

The challenges currently facing social services: **a view from the public sector**

This paper was prepared in response to a set of questions to members of the stakeholder group on the European Platform against Poverty and Social Exclusion from the European Commission for a meeting on 3 May.

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ESN is the independent network for social services in Europe. Our mission is to help change the lives of the most vulnerable in society through the delivery of quality social services. We bring together the people who are key to the design and delivery of vital care and support at the local level to learn from each other and contribute their experience and expertise to building effective European and national social policy.

Background

This paper was prepared in response to a set of specific questions from the European Commission to members of the EU Stakeholder Group on the European Platform against Poverty and Social Exclusion. These questions were discussed at a meeting on 3 May 2012 in Brussels, building on a similar discussion between ministers of social affairs at an informal EPSCO Council in Denmark in April 2012¹.

ESN and public social services

ESN is the European network for social services managed, delivered or funded by public authorities. Our members are managers of public social services, senior social work and care professionals, regulators and researchers. ESN works on a wide range of personal social services from child care and child protection right through to care and support for older people. Directors of social services – the senior civil servant/official responsible for social services in a public authority – advocate for the values and mission of social work and care at political level, among their colleagues and in relations with other public bodies.

Public social services are based on long-established social work values and rights that are enshrined in national and international law. ESN is seeing the impact of the UNCRC and the UNCRPD in service design and delivery. Public social services cooperate closely with non-profit and for-profit service providers and with other public services such as health, education, employment and housing.

ESN believes that one of the roles of the public sector (State regulators and regions or municipalities) is to promote quality through services that are provided by NGOs and private companies but funded through taxation and publicly-regulated insurance. In ESN's view, services should not only be accountable to direct beneficiaries but also to those funding, regulating or contracting the service. Regions, provinces/counties and municipalities are democratically accountable to citizens for the design, capacity and quality of services in their area.

Question 1(a) **In your opinion, what are the types of social services that would be most essential for social inclusion?**

There is great difficulty in defining social services; the term means different things in different countries. ESN Members tends to work in the main with specialist social work and care services that help people overcome or manage challenging life circumstances, though ESN is conscious of links with mainstream universal services because they assist in the identification of extra support needs. Specialist social work and care services include those provided to:

- vulnerable children and families (also mainstream pre-school childcare)
- people with a disability or a mental health problem
- people with a drug, alcohol or other addiction
- homeless people and people in insecure housing
- people in a situation of long-term unemployment
- people struggling with debt problems
- older people with care needs
- asylum-seekers and vulnerable migrants

¹ [‘Social services under pressure’](#) discussion paper by the Danish Presidency

These services fit into the second category of the EU's definition of SSGI as "essential services provided directly to the person that play a preventive and socially cohesive/inclusive role".

Every person who has contact with social services might say that the help and support they get is essential for them. Social workers/educators in these services assist people to access or retain mainstream services such as housing, health care, banking, energy or employment perhaps, for example guiding:

- someone with a learning disability to set up and manage a bank account or energy supply in their own home
- an asylum-seeker to access secure housing and health care
- a single mother with depression to find a pre-school place for her child and to find support for herself
- a child in public care to finish secondary school.

This may include encouragement/confidence-building with the person and advocacy on their behalf to ensure they get a good service.

In ESN's view, the ability of public policy to promote social inclusion is much more about the model of service on offer than about prioritising a particular service for one client group over another. In order to promote social inclusion, services need to respect each person as an individual with his/her needs, wishes and capacities in the context of his/her family and local community. It is not possible to say which type of services are the *most* essential; everyone needs a different combination of social (and other) services to achieve social inclusion. It may even be counterproductive to define certain services as 'essential' in the long-term since all services should be open to evaluation and possible re-design to best meet users' needs.

Question 1(b) Could you please provide evidence of gaps in the provision of social services that would need to be filled for the EU to meet its poverty reduction target?

ESN members see the role of social services as crucial to combating poverty and social exclusion. Indeed, much is already being done by specialist social work services to help families in difficulty overcome or manage challenging life circumstances. However, it is clear from ESN members' local experience that combating poverty and social exclusion is as much about education and employment as about basic welfare benefits and specialist social work services.

In an assessment of the National Reform Programmes 2011, ESN Members found it regrettable that the policy links between these issues were not more prominent. They cited the need to reduce school drop-outs, increase educational attainment and raise employment among vulnerable groups, in order to "lift 20 million people out of poverty". In particular, they identified several key areas:

- Education and social inclusion for all children
- Investment in life-long learning
- Comprehensive early intervention programmes
- Personalised pathways for vulnerable groups
- Ensuring adequate social benefits
- Better access to European funds

There are certainly gaps in provision of services or particular types of service in different regions or municipalities or countries but it may not be helpful to diagnose these gaps at EU

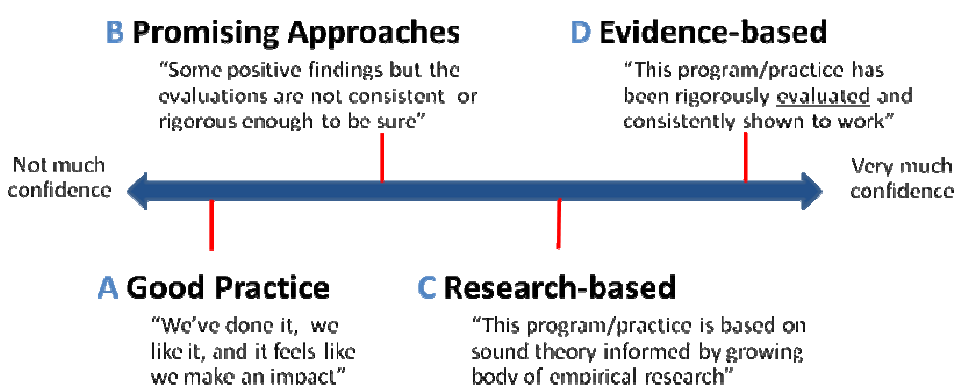
level. What can reveal the gaps in provision is a strategic local or regional assessment of needs of the population. Such an assessment can be based on demographic and socio-economic data and should involve service providers, user groups and the general public. This should then not only be about gaps in provision (e.g. a rising number of older people with care needs should not necessarily entail building more residential care homes) but also about the model of care that is on offer, i.e. whether people are seen as individuals and empowers them to remain or take control of their life.

Without strategic needs assessment, planning (and later, evaluation), there is a risk that a long-standing service model will continue without being challenged. There is therefore a need to rethink services to promote greater social inclusion and independence for people using those services. This can be seen, for example, in the case of large institutions for people with disabilities or a mental health condition.

Question 2(a) What scope is there for better targeting public support for social services?

Public support for social services can be better targeted if it is based on a strategic assessment of the needs of the population in a given area, as described above. Knowing what the needs and wishes of the people are, public support can be directed to those services that will be most effective; services that are shown not to perform well should be decommissioned. This means developing an evidence-based approach to social services, which is itself another way to better target public support.

Social services are accustomed to defending their mission on the basis of historic religious and social values; more recently these values have been embodied in human rights. ESN recognises that there needs to be a sound economic case for investment in social services – and in particular, in certain methodologies or approaches *that have been shown to work*. The continuum below shows the level of confidence policy-makers can have “that this programme/practice is a good use of our resources *and* improves outcomes for children and families”²:



ESN therefore welcomes the Commission’s initiatives on social innovation and evidence-based social policy experimentation. As long as this is not restricted to one particular evaluation methodology (e.g. randomised control trials) and as long as the methodology is able to assess the change that is made in people’s lives, then it is positive to have EU funding available in this area.

² D. Perkins cited in S. Nutley presentation: this and others are available at: <http://www.movisie.nl/eCache/ENG/1/37/973.html>

Question 2 (b) **What scope is there for efficiency gains in the provision of social services (for example, gains related to innovative ways of providing the services), allowing for social services either to become more effective for the same level of spending or for spending cuts without negative effects?**

There is certainly scope for efficiency gains: here are a number of points that are common to several ESN case studies:

- See clients as 'co-producers' of services: clients might need less help and support than professionals have traditionally thought
- Transform services to be more based on prevention, rehabilitation and independent living in the community than on care particularly in institutions or hospitals.
- Networking/integration among local actors in order to avoid duplication of tasks and share back-office functions such as HR or IT.
- Greater use of electronic systems and welfare technology to manage case-load and monitor expenditure/income per client or per unit.
- Development of team-managers who are able to manage people, case-loads and resources well at the front-line.
- Exploiting the know-how of front-line professionals to find untapped potential for innovation, where necessary with the help of the private sector

Local case studies on efficiency tend to be quite complex, as a variety of factors are at work, including budget deficit/debt, service design and organisation, changes in legislation and roles, local economy and local politics. The following have been simplified for the sake of brevity but the full powerpoints are available:

- **Aarhus, DK** (mental health service) more use of 'recovery' approach to mental health, less use of residential homes. This is only one element but part of an overall cost-saving strategy to cope with a **budget reduction of -8.5% 2010 to 2011**.
- **Redbridge, UK** (older people's service): greater use of rehabilitation post-hospital for older people to get them living independently again / changes to eligibility criteria – some people have to pay more. Budget is rising but the services have to be more efficient because of rising number of clients, mostly older people.
[Aarhus and Redbridge in combined [powerpoint here](#)]
- **Horsens, DK** (mental health/intellectual disability service): moved model of care from group homes with permanent staff to living independent in flats, staff on call, activity centre, safe house for crisis. Saving about **10% in annual costs** but spending actually went up on mental health and down on intellectual disability.
- **Offenbach, DE** (active inclusion service): greater use of client-to-client counseling or group counseling instead of professional-to-client counseling. This was among the measures that allowed to cope with **budget -15%** from 2010 to 2011.
- **Fredericia, DK** (older people's services): from late to early intervention, from compensation to rehabilitation, care to prevention. Care staff retrained older people in daily tasks instead of performing them for them. Less time with users but same number of visits. Saving about **12% per year**. [Service design](#) and [assessment](#).

Question 3 Based on evidence that you have of cuts in public spending for social services (as a result of the crisis and on-going austerity measures), what would allow us to make a strong case for social services as investment?

There are a number of examples of economic modelling that show return on investment over the long-term, not necessarily of social services in a generic way, but of a specific model/approach.

Mental health

Prof. Martin Knapp (London School of Economics) spoke at ESN's European Social Services Conference in 2011.³ Using his recent research conducted for the Department of Health in the UK, he demonstrated that prevention pays off in the medium and long-term (up to €15 return on every €1 spent). He also argued for good-quality community care, accepting that it is not necessarily more expensive than institutional care, but undeniably offers a better quality of life.

Prof. Knapp urged the audience to think about cost-effectiveness, not just cost when shifting from institutions to community care. The process, he said, had to be assessed in the long-term and seen as broadly as possible, since savings might fall across many different budgets. *"Deinstitutionalisation is most successful if located within other policy efforts such as personalisation, self-direction, carer support, anti-stigma efforts, access to employment, social participation, integrated care and others,"* Knapp advised.

Early Childhood Education and Care

Prof. Gøsta Esping-Andersen (University Pompeu Fabra, Barcelona) argued that if a country invests 2% of GDP in universal early-years services, the return on that investment will be in the order of 10-12% of GDP in the long-term. This particularly arises from reduced criminality and better learning abilities and disproportionately benefits children from a disadvantaged background.⁴ This, he says, would mean shifting resources from higher education into the early years both in terms of parental leave for 0-1 age group and child-care provision and education for children aged 1-6. Participation of disadvantaged children in targeted high-quality childcare is particularly beneficial and can be considerably more effective than giving families of disadvantaged children unrestricted cash transfers.⁵

Maintaining values and rights as an argument

Because the economic case can be contested and savings in complex welfare and health systems difficult to quantify accurately, it is important to continue to make a case that is also based on rights, for example the UNCRC and UNCRPD and on vision and values for a particular local area or service provider. The development of vision and values for a service can be influential in changing structures, service culture and behaviour, because there is the potential to develop them through a consultative process, by which funders, managers, care staff, service users and families all commit to a model that is based on empowerment, a person-centred approach and community living.

³ M. Knapp (2011), [presentation](#) to European Social Services Conference, Warsaw, 6-8 July.

⁴ G. Esping-Andersen (2009): *The Incomplete Revolution: Adapting to Women's New Roles*. Polity Press, Cambridge (pp133-139)

⁵ Currie, J. (1998): *The Effect of Welfare on Child Outcomes: What We Know and What We Need to Know*. JCPR Working Papers, Northwestern University/University of Chicago Joint Center for Poverty Research

Further Reading

- ESN Spring Seminar Resources (May 2011)
These webpages include material from the 2011 seminar 'Innovative Responses for Challenging Times', practice-examples and papers, plus some ideas and quotes about leadership, performance and innovation.
<http://www.esn-eu.org/e-news-may11-budapest-seminar>
- ESN Barcelona 2010 Messages (June 2010)
These were the key messages drawn from the plenary discussions at the European Social Services Conference, particularly on the role of leaders and managers during the crisis.
<http://www.esn-eu.org/e-news-barcelona-key-messages>
- ESN Recession Workshop (December 2009)
This webpage contains the report and presentations from an early workshop which assessed the impact of the crisis on social services and responses to it.
<http://www.esn-eu.org/e-newsletter-jan10-recession-paper>
- Dexia local government finances report (2010)
This is a report by Dexia bank on the situation of local and regional government finances overall in 2010 based on official EU data.
https://www.dexia.be/NR/rdonlyres/2991BEED-3C61-4E1F-98AB-7EBB052EBE29/0/NDCE_juillet_2011_FR.pdf

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