

Policy Submission

**Submission to the OECD Review
of the Irish Public Service**

June 2007

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INTRODUCTION

The Combat Poverty Agency

The Combat Poverty Agency is a state advisory agency developing and promoting evidence-based proposals and measures to combat poverty in Ireland. Combat Poverty works for a poverty-free Ireland by striving for change which will promote a fairer and more just, equitable and inclusive society. In line with its statutory role (Combat Poverty Agency Act 1986) Combat Poverty promotes advice to Government on policies pertaining to poverty, informed by its research, its demonstration programmes and engagement with groups experiencing poverty.

Poverty in Ireland

Despite recent economic progress 7% of the Irish population remain in “consistent” poverty, ie. living below the poverty line (60% of median income) and deprived of basic necessities like food, clothing and heat. Using the EU poverty comparator 18.5% of the Irish population are at risk of poverty, ie. living below 60% of median income.

The main groups at risk of consistent poverty are:

- lone parents;
- people who are unemployed;
- people who are ill or disabled;
- non-Irish nationals; and
- children.

People who live in rented accommodation and those living in the north-west of Ireland also have a high risk of consistent poverty.

While older people have a low risk of consistent poverty they have a high risk of income poverty. Older women living alone, especially in rural areas, are a particular risk group. Being on a fixed income and requiring access to services and supports are matters requiring attention to ensure that their poverty does not increase in the longer term.

Because of the nature of household surveys some other groups at high risk of poverty are not included in the national poverty figures. These groups have a high risk of poverty and require access to good quality services and supports. These groups include: members of the Travelling community, homeless people, prisoners and ex-prisoners, and drug users.

The Right of All to an Adequate Standard of Service

Combat Poverty believes that quality public services are a social right. Social rights, like other human rights, are universal in nature and application. They are about supporting change in favour of those experiencing inequality, marginalisation and poverty. Social rights promote social cohesion. A key way to improve access to social rights is through strengthening entitlement to such rights and improving overall provision. Social rights have three important features. They are embedded in society and are broader than economic rights. They are indivisible and can be recognised as a chain of rights encompassing housing, health, education, social welfare and employment. Finally, they make particular demands on the state and public authorities and call for an active state. According to Daly, while civil and political rights are usually framed in terms of freedom from state interference, social and economic rights are more likely to involve a claim on the state for protection and assistance¹. Daly refers to the development of a 'quality standard'. Quality standards for public service provision should bear in mind the need for:

- **Adequacy:** the minimum standard offered should be sufficiently high and a high proportion of the people in need should be covered;
- **Acceptability:** there should be less complexity around regulations governing access to social rights, clear eligibility procedures and full implementation of provision;
- **Affordability:** the ability of individuals on differing incomes to afford the purchase of services that meets their needs; and

¹ Daly, M. (2002). 'Access to Social Rights in Europe' in Lavan, A. *Social Rights and Social Cohesion* EISS Seminar 2002, Dublin: Department of Social and Family Affairs.

- **Accessibility:** ease of access to public services is important, and this may require a locally-based strategy.

Combat Poverty agrees with Daly in her formulation of key steps to improve access to social rights which include:

- (i) Strengthening entitlement and improving provision;
- (ii) Strengthening monitoring and enforcement;
- (iii) Increasing the resources available for social rights;
- (iv) Modifying and improving management and procedures;
- (v) Improving information and communication;
- (vi) Overcoming psychological and socio-cultural obstacles; and
- (vii) Targeting vulnerable groups and areas.

If economic and social rights are to be delivered in practice, then it is necessary to formalise and understand their interconnectedness. The National Economic and Social Council endorses the link between rights and standards and recommends that, in delivering services in a rights and standards paradigm, it is crucial to:

- Develop specific, detailed norms in relation to these rights;
- Establish how these norms or standards are to be monitored;
- Clarify obligations of the state in relation to each of these norms;
- Establish accessible, transparent and effective mechanisms of accountability in relation to each of the norms and standards; and
- Establish that all members of society are fully aware of the rights and standards to which they are entitled².

² National Economic and Social Council (1999) *An Investment in Quality: Services, Inclusion and Enterprise*, Dublin: National Economic and Social Council.

Recent Developments

The National Economic and Social Council (NESC) has published a report on the *Developmental Welfare State*³. The report has influenced recent policy documents, most notably, the National Partnership Agreement *Towards 2016* and the National Action Plan for Social Inclusion *Building an Inclusive Society*.

Combat Poverty welcomes the focus on public services and the recognition of the important relationships between services, income support and innovative actions, many of which will be delivered through the community and voluntary sector. However, attention needs to be paid to how these services can be designed to meet the needs of poor and excluded people, how they can be better delivered, and the role of services in contributing to a sustainable and equitable society which supports a progressive economy.

The National Economic and Social Forum (NESF) has recently published a report on improving the delivery of quality public services⁴. Combat Poverty supports the NESF's focus on service delivery and outcomes to meet with the 'informed expectation and needs of the customer' and 'quality public services also have to meet the expectations of society in general in relation to fairness, equality/diversity, social inclusion and the urban/rural perspective'. In particular, NESF draw attention to the needs of people who are marginalised and disadvantaged and recommend that 'public services should be more responsive and inclusive of individual needs'. We very much concur with this approach and the NESF's overall recommendations.

Structure of the Submission

This submission will firstly set out our views on the role of public services, in general, in tackling poverty and what improvements should be made. Secondly, our submission sets out our views on the specific areas of the civil service, and local government, where we have specific knowledge and experience.

³ National Economic and Social Council (2005) *Developmental Welfare State*. Dublin: National Economic and Social Development Office.

⁴ National Economic and Social Forum (2007) *Improving the Delivery of Quality Public Services*. Dublin: National Economic and Social Development Office.

In particular, we address:

- Policy development, including the need for Poverty Impact Assessment;
- The need for a regulatory framework for public services;
- Access to services, based on need;
- Participation;
- Quality of services, with a particular focus on the need for standards;
- Implementation, especially the need for co-ordination and integration; and
- Outcome measurement, monitoring and review.

In the final two sections we set out some of the main issues, from a poverty perspective, relating to health and education, based on our experience to date.

THE PUBLIC SERVICE – IN GENERAL

Context

Introduction

Public services are critical in tackling poverty and promoting social inclusion. Ireland has made great strides in terms of economic growth and in improving income supports for people dependent on social welfare but compared with other countries we have less supportive public services, especially for people on low incomes. We are in danger of reinforcing a two tier society of those who can afford to pay for quicker access or supplementary services and those who depend solely on an under-resourced and poorly delivered public service.

Why Public Services are Important in Tackling Poverty

Countries with good public services have lower levels of poverty.

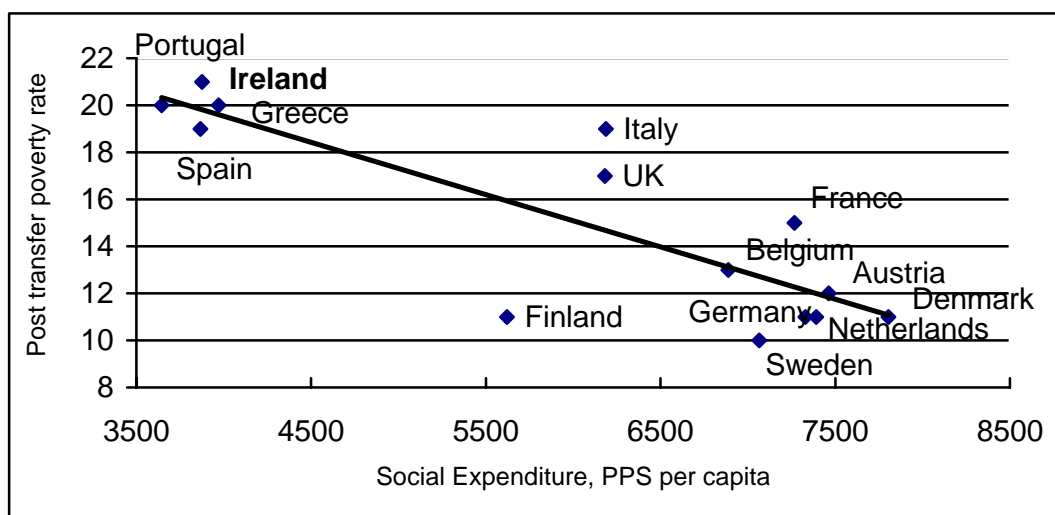
At European level the role of social services in tackling poverty is increasingly recognised⁵. This emphasis is borne out by a number of factors:

- Lower levels of poverty in member states with higher levels of social service provision;
- The limits of increasing income support, especially in the context of an ageing population;
- An increasing emphasis on work / life balance and quality of life;
- Greater focus on participation and meeting the needs of citizens; and
- An ongoing debate about the merits of targeting or universal provision as best meeting the needs of low income and disadvantaged people.

⁵ See documentation from the European Roundtable on Social Inclusion, Tempura, Finland, 17th October 2006 at <http://www.stm.fi/Resource.phx/eng/subj/inter/eu2006/round/round1.htx>

There is a well-established and straightforward relationship between social expenditure and poverty:⁶ countries that spend more tend to enjoy lower levels of poverty, and vice versa. This is illustrated in Figure 1.

Figure 1: Social Expenditure and Poverty Rates



Source: From Timonen, V. (2005) *Irish Social Expenditure in a Comparative International Context: Epilogue*. Dublin: Institute of Public Administration in association with the Combat Poverty Agency.

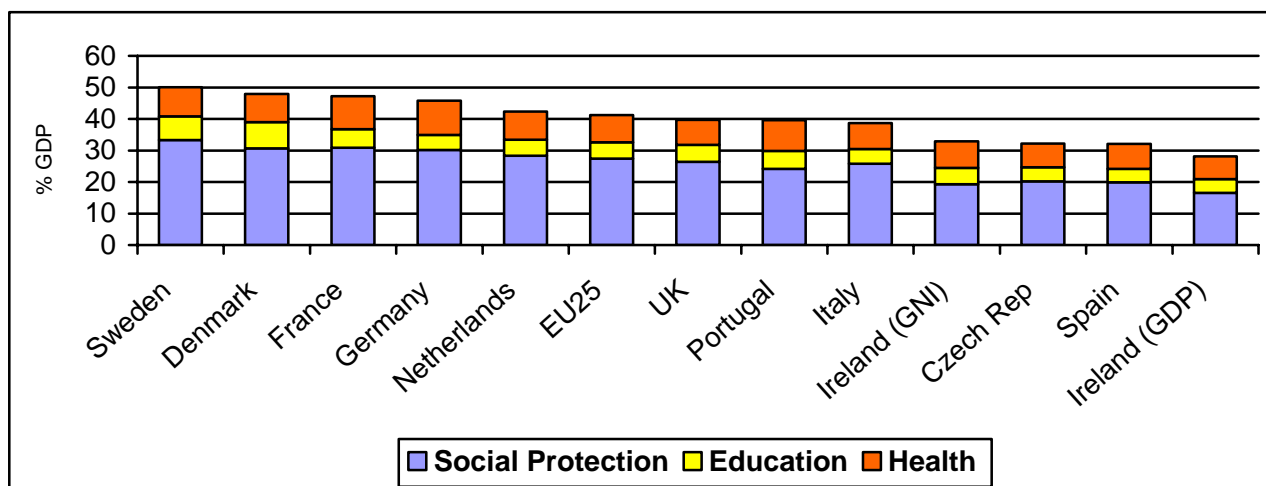
Ireland has relatively high levels of poverty in European terms. 21% of the Irish population is at risk of poverty, compared to a European average of 16% (2004)⁷. While Ireland has recently seen a small decline in the risk of income poverty, 7% of the population (nearly 300,000 people) remain in consistent poverty, living on a low income and deprived of basic necessities because they cannot afford them. The countries with the lowest levels of income poverty are the Nordic states, where public services are recognised to be far ahead of the rest of Europe.

Ireland has relatively low levels of social spending per capita, falling below levels of social spending in most other EU countries, see Figure 2.

⁶ Cantillon, B., Marx, I. and K. van den Bosch (2002) "The Puzzle of Egalitarianism: About the Relationships between Employment, Wage Inequality, Social Expenditure and Poverty". Luxembourg Income Study Working Paper No. 337, December 2002 cited in Timonen, V. (2005) *Irish Social Expenditure in a Comparative International Context: Epilogue*. Dublin: Institute of Public Administration in association with the Combat Poverty Agency.

⁷ Central Statistics Office (2006) *EU Survey on Income and Living Conditions (EU-SILC) 2005*. Dublin: Central Statistics Office.

Figure 2: Expenditure on Social Protection, Education and Health for selected EU countries, 2003



Source: Eurostat, World Health Organisation, CSO National Accounts cited in Central Statistics Office (2007) *Measuring Ireland's Progress, 2006*. Dublin: Stationery Office.

Note 1: Total public expenditure on education as % of GDP, for all levels of education combined

Note 2: Total health (public and private) expenditure as a % of GDP

Ireland's expenditure on social protection in 2003, at 16.3% of GDP was the fourth lowest reported of the EU 27 Member states. Ireland's expenditures on education and health were also below the EU 25 average in 2003. Ireland's combined expenditure on social protection, education and health amounted to 28.1% of GDP in 2003 compared to an EU average of 41.2% of GDP.⁸

Over the period 1995-2004 social expenditure as a proportion of GDP was lower in Ireland than in the EU15 and the EU 25 Member States. Expenditure in Ireland decreased from 18.8% of GDP in 1995 to 14.1% in 2000, but increased again to 17% in 2004.

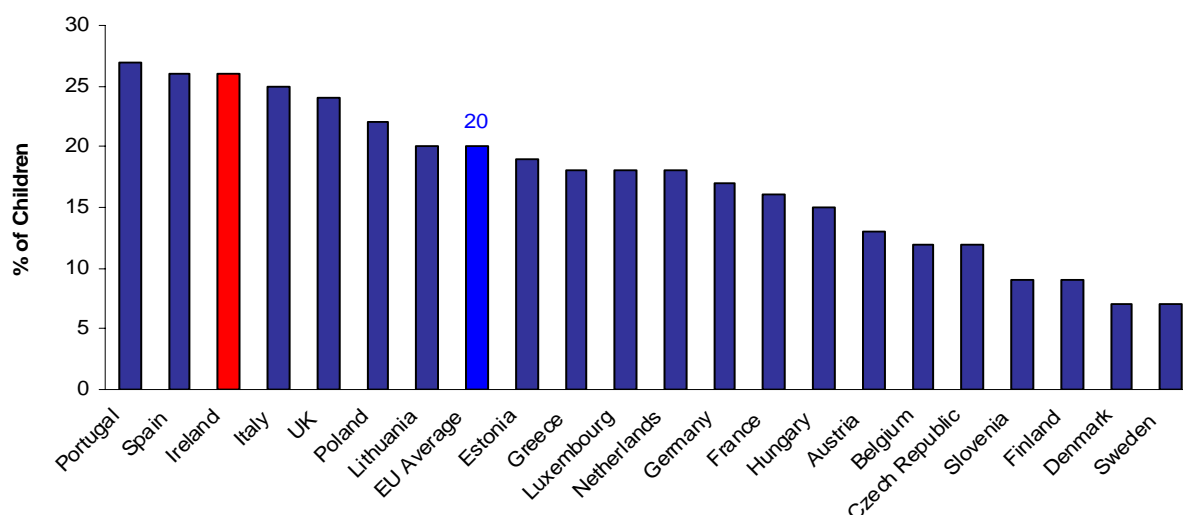
While levels of social spending per capita is a commonly used measure to capture levels of social provision it is necessary to recognise the role of private resources and services. Ireland has relatively high levels of expenditure on private pensions and private provision for health care which is not included in the social spending per

⁸ Central Statistics Office (2007) *Measuring Ireland's Progress, 2006*. Dublin: Stationery Office.

capita figures. However, by its very nature, private provision is not widely available to low income groups. Also, Ireland has a relatively low proportion of people aged 65 and over which results in a lower level of social expenditure.

The relationships between levels of poverty, income support and public service provision can be illustrated by taking children as an example. Ireland's level of child poverty still remains high by European standards, see Figure 3.

Figure 3: Child Poverty Across Europe

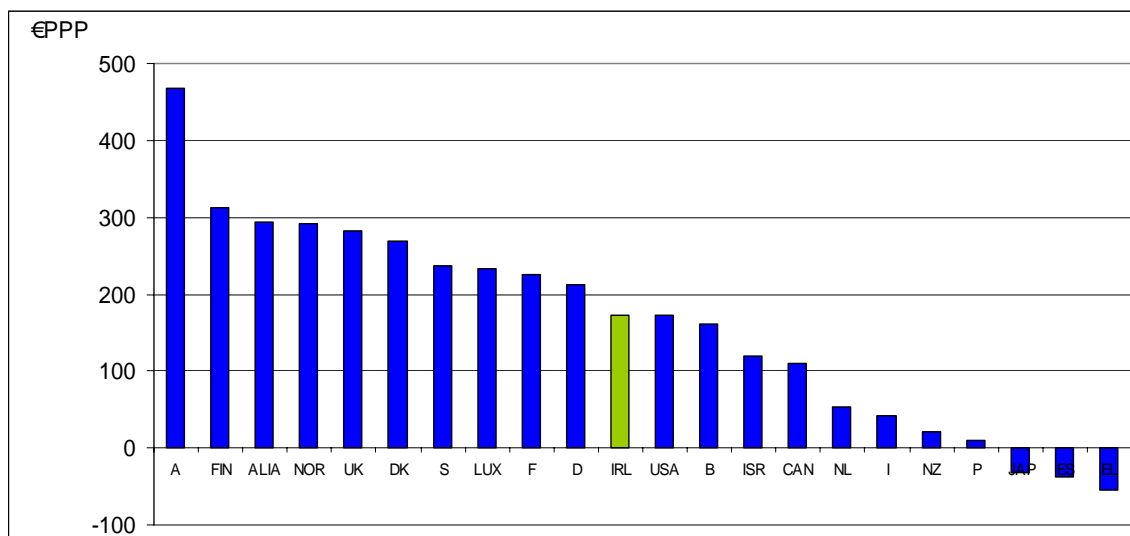


NOTE: RELATIVE INCOME POVERTY (60% MEDIAN HOUSEHOLD INCOME), 2001

SOURCE: EUROSTAT

When responses to child poverty across Europe are examined we find that while Ireland's income support package is relatively good, Ireland has a relatively low level of service provision for families with children, see Figure 4.

Figure 4: Expenditure on Public Services



Source: Derived from Bradshaw and Finch (2002)⁹

While income supports may help to lift families at risk of poverty above the poverty line and provide families with much needed income, access to good quality public services is also required to tackle the multidimensional structural causes of poverty. Hence, the importance of employment, education, health, housing, transport and childcare provision.

How Public Services can contribute to tackling Poverty

The National Economic and Social Council (NESC) has promoted the concept of the Developmental Welfare State¹⁰. In the NESC's view 'a radical development of services is the single most important route to improving social protection' ('services dividend'). In a developmental welfare state services, such as education, health and housing, would be available to all at quality standards and in ways that would be equitable and would be tailored to people's circumstances, including ability to pay ('tailored universalism'). While the state would act as regulator and guarantor of

⁹ Bradshaw J. and Finch, N. (2002) *A Comparison of Child Benefit Packages in 22 Countries – Research Report No. 174*. Her Majesty's Stationery Office: London, cited in Combat Poverty Agency (2005) *Ending Child Poverty*. Dublin: Combat Poverty Agency.

¹⁰ National Economic and Social Council (2005) *The Developmental Welfare State*. Dublin: National Economic and Social Development Office.

quality services provision, a range of organisations would deliver them ('network management').

NESC apply the developmental welfare state model through a 'life cycle approach'. This means that they focus on supporting the needs of an individual at different stages of the life cycle eg. 0-17, 18-29, 30-64 and over 65. They also identify people with disabilities as having particular needs, 'people challenged in their personal autonomy'.

This Developmental Welfare State approach has been adopted by the Government and social partners as the main framework for future social policy. Thus, it has informed recent documents which set out Ireland's social, economic and environmental policy direction and commitments for the next 7 to 10 years ie. the ten-year framework social partnership agreement 2006-2016 *Towards 2016*, and the National Development Plan 2007-2013 *Transforming Ireland: A Better Quality of Life for All*.

The 10 year National Action Plan for Social Inclusion 2007-2016 (NAPinclusion) *Building an Inclusive Society* sets out a ten year strategy to eliminate consistent poverty in Ireland. It also adopts the life cycle approach and places a greater emphasis on services, supported by activation measures and income supports.

Combat Poverty Agency Proposals and Recommendations

Policy Development

The importance of public services in tackling poverty is already integral to many of the main policy documents. These include:

- The National Partnership Agreement *Towards 2016*
- The National Action Plan for Social Inclusion 2007-2016
- The National Development Plan 2007-2013.

These documents set out objectives, commitments and resources to substantially reduce poverty and outline the role of public services in doing this.

However, research has shown that poverty and social exclusion issues may not be fully embedded in the various sectoral policies and work remains to ensure that the impact of poverty and social policy are taken into consideration across policy domains.

Research carried out by the Combat Poverty Agency¹¹ found that while social inclusion is taken into account to some extent in social policy areas, there is limited consideration given to it in economic or non-social areas, such as public transport, information technology or immigration. This study also found that governments did not use legislation to underpin their policies to eradicate poverty and social exclusion to any great extent.

Sixty per cent of all respondents to the study were of the view that senior management in their organisations were 'highly' committed to policies against poverty and social exclusion and this was fairly consistent across all organisation

¹¹ O'Kelly, K.P. (2007) *The Evaluation of Mainstreaming Social Inclusion*. Dublin: Combat Poverty Agency. This report is the culmination of work over the last 4 years where Combat Poverty has been working with partners across Europe to study how social inclusion issues are mainstreamed into public policy. The project was funded by the European Commission through its Transnational Exchange Programme, Community Action Programme to Combat Social Exclusion. Further information is available from Combat Poverty Agency (2006) *Better Policies, Better Outcomes: Promoting Mainstreaming Social Inclusion*. Dublin: Combat Poverty Agency. www.msieurope.eu and www.combatpoverty.ie

types in the survey. For example, in government departments the figure was 59%, for local authorities 57% and for NGOs and other civil society organisations 82% and 83%. It is interesting to note the very low percentage of responses in the 'don't know' and 'not at all' categories, indicating that respondents were very aware of how committed senior management was to tackling poverty issues in each organisational type.

A mechanism for ensuring that poverty and social exclusion is taken into account and becomes embedded in government policies is Poverty Impact Assessment (PIA). PIA is the process by which government departments, local authorities and state agencies assess policies and programmes at design, implementation and review stages in relation to the likely impact that they will have or have had on poverty and on inequalities which are likely to lead to poverty, with a view to poverty reduction.¹² The primary aim of the process is to identify the impact of the policy proposal on those experiencing poverty or at risk of falling into poverty so that this can be given proper consideration in designing or reviewing the policy or programme. It is not intended that all policies be fundamentally transformed so that they are explicitly targeted at the disadvantaged but rather that any possible negative impacts be identified and measures put in place to ameliorate such impacts. Likewise it is important that positive impacts are identified so that they can be enhanced if possible.¹³

- ***Poverty Impact Assessment should be applied across all public service areas***
- ***All public services should include in their design and delivery how their services impact on low income and vulnerable groups***
- ***Senior management in public service organisations should show leadership and commitment in addressing poverty and social exclusion***

¹² Office for Social Inclusion www.socialinclusion.ie

¹³ Office for Social Inclusion (2006) PIA Guidelines Version 2. www.socialinclusion.ie

The Need for a Regulatory Framework

The Government's White Paper *Regulating Better*¹⁴ is an important framework for the formulation of policy and for the consequent legislation and regulations that enforce or underpin policy implementation, including anti-poverty and social inclusion policies.

The White Paper outlines that regulation is an expression of policy and that Regulatory Impact Analysis (RIA) is an evidence-based approach that allows for the systematic consideration of the benefits and costs of a regulatory proposal to the economy and society. Regulation is understood as referring to Acts of the Oireachtas, Statutory Instruments, the Irish Constitution, Treaties, rules and regulations of the EU, rules and regulations of local and regional authorities and self-regulatory bodies with regulatory powers.

Combat Poverty would like to highlight the potential for integrating, as appropriate, the operation of the RIA with Poverty Impact Assessment (PIA).

- ***Consideration should be given to make Poverty Impact Assessments a statutory requirement and mandate Combat Poverty, as an independent statutory body, to have a regulatory role in ensuring compliance*** (similar to the Environmental Protection Agency [Environmental Impact Assessments] and the Equality Commission in NI [Section 75 Legislation]).

Access to Services

NESC's term of 'tailored universalism' implies that a good basic service is available to everyone but that it is tailored to meet the needs of those who may have more difficulty accessing the service. This includes people living in poverty who may have greater difficulty in accessing services because of cost, distance or other factors such as care responsibilities, special needs or language difficulties. Also, some

¹⁴ Government of Ireland (2004) *Regulating Better*. Dublin: Stationery Office.

people may require additional supports, for example, in the education system, to get the same benefit as others from their education.

These points can be illustrated by examples.¹⁵ For example, parents of children with special needs can have their child's needs assessed almost immediately if they pay for it. If they cannot afford it, they may be waiting years for the assessment. In the meantime their child's development suffers. Some parents might want to give their children the additional benefits which come from sending their children to fee-paying schools or to extra tuition classes, to benefit their life opportunities. But they may not be able to afford to in contrast to the many parents who can afford to buy this advantage for their children. They may not be able to afford Health Insurance and their children or grandparents must go on to long waiting lists to see a specialist or have elective surgery.

These examples provide evidence of how the cycle of poverty can be reinforced when access to services, or certain levels of services, is controlled by ability to pay.

- ***Access to public services should be based on need, not ability to pay. Inequities of this nature in current public service provision need to be addressed urgently***

Participation

An important development in the formulation of public policies is the trend towards a more consultative approach to policy-making. Increasing the level of involvement of local communities in the development of national and EU level policies is one of the key social objectives of the European Union.

Involvement can take a number of forms, from the simple provision of information through consultation, participation to joint decision-making/co determination, each

¹⁵ These examples are based on a speech made by Father Peter McVerry at the launch of Combat Poverty's 20th Anniversary Photographic Exhibition, 29th May 2007. Father Peter McVerry has worked in areas of disadvantage for many years.

form building on the previous one. Therefore, there cannot be consultation without information, there cannot be participation without consultation and there cannot be joint decision-making without participation.

Under the Government White Paper *Regulating Better*, guidelines have been published on consultation by public sector bodies.¹⁶ Combat Poverty strongly welcomes and supports this initiative and values the establishment of public service norms and standards in this area.

This trend in governance has also had an impact on how mainstreaming of social inclusion into public policy-making is undertaken. Involvement provides an opportunity to capture the views and priorities of excluded people and ensures that national policies meet their needs and do not just reflect political preferences. On the other hand, mechanisms for engaging directly with individuals experiencing poverty are less common.

There are different approaches to the provision of resources to facilitate involvement in policy making in relation to poverty and social exclusion. There is a perception that the participation of all the key actors is not always realised through the existing structures nor are the resources available to ensure full participation in public policy making. However, the more involvement there is in at the local, regional and national levels in the formulation of social inclusion policy, the greater the aggregation of expertise, leading to a consensus on social policy.¹⁷

Research by the Combat Poverty Agency¹⁸ sought to measure the extent of involvement of all the relevant actors in the mainstreaming of social inclusion. To establish how they are involved, information was sought on three groups (people

¹⁶ Department of the Taoiseach (Undated) *Reaching Out. Guidelines on Consultation for Public Sector Bodies*. Dublin: Stationery Office

¹⁷ Combat Poverty Agency (2006) *Better Policies, Better Outcomes: Promoting Mainstreaming Social Inclusion*. Dublin: Combat Poverty Agency. www.msieurope.eu and www.combatpoverty.ie

¹⁸ O'Kelly, K. P. (2007) *The Evaluation of Mainstreaming Social Inclusion in Europe*. Dublin: Combat Poverty Agency

experiencing poverty; NGOs working against poverty and social exclusion; and other civil society organisations) and three questions were asked:

- a) if they are consulted on the development of policies;
- b) if they influence the policy-making process (which is used as a proxy for *participation*); and
- c) if they are provided with the necessary resources to be involved.

Table 1 sets out the consolidated responses to each of these questions.

Table 1: Levels of Engagement and Participation

ORGANISATION TYPE	CONSULTATION		PARTICIPATION (INFLUENCE)		RESOURCES PROVIDED	
	LOW	HIGH	LOW	HIGH	LOW	HIGH
CENTRAL MINISTRIES/DEPARTMENTS	46.6	28.1	53.5	23.2	49.2	18.7
REGIONAL AUTHORITIES	61.8	19.6	72.6	9.9	63.3	11.2
LOCAL GOVERNMENT/ MUNICIPALITIES	49.7	30.5	62.5	21.9	56.3	19.8
EMPLOYERS' ORGANISATIONS	55.6	24.0	64.1	16.8	62.9	11.1
TRADE UNIONS	55.5	22.2	67.9	16.0	54.3	9.9
Ngos WORKING AGAINST POVERTY AND SOCIAL EXCLUSION	64.2	25.4	75.6	7.0	64.6	6.9
OTHER CIVIL SOCIETY ORGANISATIONS	54.6	28.7	59.4	16.9	61.9	9.5
TOTALS (% of 697 responses)	53.2	26.9	63.2	17.9	56.7	15.3

These data show that overall the process of *consultation*, while still weak with 27% of respondents indicating that it is carried out to a 'high' extent, is the strongest of the three components of involvement. *Participation* (18%) falls some nine percentage points behind 'consultation'. Regarding the *provision of resources* to the various actors, this component of involvement is 11.6 percentage points behind 'consultation'.

Government departments and the local authorities take a more positive view of each aspect of involvement than most of the other organisation types. On the provision of

resources and on 'participation', the NGOs are particularly negative, with only 7% of these respondents indicating that they get resources to a 'high' degree. Even the local authorities, where much of the allocation of resources might be sourced, were not very positive on this point, with just under a fifth of these respondents saying that resources are provided to a 'high' degree.

When analysing the data regarding participation and engagement of *NGOs working in the area of poverty* it is evident from the survey results that the majority of respondents would not agree that this happens to any great extent, with the exception of central government and employer organisations. Similar findings emerge as regard the provision of resources and influencing policies by poverty NGOs. Over half of the respondents would agree it is taking place to a low degree only, with the exception of employer organisations, as far as the provision of resources to poverty NGOs is concerned.

Only one-third of the survey respondents believed *people experiencing poverty* were consulted on policy development to a 'high' extent. This finding was consistent across all sectors participating in the survey, including the central government level. Similar findings were found when analysing questions relating to the provision of resources to people experiencing poverty to enable them to participate in policy-making, with just 16% of respondents from all types of organisations who believe it is happening to a 'high' extent, and again there was agreement across all levels. It was interesting to note that a third of respondents from NGOs working against poverty argued that people directly experiencing poverty were not provided 'at all' with resources to facilitate their participation. Compared with other European countries in the study, respondents in Ireland were more negative as far as influencing public policy-making by people experiencing poverty was concerned - the majority (80%) were of the view that such influence was 'low'.

As the *mobilisation of all the actors* is a key objective of the EU social inclusion process and a main part of the mainstreaming of social inclusion, the study showed that there is still considerable work to be done to realise this objective. Overall, the level of participation is low, with the NGOs working against poverty being the most

involved in participation arrangements and people experiencing poverty the least involved.

- ***Fully implement the 'Reaching Out' Consultation Guidelines***
- ***Promote a public education and awareness campaign on the benefits of consultation and a participation approach***
- ***Provide training for public servants on undertaking consultation***
- ***Provide resources to people experiencing poverty and organisations that work with/represent them to participate in policy making and implementation that affects them.***

Quality of Services

There is a need to encompass a 'rights and standards' approach in ensuring the quality of services. This involves the setting of agreed standards of public service provision. People should be informed of their rights and responsibilities to these services. A monitoring system should ensure adequate appeal and redress procedures where these standards are not met. Progress in relation to setting standards for disability services should be used as a model for standard setting in relation to poverty and social exclusion.

To ensure quality in public services, it is crucial to:

- ***Develop specific, detailed standards;***
- ***Establish how these standards are to be monitored;***
- ***Clarify obligations of the state in relation to each of these standards;***
- ***Establish accessible, transparent and effective mechanisms of accountability in relation to each of the standards; and***
- ***Establish that all members of society are fully aware of the rights and standards to which they are entitled.***¹⁹

¹⁹ Derived from National Economic and Social Council (1999) *An Investment in Quality: Services, Inclusion and Enterprise* Dublin: National Economic and Social Council

Implementation

A key challenge for Ireland is the delivery of our services. It is about how we structure our service delivery, how we manage and resource it, and how we deliver it to the individual. It requires our services to be responsive and flexible. It often requires a case management approach. An approach worthy of further consideration is 'network management', which is about working through networks of the relevant interests and collaborative decision-making and responsibility. Increasingly service deliverers are inter-dependent on each other to deliver a complete service tailored to the individual – to do this we must work together and involve users and/or recipients of the service. Delivery of responsive public services requires better co-ordination and communications to achieve better outcomes. This requires leadership. It also requires training of staff at all levels.

Research by the Combat Poverty Agency²⁰ assessed the extent to which social inclusion policies are co-ordinated across the different levels of public administration and also what structures are in place to ensure that actions and programmes on social inclusion are implemented.

The overall view was that the level of co-ordination by government departments tends to be 'low', with over 60% of respondents of this view. Over two-thirds of respondents from local authorities and from both poverty NGOs and other civil society organisations considered the level of co-ordination as 'low'. In fact, a sixth of respondents from poverty NGOs were of the view that there was no co-ordination at the government department level 'at all'.

With regard to training for poverty and social exclusion awareness, two-thirds of respondents said that there were such training modules at the central government level, while over half of all respondents said this type of training was delivered at the regional and local authority levels.

²⁰ O'Kelly, K. P. (2007) *The Evaluation of Mainstreaming Social Inclusion in Europe*. Dublin: Combat Poverty Agency

The study identified a disconnection between, and a limited understanding of, what is happening at the different levels of administration in relation to social inclusion, ie. the delivery of services is not adequately 'joined up'. For example, 78% of respondents from the central level said that poverty and social exclusion awareness training is delivered at that level but only 46% were of the view that it is part of training programmes at the local level. In comparison, 79% of local government respondents said that such training takes place at their level of government, but fewer of them, at 64%, agreed that there was poverty awareness training at the national level.

Work by Combat Poverty on the linkages between national and local structures²¹ found there is a need for better alignment between national and local priorities to ensure a more effective impact on tackling poverty. The majority of services are delivered at the local level, so there is a need to ensure local input into national policies.

- ***Given that many policy commitments to address poverty and social exclusion through public services are in place there is a real need to focus on their implementation***
- ***This will involve a number of things:***
 - ***Clear objectives***
 - ***Responsiveness and flexibility***
 - ***Good linkages – horizontal, vertical and diagonal***
 - ***Network management***
 - ***Case management approach***
 - ***Training***
 - ***Good communication***
 - ***Leadership***

²¹ O Riordain, S. (2007) *Poverty and Social Inclusion: Linking Local and National Structures*. Dublin: Combat Poverty Agency and Combat Poverty Agency (2007) *Linking Local and National Structures: Tackling Poverty and Promoting Social Inclusion, Policy Statement*. Dublin: Combat Poverty Agency

Outcome Measurement, Monitoring and Review

Performance management is an essential component of better service delivery – performance at the level of the individual in an organisation and at organisational level. The provision of services and meeting the needs of those experiencing poverty and social exclusion should be included in the performance management plans of civil and public servants delivering services. There should also be assessment against this performance criteria at organisational level.

In terms of working towards the elimination of poverty there is a need to target resources at those who need them most, monitor the extent to which they are making a difference and evaluate the outcomes. Even though there are social inclusion policy commitments, with the resources to implement them, the monitoring and evaluation structures could be strengthened. This should include the identification of relevant indicators and the subsequent collection of the relevant data, which would be collected, analysed and published on an ongoing basis to ensure that the commitments made are being delivered and that we are making real progress in working towards the elimination of poverty. There is a need to know that the substantial resources allocated for social inclusion are being targeted at those who need them most. We should know what difference they have made, what works and what does not work and review the policies and service delivery mechanisms accordingly.

Combat Poverty has researched the extent to which social inclusion policy is evaluated²² and found that while there is some evaluation taking place, it is not extensive or, indeed, embraced by officials. Very little regular evaluation of policies is carried out, with less than 30% of respondents at departmental level, 14% at the regional and 15% at the local authority level saying that evaluation is undertaken to a 'high' extent. Another important result was the high number of 'don't knows' at the

²² O'Kelly, K. P. (2007) *The Evaluation of Mainstreaming Social Inclusion in Europe*. Dublin: Combat Poverty Agency

department (19%) and local levels (37%), indicating that many respondents are not aware of any regular evaluation programmes of social inclusion policies.

- ***Outcome measurement, monitoring and review are critical elements in ensuring provision of quality public services are delivered to all, especially ensuring the needs of low income people and vulnerable groups are met.***
- ***This should encompass:***
 - ***Integration of these objectives into organisational performance management systems***
 - ***Integration of these objectives into individuals' performance management and development systems***
 - ***The establishment of agreed indicators to monitor progress***
 - ***The collection and analysis of relevant data***
 - ***Evaluation and review on how the objectives are being met and what works and why.***

Conclusions

This section of the submission has set out the important role of public services in working towards the elimination of poverty in Ireland. It has set out a number of recommendations as follows:

1. Poverty Impact Assessment should be applied across all public service areas.
2. All public services should include in their design and delivery how their services impact on low income and vulnerable groups.
3. Senior management in public service organisations should show leadership and commitment in addressing poverty and social exclusion.
4. Consideration should be given to make Poverty Impact Assessments a statutory requirement and mandate Combat Poverty, as an independent statutory body, to have a regulatory role in ensuring compliance.
5. Access to public services should be based on need, not ability to pay. Inequities of this nature in current public service provision need to be addressed urgently.
6. Fully implement the 'Reaching Out' Consultation Guidelines.

7. Promote a public education and awareness campaign of the benefits of consultation and a participation approach.
8. Provide training for public servants on undertaking consultation.
9. Provide resources to people experiencing poverty and organisations that work with/represent them to participate in policy making and implementation that affects them.
10. To ensure quality in public services, it is crucial to:
 - a. Develop specific, detailed standards;
 - b. Establish how these standards are to be monitored;
 - c. Clarify obligations of the state in relation to each of these standards;
 - d. Establish accessible, transparent and effective mechanisms of accountability in relation to each of the standards; and
 - e. Establish that all members of society are fully aware of the rights and standards to which they are entitled²³.
11. Given that many policy commitments to address poverty and social exclusion through public services are in place there is a real need to focus on their implementation. This will involve a number of things:
 - a. Clear objectives;
 - b. Responsiveness and flexibility;
 - c. Good linkages – horizontal, vertical and diagonal;
 - d. Network management
 - e. Case management approach;
 - f. Training;
 - g. Good communication; and
 - h. Leadership.

²³ Derived from National Economic and Social Council (1999). *An Investment in Quality: Services, Inclusion and Enterprise* Dublin: National Economic and Social Council

12. Outcome measurement, monitoring and review are critical elements in ensuring provision of quality public services are delivered to all, especially ensuring the needs of low income people and vulnerable groups are met. This should encompass:

- a. Integration of these objectives into organisational performance management systems;
- b. Integration of these objectives into individuals' performance management and development systems;
- c. The establishment of agreed indicators to monitor progress;
- d. The collection and analysis of relevant data; and
- e. Evaluation and review on how the objectives are being met and what works and why.

CIVIL SERVICE

Context

Introduction

A very favourable and robust policy framework is in place to support the advancement of poverty, social inclusion and community development. This includes the:

- National Action Plan on Social Inclusion 2007-2016 (NAPinclusion);
- *Towards 2016*, Ten Year Framework Social Partnership 2006-2016 (T16);
- *Transforming Ireland*, National Development Plan 2007-2013 (NDP); and
- *Supporting Voluntary Activity*, White Paper (Government of Ireland, 2000).

These, and other policy commitments relating to, for example health, education, housing, income support, women, new communities, older people, children, lone parents, people with disabilities, drug use, regeneration of disadvantaged areas and so on, contain targets and initiatives that seek to advance, in a complementary way, economic prosperity and social justice in Ireland.

The contribution and role of the Civil Service is crucial in the delivery of these policy commitments. As observed by the Office of the Ombudsman and Information Commissioner the role of the civil service is not *per se* set out in Irish legislation. The Ombudsman goes on to highlight 'the rather fundamental fact that senior civil servants...yield enormous power, have enormous influence within their Departments and the perhaps mutually advantageous fiction that Ministers do everything and civil servants do – well the public frequently aren't too sure about quite what civil servants do – is one that in this 21st century should be deconstructed'.²⁴

²⁴ Office of the Ombudsman and Information Commissioner (2005) 'Public Trust in the Civil Service – Room for Improvement'. Address by Ms. Emily O'Reilly at Annual Conference of Assistant Secretaries.

The 1956 Civil Service Regulation Act defines a civil servant as a person holding a position in the civil service while the term civil service means the civil service of the government or the civil service of the State. The latter includes the staff of the Courts, Houses of the Oireachtas and other similar agencies.²⁵ The principal task of the civil service is to advise and support the government of the day to deliver its programmes. Government departments themselves acknowledge that the role of the Civil Service and all civil servants is to serve the public.²⁶

Professional competencies, such as awareness and understanding of poverty and social inclusion and the capacity to effectively engage with groups and communities experiencing poverty, are both enabling factors and key tools for the effective formation, design, implementation and evaluation of policies to tackle poverty. Without the appropriate investment in human capital to support the roll out of social inclusion policies, it is likely that the success of the policy, against its stated objectives, may be impeded.

The Irish national policy objective to reduce the number of those experiencing consistent poverty to between 2% and 4% by 2012, with the aim of eliminating consistent poverty by 2016 is laudatory.²⁷ The National Action Plan on Social Inclusion 2007-2016 (NAPinclusion) is one of a trinity of key policy frameworks that move the country towards a poverty-free Ireland. The sister frameworks are the national social partnership agreement *Towards 2016* and the National Development Plan, *Transforming Ireland*. In an introductory comment to the NAPinclusion 2007-2016, signed by the two party leaders of the coalition government and the serving Minister for Social and Family Affairs (in early 2007), there is the recognition:

that the challenge is now delivery. This becomes more complex as we seek to tailor supports around the needs of individuals at different stages of their lives. We will continue to modernise and reform how we design and deliver

²⁵ op. cit

²⁶ Department of Social and Family Affairs (2003) *Partnership, Development and Performance. Human Resources Strategy*. Dublin: Department of Social and Family Affairs

²⁷ Government of Ireland (2007) *National Action Plan on Social Inclusion 2007-2016*. Dublin: Stationery Office

*services, income support and activation measures at both national and local level. We have identified actions to strengthen our institutional structures to address any implementation gap and we will ensure that our response to tackling poverty and social exclusion remains both flexible and concentrated. **The OECD's current work to identify and inform good management practice in our public service will also help to shape future approaches and policies**²⁸(Combat Poverty emphasis).*

Combat Poverty welcomes the recognised link, in the statement above, between management practice and the roll out of national policy. Below, Combat Poverty draws attention to a number of areas that it believes can strengthen and support the realisation of national policy commitments towards poverty reduction.

Building professional competencies to support anti-poverty, social inclusion, community development and human rights

In this section, Combat Poverty's main focus is on strengthening the generic and technical competencies of civil servants with regard to poverty, social inclusion, community development and human rights.

The current National Action Plan on Social Inclusion has a number of forerunners since the original National Anti-Poverty Strategy in 1997 and the establishment of the first State support for a National Community Development Programme in 1990. In 2007, Combat Poverty commissioned some research to establish the nature and extent of civil service in-service training and education opportunities on poverty, social inclusion and community development.²⁹ Key findings from the research, across seven government departments, are:

²⁸ *ibid.*:4

²⁹ Bethel Consulting, 2007.

- There is some, though not a lot, of formal training, development and education on the topics of poverty, social inclusion and community development;
- Some training on these issues has been provided in the Departments of Social and Family Affairs; Environment, Heritage and Local Government; Education and Science; and Health and Children;
- On-the-job experience, attendance at conferences, working with experienced colleagues and team meetings are common 'in-service' ways of staff building their awareness and skills in regard to poverty, social inclusion and community development;
- Some staff are sponsored to avail of formal education and training programmes offered by external providers;
- Training and development tends to be unsystematic and demand driven rather than proactively planned;
- In theory, training needs are identified via the Performance Management and Development System (PMDS), though the use of this by line management to identify training needs is mixed; and
- The PMDS does not include poverty, social inclusion or community development as generic or core competencies.

A number of government departments expressed an openness for more training activity on poverty, social inclusion and community development.

The Ombudsman raises a question regarding the role of the Civil Service to serve civil society. While it is acknowledged that this role may be carried out in a 'behind the scenes capacity' she suggests that 'within the legal constraints that exist would it not be refreshing to hear civil society interests defended and promoted by civil servants? ... not in a manner which would contradict the political debate surrounding the implementation of a Government Programme but rather in a manner which would set out the public interest rather than that of any particular group of society'. (op. cit).

The community and voluntary sector strand of civil society plays a key role in Ireland in advocating on poverty, social exclusion, community development and human

rights. It is also a key arena for policy implementation on actions to address poverty and social exclusion. Within the Irish policy context of social partnership, the community and voluntary sector is a recognised partner at national, regional and local levels.

The Ombudsman also raises questions on the extent to which the Civil Service is 'sufficiently sensitive to the concepts of human rights and their relevance to their day to day work – particularly in relation to protecting the vulnerable and marginalised in society'. As she points out:³⁰

the High Court Judgement of Mr Justice Barr (October 2000), was critical of the officials in the Department of Finance for being insufficiently informed about the constitutional obligations of the State to the weak and deprived in society. And as we move towards greater harmonisation of social security and healthcare at EU level is there sufficient awareness of our obligations under the European Convention on Human Rights Act, 2003?

Others have urged greater awareness of other international human rights obligations amongst the civil service. For example, in 2002, the concluding observations on Ireland from the UN Committee on Economic, Social and Cultural Rights directly requested in one of the concluding observations to "disseminate its concluding observations widely among all levels of society, and, in particular, among state officials and the judiciary...".³¹

³⁰ op. cit

³¹ Committee on Economic, Social and Cultural Rights (2002) *Concluding observation of the Committee on Economic, Social and Cultural Rights: Ireland*. Geneva: United Nations

Combat Poverty Agency Proposals and Recommendations

Policy Development

The Government's White Paper *Regulating Better*³² is an important framework for the formulation of policy and for the consequent legislation and regulations that enforce or underpin policy implementation, including anti-poverty and social inclusion policies.

In developing policy civil servants are guided by Regulatory Impact Analysis (RIA).³³ RIA, led by the Department of the Taoiseach, is an essential tool for enhanced policy development as it aims to assess the likely effects of a proposed new regulation or regulatory change.

Poverty Impact Assessment (PIA) is the process by which government departments, local authorities and state agencies assess policies and programmes at design, implementation and review stages in relation to the likely impact that they will have or have had on poverty and on inequalities which are likely to lead to poverty, with a view to poverty reduction.³⁴ The primary aim of the process is to identify the impact of the policy proposal on those experiencing poverty or at risk of falling into poverty so that this can be given proper consideration in designing or reviewing the policy or programme. It is not intended that all policies be fundamentally transformed so that they are explicitly targeted at the disadvantaged but rather that any possible negative impacts be identified and measures put in place to ameliorate such impacts. Likewise it is important that positive impacts are identified so that they can be enhanced if possible.³⁵

³² Government of Ireland (2004) *Regulating Better*. Dublin: Stationery Office.

³³ Department of the Taoiseach 'RIA Guidelines, How to conduct a Regulatory Impact Analysis', (2005) (www.betterregulation.ie)

³⁴ Office for Social Inclusion www.socialinclusion.ie

³⁵ Office for Social Inclusion. 2006. PIA Guidelines Version 2. www.socialinclusion.ie

Combat Poverty supports PIA as a policy development process which aims to ensure that people experiencing poverty and social exclusion are considered in the design and implementation of policies that may impact on them. It is essential that the civil service recognise and support PIA as a tool for more effective policy development.

- ***Civil servants should undertake Poverty Impact Assessment in the development of all policies***

The Need for a Regulatory Framework

The White Paper *Regulating Better* outlines that regulation is an expression of policy and that Regulatory Impact Analysis (RIA) is an evidence-based approach that allows for the systematic consideration of the benefits and costs of a regulatory proposal to the economy and society. Regulation is understood as referring to Acts of the Oireachtas, Statutory Instruments, the Irish Constitution, Treaties, rules and regulations of the EU, rules and regulations of local and regional authorities and self-regulatory bodies with regulatory powers.

Combat Poverty would like to highlight the potential for integrating, as appropriate, the operation of the RIA with Poverty Impact Assessment (PIA).

- ***Consideration should be given to make Poverty Impact Assessments a statutory requirement and mandate Combat Poverty, as an independent statutory body, to have a regulatory role in ensuring compliance*** (similar to the Environmental Protection Agency [Environmental Impact Assessments] and the Equality Commission in NI [Section 75 Legislation]).

Participation

An important development in the formulation of public policies is the trend towards a more consultative approach to policy-making. Increasing the level of involvement of local communities in the development of national and EU level policies is one of the key social objectives of the European Union.

Involvement can take a number of forms, from the simple provision of information through consultation, participation to joint decision-making/co determination, each form building on the previous one. Therefore, there cannot be consultation without information, there cannot be participation without consultation and there cannot be joint decision-making without participation.

Under the Government White Paper *Regulating Better*, guidelines have been published on consultation by public sector bodies.³⁶ Combat Poverty strongly welcomes and supports this initiative and values that establishment of public service norms and standards in this area.

Combat Poverty is keen that the foundation of the guidelines can be built on for the public service, including the civil service, to reach out to people experiencing poverty. Poverty can make it difficult for people to act and work for change in their lives or in the lives of their communities. People in poverty may lack the financial resources to do this. They may have insufficient access to the skills and capacities common to policy planning and public decision-making processes. They may have insufficient knowledge of, and unequal access to, the networks and systems that inform and influence public decision-making. They may have insufficient and unequal access to the decision-making process itself at administrative, executive and parliamentary levels and at local and national levels and beyond.

³⁶ Department of the Taoiseach (Undated) *Reaching Out. Guidelines on Consultation for Public Sector Bodies*. Dublin: Stationery Office

- ***Fully implement the 'Reaching Out' Consultation Guidelines***
- ***Establish an awareness and training initiative across the public-service for relevant staff to reach out to people in poverty.***

Quality of services

Combat Poverty believes that quality public services are a social right. Social rights, like other human rights, are universal in nature and application. A key concept of international human rights is the principle that the State is the guarantor of these rights. The State has the duty to respect, protect and fulfil economic, social and cultural rights such as the right to education, the right to an adequate standard of living, the right to housing, the right to employment/work and so on.

Ireland is signatory to a range of international legally binding and non-binding instruments that incorporate economic, social and cultural rights. If economic and social rights are to be delivered in practice, then it is necessary to formalise and understand their interconnectedness. The National Economic and Social Council³⁷ endorses the link between rights and standards and recommends that, in the delivery of services in a rights and standards paradigm, it is crucial to:

- Develop specific, detailed norms in relation to these rights;
- Establish how these norms or standards are to be monitored;
- Clarify obligations of the state in relation to each of these norms;
- Establish accessible, transparent and effective mechanisms of accountability in relation to each of the norms and standards; and
- Establish that all members of society are fully aware of the rights and standards to which they are entitled.

³⁷ National Economic and Social Council (1999) *An Investment in Quality: Services, Inclusion and Enterprise* Dublin: National Economic and Social Council.

- ***There should be a move towards a more formal expression of entitlements, in accordance with obligations under the International Covenant of Economic, Social and Cultural Rights and other relevant international treaties, across a range of public services, and the setting of standards and guidelines regarding the standard of service delivery***
- ***All public services should adopt, and promote to the public, formal mechanisms of complaints and appeals and entitlements to forms of redress in the case of entitlements that are violated or not met***
- ***Indicators should be developed to monitor access to services and to improve performance over time. These should be regularly published.***

Implementation

As stated earlier *'the challenge is now delivery'*.³⁸ To ensure poverty and social exclusion are taken into account in the implementation of policy there is a need to build it into civil service competencies and training. Therefore, there should be a concerted effort to recognise, within the Civil Service's Performance Management and Development processes, the generic and technical competencies required of the civil service in regard to poverty, social inclusion, community development and human rights. This would support the implementation of the Reaching Out guidelines by strengthening the professional competencies of civil and public servants to consult with people experiencing poverty and organisations that work with and/or represent them. As a statutory body with a public awareness function, and experience in supporting public sector training on poverty and social exclusion, Combat Poverty would be pleased to advise on/support this initiative.

- ***Consideration should be given to building and strengthening the professional generic, specialist and technical competencies of relevant Civil Service staff, through the Performance Management and Development system, with regard to poverty, social inclusion, community development and rights.***

³⁸ Government of Ireland (2007) *National Action Plan on Social Inclusion 2007-2016*. Dublin: Stationery Office.

- ***Combat Poverty would be in a position to advise on/support this initiative.***

LOCAL GOVERNMENT

Context

Local government has a central role in delivering services to the public. Traditionally local authorities have operated within a very centralised system. Some of the limitations of local government, notwithstanding advances in broadening its remit, are related to its mandate on delivering essential, mainly physical services, such as housing, water supply and sewerage, recreation and amenity.³⁹

In recent years Irish local government has been undergoing considerable change. *Better Local Government: A Programme for Change* launched the reform process in 1996. Part of its objectives was to establish new forms of governance and participative decision-making processes, embracing the concept of social partnership as playing a key role in policy development and service delivery. Local government and participative democracy has been brought closer together, local government's role in the community has been widened and there is now an increased focus on tackling social exclusion.

This reform programme has involved developing new structures, functions and procedures. These new structures have included the establishment of City/County Development Boards (CDBs), Strategic Policy Committees (SPCs), Community Fora, Social Inclusion Measure (SIM) Groups and Social Inclusion Units in some local authorities. The Local Government Act 2001 further consolidated the role of local authorities with regard to social inclusion.

The reform programme also introduced changes in management systems in areas such as financial management, human resource management, service quality, performance management and corporate planning. While these developments are

³⁹ Boyle, R., Humphreys, P.C., O'Donnell, O., O'Riordan, J. and V. Timonen (2003) *Changing Local Government: A Review of the Local Government Modernisation Programme*. Dublin: Institute of Public Administration.

still at early stages of implementation, remaining challenges include organisational and cultural change, developing management capacity, improving approaches to staff recruitment and development, and developing internal processes such as cross-sectional working arrangements.

National social inclusion policy provides the context for local government social inclusion policy. Ireland's original National Anti Poverty Strategy (NAPS) in 1997 envisaged that 'social inclusiveness and equality of opportunity will be fostered through a renewed system of local government'.⁴⁰ It also anticipated the development of local anti-poverty strategies to complement the national strategy. The impetus for this enhanced focus on social inclusion has been strengthened since that time through the ongoing process of local government reform.

The revised NAPS, *Building an Inclusive Society*, launched in 2002, stated that local authorities must take account of the principles, targets and objectives set out in the NAPS when setting strategic development objectives. The most recent National Action Plan for Social Inclusion 2007-2016 has identified a central role for local authorities in delivering on social inclusion strategies, 'working with other stakeholders through the CDB and RAPID structures, [to] underpin and strengthen the national actions being taken'.

Since 1999, the Combat Poverty Agency has worked, through its local government programme, to build the capacity of local authorities to play a more strategic role in the prevention of poverty and social exclusion, as part of the implementation of NAPS. This has involved the establishment of a Local Government Anti-Poverty Learning Network with the primary aim of 'the development of a strong anti-poverty focus within a reformed system of local government'.

In particular, Combat Poverty has worked to:

⁴⁰ Government of Ireland (1997) *Sharing in Progress: National Anti-Poverty Strategy*. Dublin: Stationery Office

- Support the development of Local Anti-Poverty Social Inclusion Plans;
- Support Poverty Impact Assessment at local level;
- Support the participation of local communities, especially people experiencing poverty;
- Support poverty awareness and training among local government elected members and officials; and
- Exchange of good practice.

One of the key challenges facing local government in rolling out national social inclusion commitments has been the lack of linkages between the national and local levels. A Combat Poverty study⁴¹ found that there is a need for stronger national to local linkages in tackling poverty and social exclusion and suggested that an integrated approach to policy development and implementation is required. The study proposes greater co-operation between central and local government and between agencies at local level.

The findings are supported by European research, led by Combat Poverty.⁴² The findings of the Irish part of the *Evaluating MSI* study found that in a number of local authorities the level of administrative leadership on social inclusion is low due to “the poor integration of national and local policies and that a narrow range of functions of local authorities militates against cohesion” (a Co. Council official). There is a view that “no real co-ordination exists at all levels of governance and that the centralised system slows down implementation” (a City Council official). What is required is “effective support at national ministerial level for the proper co-ordination of local actions and the work of city/county development boards in formatting inter-agency working”.

⁴¹ Environmental Resource Management Ltd (2006) *Study to identify potential linkages between the national and local level in the context of the development and implementation of the National Anti-Poverty Strategy*. Dublin: Combat Poverty Agency.

⁴² Liteska, I. & O'Kelly, K. (2007) *Evaluating MSI – Irish National Report*. Dublin: Combat Poverty Agency. (www.msieurope.eu)

Less than a quarter (22%) of survey respondents were of the view that the implementation of policies to eradicate poverty and social exclusion are co-ordinated across the local authority level to a 'high' degree.

Efforts have been made to address this in the most recent National Action Plan on Social Inclusion 2007-2016. The Local Government Social Inclusion Steering Group (LGSISG), involving the Department of Environment, Heritage and Local Government (Chair), Office for Social Inclusion in the Department of Social and Family Affairs, the Combat Poverty Agency, the Institute of Public Administration and the Local Government Management Services Board 'will be further developed to support the linkages between the national and local level and will report to the Cabinet Committee, as appropriate'. Officials from the Department of Community, Rural and Gaeltacht Affairs as well as officials from local government have now been co-opted on to the Committee. Further Social Inclusion Units are also being established at local level.

Thus, while service delivery will remain a key function of local government, the role of the local authority has moved beyond that of service provider. Local authorities, with their democratic mandate, are well placed to develop their role in combating poverty and social exclusion. This role for local authorities with regard to social inclusion is now widely accepted and understood. The need to develop local solutions to local problems and local government's leadership role in this regard presents a unique opportunity for combating poverty and social exclusion. To effectively deliver these services, based on need and incorporating a social inclusion focus, requires changes in practice such as working in partnership with other departments and external interests, and including civil society and those experiencing poverty and social exclusion.

Combat Poverty Agency Proposals and Recommendations

Policy development

Combat Poverty supports the implementation of national anti-poverty policies at local level and supports local authorities to develop and build their capacity in the prevention of poverty and social exclusion. A key element of this work is support for the development of Local Anti-Poverty Social Inclusion Strategies. These strategies, involving consultation with key stakeholders, set out the priorities for the local authority in tackling poverty and social exclusion.

In order to support these strategies Combat Poverty is currently undertaking a pilot study, which involves the customisation and adaptation of the Poverty Impact Assessment (PIA) Guidelines developed at national level, for their application at local level. The purpose of local poverty impact assessment is to provide local authorities and other local service providers within the County/City Development Board structure with a set of practical guidelines to support them to assess the poverty impact of their plans, strategies and work.

- ***There is a need to support Poverty Impact Assessment at local level, using the national guidelines, tailored for local use***
- ***Training of local authority staff and officials will be required. Combat Poverty can support this training***
- ***Ongoing collaboration and involvement is required between the national and local policy frameworks on social inclusion policies and practices***

Access to Services

For many citizens their main interaction with the state is with the local authority, as they access services at the local level. There are three pertinent issues:

- a) local authority services need to be accessible to all users of services on an equal basis. This requires good policies and good interaction with the public, especially by front line staff;
- b) particular attention needs to be paid to low income users and other vulnerable groups. This requires consultation with people experiencing

poverty and social exclusion and their communities to ensure services are tailored to their needs; and

- c) co-operation and collaboration with other service providers at a local level is required to ensure that service provision is 'joined up' and tailored to users' needs.

- ***Ensure local authority services are available and accessible to all, based on levels of need***
- ***Consult with local communities to ensure services are tailored to the needs of the local community***
- ***Ensure staff have received appropriate training to address the needs of all users of their services, especially low income users and vulnerable groups***
- ***Collaboration is required with other local providers to ensure service provision at the local level is 'joined up' and tailored to users' needs***

Participation

Local authorities have a key role in building active citizenship and participation. Community development practice⁴³ is essential in this regard. Poverty and social exclusion cannot be tackled without building the capacity of those experiencing poverty and social exclusion and encouraging and supporting their involvement through community development activity. Local development and community development organisations may have community development expertise, but there is a need to build an understanding of community development practice in local authorities.

² Combat Poverty, as part of its statutory remit, promotes community development as a means of overcoming poverty and defines community development as: 'A process whereby those who are marginalised and excluded are enabled to gain in self-confidence, to join with others and to participate in actions to change their situation and to tackle the problems that face their community'.

Community fora are a local level mechanism to include the participation and voice of the community and voluntary sector. To ensure that anti-poverty and social inclusion issues are heard within these fora there is a need to support the capacity of these groups at a local level.

- ***Continue to support community development and social inclusion training for local authority staff and public servants at local level***
- ***Promote a public education and awareness campaign of the benefits of consultation and a participative approach***
- ***Provide resources to people experiencing poverty and organisations that work with/represent them to participate in community fora and similar structures***

Quality of Services

As at national level, there is a need to encompass a 'rights and standards' approach to ensure the quality of services at local level. This involves setting agreed standards, providing information to people about their rights and responsibilities to these services, and ensuring an adequate appeal and redress system is in place should these standards not be met.

Recent initiatives on developing awards around best practice encourage improved standards regarding service delivery.

- ***To ensure quality services at local level:***
 - ***Set agreed standards;***
 - ***Provide information on rights and entitlements;***
 - ***Ensure transparent accountability in meeting these standards; and***
 - ***Ensure adequate appeal and redress systems are in place.***

Implementation

Lack of linkages between the local and national level has been identified as an obstacle in progressing the implementation of national social inclusion policies, including the National Action Plan for Social Inclusion, at local level. Direct links and communication systems from the local to the national level, and from the national to the local level, as well as across Government Departments at national level and their agencies at local level, need to be developed as a matter of urgency.

The development of local anti-poverty social inclusion strategies, with local authorities as the co-ordinators and/or lead agencies, will require local authorities to have a greater degree of flexibility and autonomy.

The delivery of integrated services at the local level is important. National public service policies, including a social inclusion dimension, should be designed and delivered in a way that facilitates the leadership role of local authorities in delivering such integrated services.

In carrying out their functions, local authorities need to balance their objectives of maintaining essential services while at the same time co-ordinating activities with other bodies promoting sustainable development and social inclusion.

- ***Horizontal, vertical and diagonal linkages and communications systems, between and within national and local government, need to be put in place to ensure coherence in the delivery of public services at the local level. Social inclusion service provision should be embedded in this overall model***
- ***Local authorities requires a greater degree of flexibility and autonomy in the delivery of public services***
- ***Local authorities should have a key role in delivering integrated services at the local level***

Outcome Measurement, Monitoring and Review

For successful monitoring and evaluation clear targets and indicators must be embedded into strategy development and service delivery. Service indicators and performance management systems have been developed and introduced into the local government system in recent years. Further work is needed in developing performance management systems to reflect social inclusion work, and indicators to capture *how* services are delivered and the quality of services delivered from an identified needs basis. There is a need for ongoing monitoring and evaluation to assess change over time.

- ***The impact of public service delivery on people living in poverty and/or excluded should be built into service indicators and evaluation systems***
- ***Data systems need to be built to support the collection and analysis of relevant information***
- ***Social inclusion objectives should be built into performance management and development systems***
- ***Monitoring and evaluation systems should assess change over time.***

HEALTH

Context

Health and poverty are interrelated. People who are poor experience poorer health and die younger than wealthier people.⁴⁴ A range of factors including poverty determines the health of an individual. People who do not have adequate income, education or decent housing, and limited access to quality health services will have worse health than wealthier people.⁴⁵ Experiencing poorer health means having a greater need for health services, particularly primary care as these services are the first point of contact.

Public policy has a key role to play in creating the conditions for people to lead healthier lives. Achieving better health requires services that are people-centred, accessible on the basis of need rather than ability to pay, and delivered in an integrated manner. This implies increased co-operation between health services, central and local government and the participation of communities in policy, service design, implementation and review. It also requires a focus on the social determinants of health and policy measures to prevent poor health such as income adequacy, education and good quality public services.

Combat Poverty Agency research on evaluating the mainstreaming of social inclusion⁴⁶ found that just 28% of the respondents were of the view that health policies incorporated poverty and social exclusion concerns and 22% said that poverty issues were incorporated into legislation on health issues.

Ireland has increased threefold its spending on health in the last decade. When compared to other OECD countries in 2004 (the latest year where comparative data is available) Ireland spent a lower proportion of its Gross National Income (GNI) on healthcare: 8.4% compared to an EU-15 average of 9.1%. It lags behind higher

⁴⁴ Balanda, K. and Wilde, J.(2001) *Inequalities in Mortality 1989-1998: a report on All-Ireland Mortality Data* Dublin/Belfast: The Institute of Public Health.

⁴⁵ Barrington, R, (2004) *Poverty is Bad for Your Health* Dublin: Combat Poverty Agency.

⁴⁶ Litewska, I. and O'Kelly, K.P. (2007) *Evaluating MSI – Irish National Report* Dublin: Combat Poverty Agency (www.combatpoverty.ie and www.msieurope.eu)

spending countries such as Germany (10.6%) and France (10.4%).⁴⁷ The health budget has increased since 2004, with most of the increased health budget being spent on salaries and new service developments such as services for older people, people with disabilities and children at risk.

The health services are currently undergoing a reform process. Some of the key policy documents underpinning this are:

- The health strategy *Quality and Fairness: A Health System for You* (2001);
- The primary care strategy *Primary Care: A New Direction* (2001);
- The national partnership agreement *Towards 2016* (2007);
- The National Development Plan 2007-2013; and
- The National Action Plan for Social Inclusion 2007-2016.

The World Health Organisation (WHO) emphasises the centrality of primary care within the whole health system, as primary care is usually the first point of contact with the health services for most people. It should be the central component of the whole health system.⁴⁸ Improving access to primary care services in Ireland and reforming primary care provision are central to more effective health service provision, especially for those in greatest need. Much of the demand on hospital services could be reduced if there was an adequately resourced primary care service in Ireland.

The Primary Care Strategy *Primary Care: A New Direction* (2001) acknowledges that Ireland's primary care infrastructure is poorly developed and services are fragmented, with a focus on treatment rather than on prevention, health promotion and well-being. The Primary Care Strategy sets out a plan for primary care as the central focus for the delivery of health and personal social services. Progress on the strategy was initially slow but primary care has re-emerged as a policy priority in 2006 with 87 areas selected for Primary Care Teams. Furthermore, *Towards 2016* commits to 'ongoing investment to ensure integrated, accessible services for people

⁴⁷ GNI Data - Eurostat, www.europa.ec.eurostat.eu

⁴⁸ World Health Organisation (1978) *Alma Alta*, Denmark: World Health Organisation.

within their own community' with the roll-out of 500 Primary Care Teams by 2011. This commitment is reinforced in the *National Development Plan 2007-2013* and in the *National Action Plan for Social Inclusion 2007-2016*.

The Health Strategy *Quality and Fairness: a Health System For You* makes a commitment to the participation of communities in policy and service development. Community participation is 'an essential component of a more responsive and appropriate system of care which is truly people-centred'.⁴⁹ The Primary Care Strategy considers that 'community participation in primary care will be strengthened by encouraging and facilitating the involvement of local community and voluntary groups in the planning and delivery of primary health care services'.

Combat Poverty Agency Proposals and Recommendations

Social Determinants of Health

Poverty and poor health are closely interrelated. Therefore reducing poverty is a key determinant to improving the health of people living in poverty. The likelihood of premature death is hugely increased by poor social conditions such as lack of income and inadequate housing. Children with low birth weight are more likely to be born to mothers who are experiencing poverty. The stress of striving to make ends meet impacts on both the physical and mental health of people in poverty, in particular women.⁵⁰ Too often there is a lack of primary care services located in poor communities. A third of those at risk of poverty (38%) and almost half (47%) of those living in consistent poverty report having a chronic illness compared to only a quarter (23%) of the general population.⁵¹

⁴⁹ Chief Medical Officer (2001) *Better Health for Everyone: A Population health Approach for Ireland: Annual Report of the Chief Medical Officer* Dublin: Department of Health and Children.

⁵⁰ Daly, M. & Leonard, M. (2002) *Against All Odds: Family Life on a Low Income*. Dublin: Combat Poverty Agency.

⁵¹ Layte, R., Nolan, A., & B. Nolan (2007) *Poor Prescriptions: Poverty, Health and Access to Services*. Dublin: Combat Poverty Agency

Although individuals can make choices in everyday life that may improve and protect their health, they are not completely in control of the social conditions in which they live and work. Public policy and services have a powerful influence on these external conditions and play an important role in creating a social environment that is conducive to good health. The Health Strategy *Quality and Fairness: A Health System for You* (2001) states that 'to develop an effective health system, the determinants of health, that is the social, economic, environmental and cultural factors which influence health, must be taken into account'. There is a need for policies which tackle the structural causes of ill-health to be formulated and implemented on a cross-departmental basis, preferably with strong inter-departmental coordination.

- ***There is a need to mainstream poverty and health issues into all policy areas.*** This can be supported through the application of poverty and health impact assessments. Poverty Impact Assessment guidelines have been developed at national level by the office for Social Inclusion (OSI) are being developed by Combat Poverty for use by local authorities.
- ***Tackling the social determinants of health requires a joined up approach at policy and implementation level:***
 - ***An interdepartmental working group, led by the Department of Health and Children, that also involves key stakeholders, including anti poverty groups, should be established;***
 - ***Within the HSE an Expert Advisory Group on social inclusion should be established involving stakeholders, including anti poverty groups, to co-ordinate efforts on implementation within the health services.***

Access to Primary Care Services

Combat Poverty considers that ideally universal provision of free or subsidised primary care services should be a key goal of public health policy. The right to health and its benefits should be recognised through the provision of universal primary care. The Primary Care Strategy sets out a plan for primary care to be the central focus for the delivery of health and personal social services. In the absence

of universal primary care, reforming primary care provision and improving access to primary care services in Ireland are central to more effective and equitable health service provision, especially for those experiencing poverty and health inequalities.

- **National standards should be set for primary care provision.** This would promote greater equality in terms of access to, and provision of, services on the basis of need. The standards should be supported by mechanisms of accountability. The Health Information and Quality Assurance Board (HIQA) could play a role in developing these, building on work completed by the Primary Care Steering Group.
- **Local communities should be involved in the development of health needs assessments and in the design and delivery of primary care services.** This would lead to more efficient and cost effective services.
- **Communities of greatest need should be prioritised for the location of Primary Care Teams.** For example, communities in RAPID and CLAR areas could be targeted. GPs could be provided with an incentive to locate there, for example by providing tax relief on buildings.
- **Primary Care Teams should be sufficiently resourced so that all ancillary services are available to those in need.** Ancillary services should also be fit for purpose. For instance, in areas with high drug misuse there should be access to drug treatment and mental health services.
- **Compulsory universal patient registration with Primary Care Teams should be introduced.** This would ensure that everybody has access to a GP, including those who are vulnerable and disadvantaged and/or those with greatest medical need. Registration procedures should ensure that Travellers, asylum seekers, refugees and people in temporary accommodation or who are homeless are not excluded.
- **The medical card income threshold limits should be set above the poverty**

line so that everyone living in poverty is entitled to a full medical card. The cost of GP services and subsequent medication costs can be a deterrent for low income families to go to their GP. Increasing access to medical cards is the most effective immediate measure to provide greater access to a GP and other primary care services for those on low incomes, in the absence of universal health care provision.

- **The types of service covered by the medical card should be flexible to meet the needs of excluded groups and should include other types of services such as mental health services or treatment for illnesses new to the Irish health landscape.**

Accessing Hospital Services

Everyone in Ireland is entitled to public care in hospitals; yet there is a two tiered health service whereby those who can afford to pay for private health insurance have faster access to hospital and specialist services. 52% of the population purchase private health insurance enabling them quicker access and treatment.⁵² People who depend on public care are generally those living in poverty and/or on low incomes and have to wait longer to access hospital care.

The current mix of public and private healthcare has resulted in the treatment of private patients in public hospitals, heavily subsidised by public money, at the expense of public patients. Private patients pay on average up to 60% of the full costs of their care with the rest covered by public funding. The two separate waiting lists for public and private patients ensure that the priority attached to access to hospital and specialist care is determined more by ability to pay, than medical need.

⁵² Burke, S. (2007) Background Paper on Access to Hospital Services. Dublin: Combat Poverty Agency.

The 2001 Health Strategy *Quality and Fairness – A Health System for You* outlines broad and specific commitments in relation to hospital services. These commitments include the provision of all services on the basis of need, 3,000 additional beds, and significant developments in a range of services requiring extra staffing. While Ireland has trebled its spending on health between 1997 and 2004, the recent increases have not yet made up for previous under-spending. Even though 1,200⁵³ additional beds have recently been provided there still remains a shortfall. In addition to this, the public service staffing ceiling has hampered the recruitment of essential staff.

- ***There should be a common waiting list for all patients with no differences in timing or type of medical care provided.***
- ***The Health Strategy should be fully implemented.*** Meeting the health strategy's major targets will require continued investment in health care facilities over the next ten years, with increased day-to-day spending on health.
- ***To maximise efficiency and ensure equity and fairness private health care should not be subsidised by public funds.***
- ***Investing in public health services would gradually reduce the need for the National Treatment Purchase Fund to operate on its present scale.***
- ***There is a need for a comprehensive primary and community care service.*** This would relieve pressures on accident and emergency departments. It would also lead to a reduction in public patient waiting lists and ensure that the public health system is more accessible to people living in poverty.

⁵³ 720 inpatient and 480 day beds

Community Development and Community Participation

A community development approach promotes the right to health and to tackling the underlying structural causes of health inequalities. At its core is the empowerment of groups of people to become involved in social change. It is about widening participation in the development, planning and delivery of health services and ensuring that the community is actively involved in these decisions.⁵⁴ It seeks the fulfilment of the right to the highest attainable physical and mental health.⁵⁵

To support community projects to tackle poverty and health inequalities Combat Poverty has developed the *Building Healthy Communities Programme*.⁵⁶ The projects in this programme are driven by community groups, often with the support and involvement of health professionals and health service staff. There is an increased awareness of the advantages of this approach in tackling poverty and health inequalities, as it supports the participation of those experiencing health inequalities. Participation leads to an improvement in services, as services are designed to meet required needs.

In this context Combat Poverty supports the development of the *Community Participation Guidelines* (2002)⁵⁷ and the *Community Involvement in Primary Care Guidelines* (2005).⁵⁸

- ***The Health Information and Quality Assurance Board (HIQA) should set national standards on community participation in primary care.***

⁵⁴ CLES Consulting (2006) *Policy Paper on Developing Community Infrastructure in the Building Healthy Communities Programme*. Dublin: Combat Poverty Agency.

⁵⁵ Community Action Network (2006) *CAN Comment; Community development is good for your health*. Dublin: CAN

⁵⁶ Launched in 2003 by Combat Poverty and the Department of Health and Children. For more information on this programme see www.combatpoverty.ie

⁵⁷ Health Board Executive (2002) *Community Participation Guidelines*. Dublin: Health Board Executive.

⁵⁸ Department of Health and Children (2005) *Guidelines for Community Involvement in Primary Care*. Dublin: Department of Health and Children.

- ***The HSE should support community development approaches to health.***
This will require resourcing and mainstreaming within the reformed health services, with a dedicated budget line. The Building Healthy Communities Programme, which supports disadvantaged communities to tackle poverty and health inequalities, could provide a working model for this.
- ***Communities need resourcing to participate in the roll out of the primary care strategy.*** In order for new primary care services to be cost effective and to target need, Primary Care Teams should include local community development interests in their governance structures. The employment of community development workers and the establishment of local health fora, resourced accordingly, could support this work.
- ***A national community development and health network would provide a mechanism for consultation, participation, sharing good practice and monitoring in the reformed health services.*** Combat Poverty could work with the HSE to support its establishment.
- ***The HSE should provide training on community development approaches, especially as staff take up new roles.*** In conjunction with community development health projects, training could be developed for staff in how to engage and support community interests using resources developed through Combat Poverty's local government programme.

Mental Health

People living in poverty experience poorer mental health and have a higher dependency on mental health services than people in higher socio-economic groups.⁵⁹ Likewise people with mental illness are more likely to experience poverty. Promoting good mental health among people who are poor and improving access to

⁵⁹ World Health Organisation (2003) *Mental Health Programme for Europe* WHO Regional Committee for Europe

quality mental health services is central to reducing poverty and promoting social inclusion.⁶⁰

In 2006 an expert group on mental health, established by the Government, produced a new mental health policy *A Vision for Change*. This policy outlines a seven to ten year reform programme aimed at providing a quality mental health service. It also commits to strengthening the capacity of individuals and communities and reducing the structural barriers to mental health by reducing discrimination and promoting access to employment.

People living in poverty have lower self esteem and higher stress rates. Without adequate and appropriate responses these issues can lead to further and more serious problems. People from lower socio economic groups have higher admission rates to psychiatric hospitals in Ireland than people from higher socio-economic groups.⁶¹ Research from mental health service users in the consultations for *A Vision for Change* found that 68% of people with mental health issues were dependent on some form of social welfare, 27% had the junior certificate as their highest qualification, 58% were single and 30% were in some form of employment. In 2002, only one in five people with mental health difficulties were employed.⁶² The National Disability Authority states that people with mental and emotional disability have the lowest rates of participation in the workforce.

According to EU estimates 3-4% of GDP is lost through the economic and social cost of mental illness,⁶³ while 60-80% of all costs associated with mental health problems are experienced outside the health system.⁶⁴

⁶⁰ Rankin, J. (2005) *Mental Health and Social Inclusion*. London: Institute of Public Policy Research.

⁶¹ Battel-Kirk, B., & J. Purdy (2007) *Health Inequalities on the island of Ireland*. Belfast/Dublin: Public Health Alliance for the island of Ireland.

⁶² Conroy, P. (2005) *Mental health and the workplace*.

⁶³ European Commission (2005) *Green paper: Improving the mental health of the population: Towards a strategy on mental health for the European Union*. Brussels: Health and Consumer Protection Directorate, European Commission.

⁶⁴ McDaid, D. (2004) 'Mental health and social exclusion: An overview'.

- ***Multi-disciplinary teams should be put in place to support the range of needs for people with mental health issues.***
- ***For those who experience mental illness there is a need for better services and social support networks, especially for those at risk of poverty.***
- ***The participation of people with mental health difficulties is required in the design and delivery of the range of services targeted at them.***
- ***Research is needed to investigate further the complex links between poverty and mental health.***
- ***Child mental health teams should be rolled out in line with the recommendations in Vision for Change.***

Children's Health

Children born into poverty experience an increased risk of ill health. Poverty impacts on a child's physical, mental and emotional health and development and affects a child's health from before their birth through to adolescence.

The Department of Health and Children and the Office of the Minister for Children have lead policy responsibility for child health. Inequalities in child health and the social determinants of child health are considered in the National Children's Strategy.

The Department of Health and Children has a number of targets relating to the reduction of inequalities in child health including the targets in the National Action Plan for Social Inclusion to reduce inequalities in low birth weight and to improve breastfeeding rates among lower socio-economic status groups.

In order to get the best possible start children need a nutritious diet, a positive and attentive child-parent relationship, a safe family and community environment, opportunities for more play and freedom from illness and disability.

- ***The future design of maternity/ antenatal services, early years screening, immunisations, injury prevention and obesity strategies should contribute to the reduction of child health inequalities and be delivered on an equitable basis.***
- ***A further research programme to monitor inequalities in child health could form a key component in the national children's longitudinal study.***

EDUCATION

Context

Educational disadvantage has been an area of work for Combat Poverty since the early 1990s. Poverty and inequality are both causes and consequences of educational disadvantage. Education is a key factor in determining whether a child will grow up to become a poor adult or not. Low income and lack of access to and participation in quality public services, including education, from an early age contribute to long term levels of poverty. Approximately 10% of people with primary education or lower experience consistent poverty, compared to 4% of those with higher secondary education.⁶⁵ Individuals from poorer social-economic backgrounds and communities are more likely to underachieve in the education system than their peers from higher income backgrounds.

Poor people often face particular challenges in reaching their potential in school. These factors can lead students to feel ashamed, stressed or afraid and increase the likelihood that they will drop out of school early.

For example:

- The high indirect costs associated with education (e.g. school books, school meals, clothes and transport);
- Poor nutrition leading to hunger and lack of concentration;
- Starting off at a disadvantage (for instance, no pre-school education);
- Teaching methods or subjects that do not meet the learning or cultural needs of students;
- No tradition of education within a student's family or community; and
- Bullying or a feeling of 'not fitting in'.

⁶⁵ Central Statistics Office (2006) *EU Survey on income and Living conditions (EU SILC), 2005 Results*. Cork: CSO

An individual whose parents have no educational qualifications beyond primary level has 23 times the risk of having no formal qualifications compared to someone whose parents have third level education.⁶⁶

The right educational experience can help to counteract the damaging effects of poverty and can break the cycle of poverty from one generation to another. Education by itself will not however solve poverty, and must be supported by policies in other areas, including income support and the provision of other high quality public services.

It is vital that education policies ensure that individuals can access quality education and training from early childhood through adulthood and that this provision takes account of the specific needs of vulnerable groups.

Research by Combat Poverty has indicated that some European countries provide a net benefit (or negative cost) to parents with children, insofar as the State provides high levels of subvention for education, childcare, healthcare and housing. Ireland demonstrates a higher-than-average net cost of public services for families with children.⁶⁷

A study by UK researchers Bradshaw and Finch (2002) found that:⁶⁸

- The net cost of children's education for Irish families ranges from €17 to €33 per month once fees, books, uniforms, school meals and other charges have been paid.
- Net childcare costs in Ireland are the highest in Europe, with a typical monthly outlay of €570 in 2002 terms. These high costs are attributable mainly to the non-subvention of childcare costs by the Irish State, but also to the relatively high costs of childcare in Ireland. The Early Childcare Supplement introduced in Budget 2006 has offset these costs to some extent.

⁶⁶ Layte, R., Maitre, B., Nolan, B. and Whelan, C.T. (2006) *Day In, Day out : Understanding the Dynamics of Child Poverty*. Dublin: Institute of Public Administration and Combat Poverty Agency

⁶⁷ Combat Poverty Agency (2005). *Ending Child Poverty* Policy Statement. Dublin: Combat Poverty Agency.

⁶⁸ Bradshaw, J. and Finch, N. (2002) *A Comparison of Child benefit Packages in 22 Countries – Research Report No. 174*. London: Her Majesty's Stationery Office.

Research by the Combat Poverty Agency⁶⁹ which evaluated the extent to which poverty and social inclusion was mainstreamed into government policies found that, in Ireland, 46% of respondents said that Government policies on education and training incorporated poverty and social inclusion concerns, while a quarter said that these concerns were taken into consideration in legislation dealing with education and training issues.

The National Action Plan for Social Inclusion 2007–2016⁷⁰ (NAPinclusion) sets a number of high level goals in relation to education, and the measures that will be taken to achieve these goals. It also sets out a high level goal relating to child income support, which is a critical determinant in supporting families to engage fully in the education system. These include:

- **Goal 1 – Education:** Ensure that targeted pre-school education is provided to children from urban primary school communities covered by the Delivering Equality of Opportunity in Schools (DEIS) action plan;
- **Goal 2 – Education:** Reduce the proportion of pupils with serious literacy difficulties in primary schools serving disadvantaged communities. The target is to halve the proportion from the current 27% - 30% to less than 15% by 2016;
- **Goal 3 – Education:** Work to ensure that the proportion of the population aged 20 – 24 completing upper second level education or equivalent will exceed 90% by 2013.
- **Goal 4 – Income Support:** Maintain the combined value of child income support measures at 33% - 35% of the minimum adult social welfare payment rate over the course of this Plan and review child income supports aimed at assisting children in families on low incomes.

⁶⁹ O'Kelly, K .P. (2007) *The Evaluation of Mainstreaming Social Inclusion in Europe*. Dublin: Combat Poverty Agency.

⁷⁰ Government of Ireland (2007) *National Action Plan for Social Inclusion 2007–2016*. Dublin: Stationery Office.

Combat Poverty Agency Proposals and Recommendations

General

Low income and lack of access to, and participation in, quality public services, including education, from an early age contribute to long term levels of poverty. Level of educational attainment determines to a large extent the life chances of people. It can be an effective means of helping to counteract the damaging effects of poverty and can curb the ongoing cycle of poverty from one generation to the next. It is vital that education policies ensure that individuals can access quality education and training from early childhood through adulthood and that this provision takes account of specific needs of vulnerable groups. Poverty Impact Assessment of education policies and programmes can assist in reducing inequalities within the education system by ensuring that those experiencing poverty or educational disadvantage are considered in the design and implementation of policies.

Policy Development

- ***Poverty impact assessments should be carried out on all education policies, to ensure that those experiencing poverty are considered in the design and implementation of all policies.*** This would help to reduce educational disadvantage and promote equal outcomes for all students.
- ***To avoid early school leaving, students need particular support during transitional stages of their education*** (eg. from primary to secondary school, or from Junior Cert to leaving cert etc).

Access to services

Services should be tailored to ensure equal outcomes for all students, regardless of ability to pay and family culture / background. This would involve putting in place additional supports to assist low income families to participate fully in the education system.

Participation

People and families affected by poverty should have an opportunity to participate in the development and implementation of education policies which affect them

Quality of Services

The provision of education services at all stages, including pre-school education, should be based on high quality standards and centred on the needs of the child

Pre-School Education

In 2004, 25% of Irish children aged 4 or under as a percentage of the population aged between 3 and 4 were enrolled in pre-school education, compared to the EU average of 74%.⁷¹

Pre-school education can play a major role in a child's development and improve a child's life chances.

However, the context in which early education is delivered (eg. community, family income levels etc) plays a very significant part in determining the value that children can derive from early education.

- ***Pre-school education should be recognised as a distinct stage of the education system, which is an essential part of the development of all children. Measures to support parents with early childhood care and education costs should encourage formal participation in early childhood education (e.g. the Early Childcare Supplement)***
- ***Investment in the supply of quality pre-school services should be a priority***

⁷¹ OECD (2004) *Education at a Glance*. Paris: OECD.

to ensure at the least that all children between the ages of 3 and 4 can access early-education.

- *Ultimately, universal access to affordable and high quality early education should be provided for all children aged 3-4 years. A universal system is more economically advantageous than targeted interventions and is likely to lead to better outcomes for disadvantaged children. Better integration and co-ordination of early education and childcare is needed to achieve this vision.*
- *Policies relating to early childhood care and education should be driven by the needs of the child (rather than labour force activation requirements)*
- *Policies relating to early childhood education should consider the context of the education (e.g. family, community etc) as well as the specific nature of the service. This would reflect the 'whole child' approach referred to in the National Children's Strategy.*
- *The implementation of the commitment in the NAPinclusion to provide 17,000 childcare training places over the period to 2010 should ensure that pre-school teachers are trained to Fetac 'Level 5' standard. Training for pre-school teachers should take account of the different learning needs and styles of young children.*

Primary / Secondary level

- *Commitments to reduce pupil / teacher ratios should continue to prioritise disadvantaged areas.*
- *There should be continued investment in supports to ensure that parents and communities are involved in current and future initiatives targeted at children most at risk of educational under-achievement.*
- *School structures should be promoted which facilitate participation by*

students in school policies that affect them.

- ***Further investment should be made in home school community liaison services to develop home, school and community links.***
- ***Measures and resources to integrate migrant children into the education system, as outlined in the NAPinclusion are welcome and should be prioritised.***
- ***School curricula and assessment methodologies should make provision for the natural abilities, cultural backgrounds and learning styles of all students, to ensure that it is relevant to students from low income backgrounds. This requires flexibility of approach among teachers and other education providers.***
- ***Measures to support 'child carers' to participate fully in the education system should be introduced.***
- ***Supports for early school leavers should be established to promote their continued participation in education. Demonstration programmes to establish innovative new approaches to engaging with early school leavers should be resourced through Youth Reach Centres.***
- ***Support services to eliminate literacy problems among school children should be resourced.***
- ***Teachers should be given ongoing support to help them address the needs of students with learning difficulties, and adapt to different learning styles.***
- ***The school food programme, including a hot school dinner, should be extended to all schools in disadvantaged areas, and over time to all schools with a tiered payment system.***
- ***Breakfast and snacks should be provided as part of pre-and after-school programmes to tackle educational disadvantage. This will encourage attendance, and will improve concentration levels among students.***

Adult Education

- *Supports should be put in place to assist people on low incomes to access education to improve their circumstances. The barriers currently preventing people from accessing education, including lack of affordable childcare, transport constraints and low incomes should be identified and addressed as part of any programme to encourage adult education and training. Training should be accessible and flexible to suit the constraints facing low income participants.*
- *Welfare to work transition policies, including employment and education / training policies, should ensure they are effective in helping adults into well paid jobs.*