date**

CASPr had a number of meetings with Capacitar Ireland, education providers and others who are well versed in Quality & Qualifications Ireland (QQI), and what it takes to have a module developed which may be accredited by QQI. Our research resulted in getting clear that neither CASPr nor Capacitar Ireland could develop an accredited module on their own. As a result CASPr and Capacitar Ireland reached agreement on joining together to develop this piece of work and drew up a MOU with a view to moving forward.

Additional Organizational Outcomes: *(Other new services developed, new funding received, staffing improvements, budget cuts and other impacts as a result of changes in the local service system etc.)*

- The fact that we are now working in three schools is an added facet of the Hopscotch project. This is due to our commitment to reaching the parents of local children. It is also due to the fact that during our explorations of how to comprehensively evaluate the project it was agreed that one way to do that would be to roll the programme out to local schools.
-



Organization Name: Community After School Project (CASPr)

Program/Project Name: The Hopscotch Project

What is the problem your program/project is trying to address? Children who live in impoverished and tense conditions can become stressed and ill. The Hopscotch Project aims to support the development of a response to emotional and social needs among children and families as

What is the overall goal of your program/project? The purpose of the Hopscotch Project is to deliver Multicultural Wellness Programmes among children and families, which in turn acts as a protective factor against abuse and neglect

Desired Outcome <i>What is the outcome you are trying to achieve?</i>	Inputs <i>What are the resources (e.g. staff and materials) you will be using to achieve your outcome?</i>	Methods <i>What are the activities you will be using to achieve your outcome?</i>	Program Outputs <i>What are the products or results of your activities (include quantities)?</i>
1 . To develop a response to emotional and social needs among children primarily, and families as a protective factor against abuse and neglect.	> 1 part-time coordinator, 1 part-time tutor, training manuals, office supplies, office space, classroom space, training room, computer hardware & software	> Education & training in the Capacitar wellness practices for children	> 100 children, in CASPr and 4 schools in Dublin's inner city, will improve emotional and social well-being after participating in an internationally recognised 20 week Multicultural Wellness Education program
2 . To develop the Hopscotch Project as a valuable, innovative evidence based pilot project of repute, in order to build a case for its efficacy and relevance to the prevention of child abuse and neglect.	> 1 part-time coordinator, 1 part-time tutor, training manuals, office supplies, office space, classroom space, training room, computer hardware & software	> Education & training in the Capacitar wellness practices for adults	> 40 parents/childcare staff/teachers will improve their emotional awareness and expression after participating in an internationally recognised 10 week Multicultural Wellness Education program.
3 . To initiate and embed CASPr's delivery of training of Capacitar's Wellness programme to parents, local adults working within CASPr and other local organisations.	> 1 part-time coordinator, 1 part-time training manager, 1 Capacitar tutor, office space, computer hardware & software	> Engagement and discussions with Capacitar Ireland, Quality & Qualifications Ireland (QQI), City of Dublin Education & Training Board (CDETB)	> A FETAC Level 5 training module in Multicultural Wellness Education

Evaluation of Hopscotch Programme at CASPr

Information Sheet for Children



Hello, our names are Louise Kinlen and Elaine Mac Donald. We are researchers and we have been asked to do an evaluation of the Hopscotch wellness programme that you have been doing with Marian. This means we would like to find out whether it is working well, whether you enjoy it, find it useful, and maybe how it could be improved. We would really like to find out from you what you think. This will help the people who organise it to make sure that it is useful for the children who take part.

We would like to have a short chat with some of you and would like to ask you if you would like to do that. We would ask you some questions about Hopscotch and how you found it and see if you have any suggestions. You would only need to answer what you feel like and you could stop at any stage if you have had enough. It should not take more than 15 minutes.

Writing notes and keeping your information safe

For the chats, we will write down notes of your answers. We will use these notes in writing my report, but we will not use your real names in writing up the report. We will not tell anyone else what you said (unless we felt that you were in danger). We will write the report in such a way that it should not be possible to say who you are. No-one else will be allowed to see the notes we write.

Consent/Agreement

For these chats, we need to have agreement (consent) from you and from your parent/guardian. We have a separate sheet for your parents/guardians.

I agree to take part in an interview about the Hopscotch programme. I understand what it is about and I know that I can stop the interview at any stage.

Signature

Date

Evaluation of CASPr Hopscotch Programme- Information for parents of participating children

Our names are Louise Kinlen and Elaine Mac Donald, and we are researchers. We have been asked to do an independent evaluation of the Hopscotch programme that your child has been taking part in with Marian at school or in CASPr. This is a wellness programme that helps children and adults to deal with social and emotional needs. It has been delivered by CASPr for two years and they would like to find out whether it is working and what could be improved. As part of this evaluation, we would really like to speak with some of the children who are taking part, and to hear what they think about it. First, we need to get the consent (agreement) from the children themselves and from a parent or guardian. We would really like to hear from the children who go there and to find out what they think. In order to do so, we need to get the consent (agreement) of the children and their parent or guardian.

We hope to organise interviews with the children either in school during the sessions or in CASPr. Children would be interviewed in small groups of two to three and we will not be in a room alone with them. We have both undergone garda vetting and will adhere to all child protection procedures. The interviews will only take place with children whose parent/guardian has given consent.

The interviews will not last more than 15 minutes and we will do them in a child friendly way and try to make them fun. We will ask the children some questions about Hopscotch and how they think it has helped them. They do not have to answer every question and can stop at any stage.

Writing notes and keeping information safe

For the interviews, we will write notes of the answers. We will use these notes in writing my report, but will not use real names in writing up the report. We would only disclose details if we felt the child was in danger (under child protection guidelines). We will write the report in such a way that the information is anonymous, meaning that no-one can identify the individual child. We will also keep all information about them confidential and we will make sure that no-one else has access to the information we collect (notes, computer files etc.).

Consent/Agreement

If you are happy for your child to be interviewed as part of this evaluation, you can fill in this consent form. A separate form will be used on the day for the children.

I _____ (Name in block capitals) agree for my child

_____ (Name in block capitals) to take part in an interview about the Hopscotch Programme.

Signature

Date

If you have any queries, you can contact Louise Kinlen on 087 xxx or talk to Ann in CASPr

CASPr – Hopscotch Programme Evaluation

Information Sheet & Consent Form for Adults

Overview

Our names are Louise Kinlen and Elaine Mac Donald. We are researchers who have been asked to carry out an independent evaluation of the Hopscotch Programme organised by CASPr. This is the wellness programme, which is being carried out with children and adults, and it helps to address social and emotional needs. As part of this evaluation, we would like to talk to you about your role in the programme. You are not obliged to take part. If you would like to take part, we would like to ask for your consent to do so.

We are proposing is to carry out an interview with you. We have prepared some questions in advance, but we do not only need to stick to these, and you can feel free to raise other areas you think are important.

The length of the interview will depend on the individual, but should generally take between 15 and 30 minutes.

You are not obliged to answer every question, and if at any stage, you would like to stop the interview, you can ask to do so.

Confidentiality and anonymity

All information you give will be treated confidentially, which means we will not share this specific information with anyone else and we will not use your name in any report. When we write the report, we will use some general information from the interviews and may use some direct quotes, but will try to do so in such a way that no-one can be identified.

Recording and data storage

There are two options that you can agree to for the capturing/recording of the interview:

- 1) We can make an audio recording of the interview using an app on my phone. We will then write it out word for word on my computer and destroy the recording once I have done that. If a recording is made, this recording will only be used for the review and the audio recording will be destroyed once the transcript has been written. The recordings will be stored securely on my computer to which no-one else has access.
OR
- 2) If a participant prefers, we can take detailed notes during the interview and not do any recording. Some participants prefer this method and they may feel freer to speak if it is not recorded. Likewise, the data will be stored in a confidential and safe place and no-one else will be given access.

INTERVIEW CONSENT FORM

I _____ (Name in block letters) have read and understood the above information and agree to participate in an interview for the purpose of the Hopscotch evaluation. I understand that I can ask the interviewer to stop at any stage or to ask for any clarification.

Signed _____

Date _____

I would prefer if the interview was captured through (please tick preferred method):

Audio recording _____

Note taking _____

No preference _____

Signed _____

Date _____

Any other comments/special requests:

Interview Questions Project Management Team

1. Can you tell me about the background to Hopscotch, how and when it started and what you were hoping to achieve
2. What was your own role?
3. Why did you choose this particular area to run it?
4. Hopscotch has been running here for about 2 years – what changes have you noticed during this time?
5. What involvement do you currently have in the organisation/management of Hopscotch? Who helps you in this role?
6. What do you think have been the main outputs of Hopscotch for the children involved?
7. How do you think it has affected their emotional, social and physical well-being? Do you have any examples (without using names)?
8. What have been the outputs (if any) for a) the staff involved and b) the parents or extended family of the children?
9. What challenges has the programme faced? How have you tried to overcome them?
10. One of the aims of Hopscotch has been to help children to stay safe and prevent abuse – how do you think it tries to achieve this aim? Do you think it is making an impact in this area?
11. Do you see evidence that Capacitar is embedded a) within the organisation? (e.g. how have staff responded to it, do they use Capacitar practices in their work?)
12. Do you see evidence that Capacitar is embedded within the wider community?
13. The community context and environment in which the programme is run are important. How do you think that the particular geographical/community context impacts on the delivery of the programme? Does it bring any additional challenges or opportunities to this work?
14. Capacitar is body based and has spiritual /Eastern elements that may be new or different to some people – have some children or adults found any of this difficult?
15. What do you think successful implementation of Capacitar within this context would look like?
16. If you were starting again, would you do anything differently?
17. Do you have any current monitoring of the effectiveness of the programme? What do you think might be useful in the future?
18. Do you have any recommendations for the future implementation of Hopscotch here?
19. Anything else you would like to add?

Questions for Children – Capacitar

Interviews with Children

1. Can you tell us a bit about what you do in the class with (trainer)?
2. How many sessions have you had – or for how long have you been doing it?
3. How many of you do it - are you all in the same class? (or mixture of different classes)
4. Do you enjoy it? Why/why not?
5. What is your favourite part? Why do you like that bit?
6. Is there any bit you don't really like? Why?
7. How do you feel when the class is over?
8. When you did it for the first time, what do you think? And do you feel differently about it now?
9. What do you think is the point of these classes?
10. Did your teacher or (trainer) talk to you about the benefits of Capacitar?
11. Do you talk to or show anyone at home about what you do here? (if yes, do they know much about it, do they use it too?)
12. Have you used some of the practices outside of this class ? (e.g. at home, outside, during school)
Can you tell me a bit more about this...e.g. did you find it helped?
13. If you find that you are worried, angry or upset, do you think it could help you?
14. Are there other ways that you think Capacitar has helped you?
15. Would you like to do more Capacitar after the Summer holidays?
16. If you could make any changes to the class, what would it be?
17. Anything else you would like to talk about or ask us?

Thanks for your time!

Capacitar Evaluation – Questions for Teachers

1. Can you tell me a bit about the background to the Capacitar programme in your school – how long has it been running? Who initiated it?
2. How is it organised – by class, mixed group from different classes?
3. What ages/classes are the children who are currently participating
4. What made you decide to offer it to those particular groups?
5. What do you think is the aim of Capacitar? And how does it try to achieve this?
6. Have you observed or participated in the sessions?
7. What have you observed? How have the children reacted to the sessions?
8. What part do you think works particularly well? Why?
9. Are there parts they enjoy less? Why?
10. What do you think have been the benefits of the programme?
11. Do you notice any difference in the children – both just afterwards and in general?
12. Does it help the children to relax and to concentrate better?
13. What kind of stress/worries do you think the children have? Does this programme help?
14. How does the wider environment and issues in the community affect the children?
15. One of the aims of the programme is the prevention of abuse and it aims to give children confidence and to be able to speak up about what is going on in their lives. Do you think it helps to do this?
16. How does the programme complement SPHE / Stay Safe and other programmes you run in the school?
17. Are there any teachers/other staff in the school who are interested in training in this programme and being able to lead the sessions?
18. Do you hope that the programme will continue in September?
19. Have you any suggestions for improvement?














































Questionnaire for Children doing Capacitar

I am a boy / girl (please circle)

I am in _____ Class

The name of my school is _____

Please circle the face that is true for you for each question:

	Not at all	Not much	A little	Quite a lot	Lots and lots
I like doing Capacitar					
Sometimes I tell a staff about my worries					
I feel relaxed after doing Capacitar					
I am less worried after doing Capacitar					
I am less tired after Capacitar					
I feel calmer after doing Capacitar					
I have more confidence after Capacitar					
Since coming to Capacitar, I am more able to deal with difficult situations					
I tell my family about what I do in Capacitar					

My favourite things about Capacitar are:

I don't like these things about Capacitar:

Any other comments about Capacitar?

References

- Cane, P.M. and Duennes, M. (2005), *Capacitar for Children Teacher Handbook*. Santa Cruz: Capacitar International.
- Condon and Cane P. (2011), *Capacitar: Healing Trauma, Empowering Wellness A Multicultural Popular Education Approach to Transforming Trauma*.
- Dawe, S. and Harnett, P. (2007), Reducing potential for child abuse among methadone-maintained parents: Results from a randomized controlled trial. *Journal of substance abuse treatment*, 32(4), pp.381-390.
- Department of Children and Youth Affairs (2012), *Guidance for Developing Ethical Research Projects involving Children*. Dublin: DCYA.
- Dolphin E. (2016), *CASPr Hopscotch Project Evaluation*. Dublin: CASPr
- Johnson, C., Burke, C., Brinkman, S. and Wade, T. (2016), Effectiveness of a school-based mindfulness program for transdiagnostic prevention in young adolescents. *Behaviour Research and Therapy*, 81, pp.1-11.
- Kerrigan, D., Johnson, K., Stewart, M., Magyari, T., Hutton, N., Ellen, J. and Sibinga, E. (2011), Perceptions, experiences, and shifts in perspective occurring among urban youth participating in a mindfulness-based stress reduction program. *Complementary Therapies in Clinical Practice*, 17(2), pp.96-101.
- Mulvey, K. (2017), *Dublin North East Inner City Creating a Brighter Future: The Social and Economic Regeneration of Dublin's North East Inner City*. Available online at: <http://www.merrionstreet.ie/MerrionStreet/en/ImageLibrary/20170218MulveyReport.pdf>
- Ortiz, R. and Sibinga, E.M., (2017), The Role of Mindfulness in Reducing the Adverse Effects of Childhood Stress and Trauma. *Children*, 4(3), p.16.
- Shonkoff, J.P., Garner, A.S., Siegel, B.S., Dobbins, M.I., Earls, M.F., McGuinn, L., Pascoe, J., Wood, D.L. (2012), Committee on Psychosocial Aspects of Child and Family Health and Committee on Early Childhood, Adoption, and Dependent Care, 2012. The lifelong effects of early childhood adversity and toxic stress. *Pediatrics*, 129(1), pp.e232-e246.