

REPORT ON NAP/INCLUSION CONSULTATION SEMINAR

CORK – 23rd November 2005

A total of 81 representatives drawn from government departments, state agencies, community and voluntary sector as well as members of the public attended the Cork NAP/inclusion consultation seminar on the 23rd November 2005. The below is a summary of the main points raised by seminar attendees.

1. Facilitating access to employment

Priorities for change

- Development of modularised education and training programmes to support flexible access and participation in education and training opportunities.
- Mainstream successful pilot programmes of good practice in employment, education and training and maintain the inter-agency partnership nature of such projects.
- Increase in dedicated resources for early childhood care and education services, and educational resources for children with disabilities and special needs.

What is working?

There was broad support for the range of **targeted active labour market programmes** (ALMPs) currently available in particular, measures for vulnerable and marginalised groups offered by FAS, the VEC and the community and voluntary (C&V) sector. Participants identified the Community Employment Scheme as an example of a positive initiative supporting the participation of excluded groups in labour market opportunities.

What is not working and how should things be done better?

Employers should be required to employ a legal minimum percentage of **people with disabilities** and this requirement should be regulated by the state. The accessibility of general infrastructure should be prioritised, as it is crucial in determining the level of participation by many people with disabilities in employment and education/training opportunities. Other general points included the need to review the maximum numbers of hours in paid employment that may be completed by those in receipt of **Carers Allowance** and the need to review the earning limits applied to the retention of particular social welfare payments when taking-up employment. Potential **disincentives to participation in employment/education schemes** arising from the interaction of the social welfare and tax systems should be reviewed in order to encourage the transition from welfare to work. Particular attention should be given to the tapered retention of secondary benefits during the transition to employment.

2. Facilitating access to services – education

Priorities for change

- Abolition of the means test for third level grants.

- Better co-ordination of education services and schemes across the range of education providers.
- Commitment to developing long-term funding for community and voluntary education providers.
- Review the current academic focus within the primary and second level curriculum.

What is working?

Three main types of schemes and programmes – ADM-Pobal sponsored after school programmes, community based adult education schemes and Home-School Liaison Officers – were praised for their role in promoting access to education and links between the student, family and education provider.

What is not working and how should things be done better?

The present education system appears to be continually failing some students. In particular, there are major **gaps in resources and supports** for disadvantaged groups within mainstream education e.g., children with disabilities, Travellers and children with behavioural or mental health difficulties. Appropriate support mechanisms (e.g. access to psychological services, speech therapy, etc) and a tailored academic curriculum must be devised to support students' different learning abilities. Significant resources should be invested in **second-chance adult education**. Community based education provision is increasingly challenged by a lack of resources and funding and these issues must be urgently addressed. Networks to improve access to information relating to education should be improved and developed in the context of the work carried out by the Citizens Information Centre.

3. Facilitating access to services – health and care

Priorities for change

- Development of universal health services and health policy informed by a holistic, rights-based approach.
- The provision of a continuum of mental health services.
- More accessible, affordable and local childcare services and services for young people.
- Increased support for carers.
- Increased community-based health service provision.

What is working?

Government departments in general, in particular the Department of Social and Family Affairs, have improved the level and quality of **customer service** offered to members of public. The extension of **medical card coverage** was welcomed and, together with the **Medical Access Programme**, was believed to have led to general improvements in access to, and take-up of, health services amongst vulnerable groups. **Community Development Projects** and locally based community and voluntary services were praised for facilitating access to services within a community based setting. The **flexibility** offered by these services was seen as a vital and necessary characteristic when working with vulnerable groups. The efficiency of such services was also enhanced by their focus on developing and delivering

integrated services across a range of service providers. Recent years have seen **greater participation** and input by the local community and community and voluntary sector (C&V) in local decision-making leading to the development of more responsive services e.g. Cork City Council has helped local community and relevant groups to engage with RAPID programmes. A number of initiatives targeted at vulnerable groups were also felt to work reasonably well such as the entitlement to a **travel pass for people with disabilities** and there was a general sense of a growing recognition and support for the work of **carers**.

What is not working and how should things be done better?

Echoing the themes emerging from the housing workshop, the discussion on health and care focused on the importance of **developing sustainable, healthy communities** with participants arguing that the wider built-environment was an important aspect of community health. Participants called for local authorities to demonstrate greater responsibility in the care of the built and natural environment but also recognised the need for citizens to take responsibility for their communities.

A second theme was the need to further develop **preventative health services** and to deliver these through a variety of settings including schools, community based groups and mainstream health services. The focus was on the development of a holistic approach to health. Participants called for improved access to services ranging from community psychiatric hospitals to cancer screening programmes and from community health workers to family support services. Linked with this were calls for improved provision of information on health services and general supports.

Childcare was seen as a very important element of health and care with participants arguing for an enhanced role for the local community in the development of local childcare services. Local, community based, flexible childcare strategies were favoured. The Equal Opportunities Childcare Programme was discussed. There was some criticism that access to its childcare places were tied to participation in active labour market programmes (ALMPs) and it was argued that the Programme should also fund the provision of general, open-access, community-based services.

The discussion explored the issue of services and supports available to carers, those experiencing mental health illnesses and people with disabilities. The **lack of support services for carers** was strongly criticised. Participants called for enhanced income supports for carers e.g., abolition of the means test for the Carers Allowance and granting carers an automatic entitlement to a medical card. It was noted that less than one in five carers are in receipt of state income supports and even these do not generally qualify for other State income supports such as contributory pensions. The lack of available and appropriate respite care services for carers was criticised. A related issue was the lack of home help services for the elderly to support the independent living of those who wished to remain living within their own homes.

The **lack of community mental health services** must be addressed with suggestions focusing on the development of integrated service delivery between community and hospital services. Consideration should be given to increasing the number of services accessible through community (e.g. GP) rather than hospital services. A strong argument was put forward for recognising the links between a person's general health and their ability to

participate in typical daily social activities such as employment – **employment as occupational therapy**. This was particularly important for people with disabilities but numerous barriers were identified which adversely impacted upon their ability to engage in employment and accordingly, upon their general health and wellbeing. Particular difficulties were noted with regard to engaging in part-time employment while retaining the right to secondary benefits - persons in receipt of invalidity pensions are generally not entitled to engage in paid employment or active labour market programmes. The reduction in number of FAS funded active labour market programmes was considered to have led to a significant reduction in employment opportunities for people with disabilities.

4. Facilitating access to resources – housing

Priorities for change

- Increased social and affordable housing.
- Housing policy to focus on the building of sustainable communities e.g. require developers to provide appropriate community facilities and services in new and existing social and affordable housing estates.
- Extensive programme of refurbishment and modernisation of older local authority housing stock.
- Development of integrated strategy for housing provision tailored to meet local needs and responsive to the input of the community and voluntary sector.
- Regulation of private rented accommodation.

What is working?

Improvements in housing delivery and policy in the local region were partly attributed to the operation of a **Housing Forum** bringing together public, private and voluntary organisations involved in housing provision. The **funding line for home improvements** or modifications in private and local authority homes was felt to work well although there were calls for an increase in the amount of funding available under this grant. **Transitional housing schemes**, while needing additional resources to support their work, were felt to work well. In general, recent research on social exclusion in the Cork region was believed to have informed recent policy and practice decisions.

What is not working and how should things be done better?

Particular issues were noted with regard to the **supply of appropriate housing options for vulnerable groups** (lone parents, separated fathers) in public and private accommodation options. It was noted that these groups are over represented on local authority housing waiting lists but high rents act as a barrier to private rented accommodation. **Hidden homelessness** was believed to be an issue with some families living in unsuitable or overcrowded accommodation (e.g. young parents living in their parents' family home). The lack of suitable housing options for other groups was noted especially for people with disabilities, single men, Travellers and those experiencing mental health difficulties. The slow turn around time on **unoccupied local authority housing** was felt to result in properties being vandalised and rendered unfit for use. There were calls for local authorities to undertake an extensive refurbishment programme of existing housing stock. A general theme was the need to ensure that concentrations of new Irish communities, including

migrant workers, did not develop in a single estate or local area to avoid the potential exclusion and ghettoisation of these communities from the broad populace.

Suggested improvements included the rescinding of Part V of the Planning Act, greater investment in maintaining the housing stock, higher standards for housing and the regulation of public and private housing stock. A key issue was the need for increased transparency in relation to the operation of the housing allocation system to enable those on the list to clearly see how allocations are made, under what criteria, etc. A final key theme was the need to prioritise the building of sustainable communities adequately serviced by community facilities and essential services.

5. Facilitating access to resources – income supports

Priorities for change

- National policies and programmes, including NAP/inclusion, must prioritise the tackling of poverty and recognise and respond to its multi-dimensional nature.
- Commit to the provision of an adequate welfare state for all citizens.
- Develop a rights-based access to supports and services for all residents.
- Address the fragmentation of social welfare schemes and other state supports and streamline the system of supports to make it easier to access supports.
- Accessible information provision.
- Increase in basic social welfare rates.
- Individualisation of social welfare system.

What is working?

The existence of a basic social welfare safety net including secondary and ancillary payments such as fuel allowance, free travel, rent supplement was seen as a positive support for those dependent on social welfare payments. The flexibility of the Carers Respite Grant and Child Benefit were also praised. Particular income supports designed to support people to re-engage with active labour market programmes (e.g. Back to Work Allowance, Back to Education Scheme, Community Employment Scheme) were considered vital supports to enable people to meet the costs associated with re-entering the labour force.

What is not working and how should things be done better?

There was general agreement that while the very existence of a range of welfare benefits and income supports was positive, significant improvements in the rates and administration of these benefits were necessary. Specific suggestions included:

- The individualisation of the social welfare system
- Abolition of the range of social welfare benefits to be replaced with one guaranteed minimum benefit payment for all, supplemented by additional targeted payments.
- Increase in the basic adult social welfare payment.
- Increase in Child Dependent Allowances.

- Removal of the cohabitation rule from the eligibility criteria for the One Parent Family Payment

A strong focus was evident in the discussion on income supports for full-time **carers**, including the extent to which available allowances are being taken up by those eligible e.g. it was noted that the recent Census identified in excess of 140,000 carers but there are approximately only 23,000 recipients of the Carers Allowance. Other suggested improvements to the operation of the Carers Allowance include: the abolition of the means test, an increase in the size of the allowance (e.g. by linking it to the minimum wage), provision of PRSI credits for recipients, and a review of the system whereby those in receipt of another social welfare payment cannot claim the allowance.

It was strongly argued that the **Travel Pass** system should be reformed to allow unlimited access to public transport. It was also noted that eligibility for this benefit was of little practical benefit to those living in areas lacking public transport. Income supports for **people with disabilities** should be flexible and support participation in employment without leading to a reduction in benefits. The discussion also centred on the implementation of the Habitual Residency Condition and the system of direct provision for asylum seekers and refugees. Participants strongly supported the abolition of these measures as they were seen to be causing impoverishment amongst these communities. Finally, more childcare places and assistance with childcare costs should be made available for participants in active labour market programmes.

6. Rural and urban issues

Priorities for change

- Expansion of the Rural Transport Initiative Scheme to facilitate access to health, education, training and employment services and to address poor public transport infrastructure in disadvantaged rural and urban areas.
- Focus on co-ordination and integration of service delivery.
- Re-examine the criteria used in choosing RAPID areas to ensure that the programme's catchment areas are inclusive of the most disadvantaged communities.
- Greater focus on tackling substance/alcohol misuse and anti-social behaviour in rural and urban areas.
- Commitment to the development of sustainable communities within new and existing public and private housing provision.
- Provision of Broadband services to rural areas.
- Rural and urban proofing of NAP/inclusion policies and measures.
- Development of measures to support the inclusion of new Irish communities.

What is working?

Specific initiatives identified as working well in rural areas included the Rural Transport Initiative and Family Resource Centres.

What is not working and how could things be improved?

Basic service provision (such as access to adult education, primary health care services, childcare) in isolated rural and disadvantaged urban areas is inadequate. The **inadequacy of public transport services** increases people's difficulties in accessing such services. Provision of Broadband was seen as a vital element of rural infrastructure and its absence was considered to hamper implementation of the Government's e-Inclusion programme and the development of facilities such as distant learning, etc.

The lack of community facilities in new and existing housing developments were believed to contribute to the growing problem of substance and alcohol misuse amongst young people, rising anti-social behaviour and to the overall social exclusion experienced by disadvantaged communities. Community policy and the development of alternative or community rehabilitation programmes for drug misusers and those convicted of minor offences should be considered. Finally, poverty and social exclusion were clearly future issues that may have to be tackled amongst new Irish communities, and respondents argued for the development of an integration and information strategy to respond to these issues.

7. Gender

Priorities for change

- Gender and equality proofing of related NAP/inclusion policies and programmes.
- Develop long-term funding lines for community and voluntary organisations working to address poverty and social exclusion.
- Identify gay, lesbians and bisexuals as a vulnerable group within NAP/inclusion.
- Commit to development of consultation processes to ensure the input of individuals, public, private and community sectors in anti-poverty policies and programmes.

What is working?

The development of tailored, local responses to poverty and social exclusion within the community was strongly favoured. The increased focus and support for groups working to overcome gender inequalities, particularly amongst women, was acknowledged. However, multi-annual funding was seen as essential to support the long-term interventions required to work with marginalised groups.

What is not working and how could it work better?

Much of the discussion focused on the need for increased resources and streamlining of the administrative requirements to access such resources to support the work of community and voluntary groups engaging with particularly marginalised and vulnerable groups.