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Towards a people's Europe

European Social Network (ESN) response to the Consultation on the European Pillar of Social Rights

European Social Network (ESN)'s Response to the European Commission consultation on a proposal for a European Pillar of Social Rights

Preface

With this paper, the European Social Network (ESN) submits its response to the consultation launched by the European Commission on its proposal for a European Pillar of Social Rights in March 2016[1]. The paper starts by describing the key social priorities that we believe the Pillar should address on the basis of the priorities put forward by the members of ESN's Reference Group on the European Semester[2]. Next, the paper addresses the recent trends that have been leading to the transformation of social welfare systems. After, it continues with an assessment of the challenges described under chapter III of the European Commission's proposal on adequate and sustainable social protection. Finally, it provides suggestions for successful monitoring and implementation, and lastly specific suggestions are made as to how the principles put forward by the Commission could be revised or strengthened.

For referencing, please use:

Acknowledgements:

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[1] Public consultation on the European Pillar of Social Rights. Available at: http://ec.europa.eu/priorities/deeper-and-fairer-economic-and-monetary-union/towards-european-pillar-social-rights/public_en (last accessed on 25 November 2016).
[2] As part of its four-year strategy 2014-2017, the European Social Network launched a Reference Group to give greater prominence to social issues and the challenges faced by social services in the framework of the European Semester, the cycle of economic and social policy coordination between the EU and its Member States. The members of the Group hold managerial responsibilities in local and regional authorities, where they plan, manage and implement social services within social care and social work professional associations.

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Introduction

On 9 September 2015, Jean-Claude Juncker, President of the European Commission, announced in his State of the Union address in the European Parliament[3] the establishment of a European Pillar of Social Rights (hereafter "the Pillar"). This initiative is part of the work undertaken by the European Commission for a deeper and fairer Economic and Monetary Union (EMU)[4] and the commitment of the current European Commission to create a Europe worthy of a "Social Triple A" rating[5]. The ambition of the Pillar is to represent "[…] a reference framework to screen the employment and social performance of participating Member States, to drive reforms at national level and, more specifically, to serve as a compass for renewed convergence within the euro area"[6].

The preliminary outline of the European Pillar of Social Rights[7] sets out the key social objectives and values inscribed in EU primary law. Nonetheless, it is not intended to be enshrined in law, ie form part of the European Treaties. Instead of amending the European social acquis or replacing existing rights, the Pillar should build on and complement the legal status quo, ensuring that common rules remain up-to-date. In the Commission's words, the purpose of the Pillar is to "operationalise […] a number of rights already inscribed in EU and other relevant sources of law"[8]. It will serve as a framework to revisit the EU's employment and social performance in the context of changing work patterns and societies, and guide policies in several fields essential for well-functioning and fair labour markets and welfare systems in participating Member States[9].

Therefore, by establishing the Pillar, the Commission will pursue two complementary work strands[10]:

- Modernising and addressing the gaps in existing social policy legislation to take account of today's work environment and to ensure that new models of work maintain a fair balance in the relationship between employers and workers

- Identifying social benchmarks with a view to upward convergence as regards the functioning of the labour market, skills and social protection.

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[3] Jean-Claude Juncker, State of the Union 2015. Available at: https://ec.europa.eu/priorities/state-union-2015_en (last accessed on 18 November 2016).
[4] European Commission (2015) Commission Work Programme 2016 'No time for business as usual'. Strasbourg, 27 October 2015, COM(2015) 610 final.
[5] In his October 2014 speech to the European Parliament, Commission President Jean-Claude Juncker declared his ambition for the EU to achieve what he called a 'social triple A' rating, in parallel to being 'triple A' in the financial sense. See also the Five Presidents' report, available at: https://ec.europa.eu/priorities/sites/beta-political/files/5-presidents-report_en.pdf (last accessed 20 October 2016).
[6] European Commission (2016) Towards a European Pillar of Social Rights – Questions and Answers. Factsheet, Strasbourg, 8 March 2016. Available at: http://europa.eu/rapid/press-release_MEMO-16-545_en.htm (last accessed on 20 October 2016).
[7] First preliminary outline of a European Pillar of Social Rights, Annex accompanying the European Commission's Communication 'Launching a consultation on a European Pillar of Social Rights'. Strasbourg, 8 March 2016, COM(2016) 127 final. Available at: http://ec.europa.eu/social/BlobServlet?docId=15274&langId=en (last accessed on 25 November 2016).
[8] European Commission's Communication 'Launching a consultation on a European Pillar of Social Rights'. COM(2016) 127 final. Available at: http://eur-lex.europa.eu/legal-content/EN/TXT/?qid=1457706909489&uri=COM:2016:127:FIN (last accessed on 25 November 2016).
[9] The Pillar is conceived to be established within the euro area, but would also be open for other Member States to join on a voluntary basis.
[10] Commission Work Programme 2016. *Op. cit.*

The principles presented in the Pillar are grouped according to 20 policy domains[11], which according to the Commission are essential for well-functioning and fair labour markets and welfare systems. These 20 policy domains are classified under three chapters:

Chapter I: Equal opportunities and access to the labour market (policy domains 1-6)
Chapter II: Fair working conditions (policy domains 7-10)
Chapter III: Adequate and sustainable social protection (policy domains 11-20)

With this paper, the European Social Network (ESN) contributes to the consultation launched by the European Commission on the Pillar in March 2016[12]. The paper starts by describing the key social priorities put forward by the members of ESN's Reference Group on the European Semester[13]. It then assesses the trends that have been leading to the transformation of social welfare systems over recent years. Next, the paper undertakes an assessment of the challenges described under chapter III on adequate and sustainable social protection of the proposal made by the European Commission. Finally, the paper makes suggestions for implementation and monitoring as well as proposals as to how the principles put forward by the Commission could be revised or strengthened.

Key social priorities

A number of recurring themes have been highlighted by the members of ESN's Reference Group on the European Semester regardless of their social welfare systems. These are: the fallout from the financial crisis, the availability of childcare and the development of family-based approaches in child protection, youth and long-term unemployment, support for people with severe mental health problems and disabilities, housing problems and the impact of the refugee crisis on public services. These common themes have been identified through both cross-country and country-specific analyses. It also reinforces all the more the need for EU-wide efforts to encourage mechanisms, which promote better systems and service provision for, in particular, vulnerable groups across Member States.

The fallout from the financial crisis remains significant for a number of countries. Where this is the case, the consequences across social services are not only serious but enduring, impacting families and vulnerable groups across the board. A central point is the risk of this situation becoming 'the new normal' and the danger that vital investment and innovation could be abandoned. Tension between national, regional and local administrations and systems continues in many if not all states. Restructuring, mostly for fiscal priorities, appears to dominate many strategies.

The availability of childcare for the most disadvantaged children varies significantly across countries. The report's findings emphasise that quality, coverage and intensity of early

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[11] 'Launching a consultation on a European Pillar of Social Rights'. *Op.cit.*
[12] Public consultation on the European Pillar of Social Rights. Available at: http://ec.europa.eu/priorities/deeper-and-fairer-economic-and-monetary-union/towards-european-pillar-social-rights/public_en (last accessed on 25 November 2016)
[13] As part of its four-year strategy 2014-2017, the European Social Network launched a Reference Group to give greater prominence to social issues and the challenges faced by social services in the framework of the European Semester, the cycle of economic and social policy coordination between the EU and its Member States. The members of the Group hold managerial responsibilities in local and regional authorities, where they plan, manage and implement social services within social care and social work professional associations.

childcare are still low in many Member States. Though progress has been recorded in terms of coverage, the cost of childcare is still high for poorer families, which impacts on parental employment and decisions on whether children should be cared for at home. When it comes to child protection, a significant move towards prevention has been made, eg through the introduction of family support workers to prevent children from being taken into care. However, while a significant number of children are still cared for in institutions, further work is needed to improve foster care for the most vulnerable children, in particular those with disabilities.

The impact of the crisis on employment is still reverberating. Clearly, youth unemployment and long-term unemployment are a cause for considerable concern in several Member States. However, ESN members have highlighted the issue of how 'activation' has become the guiding principle for the configuration of employment policies and services. The findings of ESN's EU Semester report for 2016[14] suggest that there is a need to develop broader social inclusion strategies along the lines of the concept of social sustainability, meaning that social policies should aim to not only include people in the labour market but also improve their overall quality of life. Minimum income schemes appear to feature prominently in some countries as a tool for mitigating poverty. This is the case in The Netherlands, where a pilot programme is being implemented in various municipalities to test a universal basic income scheme, and in Finland where a similar trial will take place in 2017.

The issue of **supporting people with several mental health problems and with disabilities**, in particular for those with complex or multiple disabilities, presents an enduring set of challenges, not least of which are poverty and deinstitutionalisation. Even where there is progress, it is too slow. Therefore, it is important that this issue does not slide down the list of priorities as public budgets continue to come under threat.

Housing exclusion has been increasingly referred to as a prominent issue. Problems related to housing are no longer limited to the most disadvantaged groups. They increasingly affect more people from middle classes. With many urban areas identified as unaffordable and with difficulties in the social housing sector including overall stock, this is clearly a central theme that will be salient across Member States in years to come.

The refugee crisis and its impact on public services has come to be a major consideration for a number of countries over the past year, and has been apparent throughout the work carried out by ESN in 2016[15]. Members States' reactions to the refugee crisis were extremely uneven. In the absence of shared responsibility, the issue has transferred down onto the local level. There is a will in many places to try and provide the best care, support and training to promote refugees' social integration. However, against a backdrop of strained resources, it is certainly a major challenge to progress in terms of service provision and social integration. The refugee crisis has placed great pressure on social services in the countries welcoming high numbers of refugees, and there is still a great deal of uncertainty

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[14] ESN: Connecting Europe with local communities: social services priorities for the European Semester 2017 (2016). Available at: http://www.esn-eu.org/publications/index.html (last accessed on 14 December 2016).
[15] See ESN's paper: The impact of the refugee crisis on local public social services in Europe (2016). Available at: http://www.esn-eu.org/publications/index.html (last accessed on 14 December 2016).

about how the situation will develop. As the current situation in Syria, Iraq and African countries remains unresolved, Europe could face continued and new waves of refugees.

Despite these challenges, including budget constraints, it is worth highlighting that there continues to be considerable **innovation** in every country. Alongside this, it is clear that the consistency of service provision and evidence-based practice are things those working in the social services sector want to see more of - and something service users stand to gain from. Ensuring, and drawing upon, **evidence and evaluation** across the whole sector and throughout local, regional and national levels has been highlighted as a priority for all.

Recent welfare trends

A welfare state is a governmental system in which the state plays the key role of protecting and promoting the wellbeing of its population. It does so through the organisation of social protection and inclusion in the form of benefits and social services, health, employment support and education. Although welfare states differ throughout Europe, there are similar trends that have influenced public service provision. These include demographic ageing, the marketisation of service provision, user involvement and users' choice, and service co-production.

Demographic ageing

Due to the ageing population, Member States across the EU have had to deal with trade-offs between increasing financial constraints and increasing needs. In many countries, long-term care needs are only partly addressed by public service provision and responsibility for care also lies with service users and their families. Many countries in Europe have been refocusing on care provision by families in their recent long-term care policies[16]. This new policy orientation might provide an answer to the growing demand for long-term care and the rising cost of its provision. However, it might be perceived as a step back on measures taken towards greater professionalisation of the sector and female participation in the labour market as they are generally the ones performing informal care, as pointed out by the Commission's proposal.

In addition, long-term care policies have been focusing on increasing home care through cash payments or benefits in kind for service users, in order to reduce the number of people in need of support in residential care. Home support often requires additional resources provided by family members, especially women, volunteers and neighbours. This workforce at home or at community level needs to be considered when planning integrated services for children and families, for labour market participation and for older people. Financial and social support and skills training are needed to better equip informal carers for their care duties.

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[16] Ranci, C.; and Pavolini, E. (2015): Not all that glitters is gold: Long-term care reforms in the last two decades in Europe, Journal of European Social Policy, Vol. 25:3, pp. 270–285.

The marketisation of public service provision

The responsibility for service provision, that is to say, whether services should be provided by the state or by the private market, has been a topic for discussion in recent years. The tendency towards service provision by non-public entities was promoted by the 'New Management Approach' that emerged under the Thatcher and Reagan governments in the 1980s in the UK and in the US. It argues for a more effective and efficient service and benefits provision in a market where increased competition should ensure lower costs.

This market of private providers (both for-profit and not for-profit) can be stimulated by the state by contracting or enabling service users to buy services with vouchers or cash payments. Moreover, the approach argues for fewer input controls and a stronger focus on performance and impact. Under the 'New Public Management' approach, service users are considered as customers and civil servants as service managers. For example, in active labour market policies introduced by many European states, the civil servant acts as a case-manager by ensuring the accessibility of various services for the unemployed, with the aim to integrate the person into the labour market as soon as possible.

This approach corresponds with a more coordinated provision of benefits, employment support and access to social services as suggested by the European Commission in its Recommendation on active inclusion to Member States[17]. The Recommendation proposes that national governments develop strategies that integrate the provision of income support, employment support and access to quality services, including childcare, housing, debt counselling and health services.

'New Public Management' has also affected the universal model of welfare provision in Scandinavian countries. For example, the 'Act on Free Choice Systems' in Sweden was introduced in 2009 to encourage municipalities to implement voucher models that support service user choice and higher competition between service providers. In England and Sweden, the criteria for accessing care for older people were amended to focus on those most in need and on home care, and this led to an increase in non-public service providers.

In England, the 2006 Childcare Act on early years and childcare formalises the strategic role of local authorities in organising the local childcare market in the aim to 'close the gap' between the most and least well off children. The Act relies mainly on the logic of the private market as local authorities are not supposed to provide childcare directly but rather to work with private providers, local authority provision being the last resort[18].

The 'New Public Management' approach has been criticised with the arguments that private sector methods such as standardisation do not reflect the individual circumstances in social work, and that the aim to increase productivity can have a negative impact on working conditions and service quality[19]. It has been argued that in Sweden, this approach led to a

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[17] European Commission (2008) Recommendation of 3 October 2008 on the active inclusion of people excluded from the labour market. Available at: http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2008:307:0011:0014:EN:PDF (last accessed on 18 November 2016).

[18] Brennan, D; Cass, B.; Himmelweit, S.; and Szebehely, M. (2012) The marketisation of care: rationales and consequences in Nordic and liberal care regimes, Journal of European Social Policy, 22:4, pp. 377-391. Available at: http://esp.sagepub.com/content/22/4/377.full.pdf (last accessed on 18 November 2016).

[19] Buestrich, M.; and Wohlfahrt, N. (2008) Die Ökonomisierung der sozialen Arbeit, Aus Politik und Zeitgeschichte (The Economisation of Social Work, From Politics to Contemporary History), Bundeszentrale für politische Bildung (Federal Agency

standardisation of tasks and to a larger number of service users per care worker[20]. In addition, the provision of for-profit childcare has caused debates in Sweden with opponents stressing that it threatens quality and could lead to class-based segregation[21]. However, marketisation can lead to strong advocacy for service users' choice.

Service Users' Choice

Choice for service users contrasts with the traditional approach to welfare, as it empowers service users to decide which services they wish to use. Associations of people with disabilities in England, Sweden and Denmark have played a major role in advocating for more freedom of choice and flexibility[22]. Some reforms in adult social care, such as the Support and Services Act 1994 (for persons with functional impairments) in Sweden (revised by the Social Insurance Act in 2010) or the 1996 Community Care (Direct Payments) Act in the UK intended to provide more choice to service users through monetary transfers.

In long-term care, a number of states introduced reforms based on direct payments to service users, such as Germany's universal long-term care insurance, the APA ('Personal Allowance for Autonomy') in France and the Act on the Promotion of Personal Autonomy and Care for Dependent Persons (also called 'Dependency Act') in Spain[23]. In Poland, there are discussions on whether to implement a system of choice, also in order to enhance formal care and boost the care market. As highlighted above, Sweden introduced a 'freedom-of-choice' system in 2009 encouraging municipalities to promote service user choice via a voucher system.

The idea behind this model is that service users should be provided with purchasing power to establish new social care markets. Although direct payments and voucher systems enable service user choice, the marketisation of services may lead to complex care markets, which may be more difficult for service users to access. In many cases, the main incentive is not the empowerment of service users but cost containment in the expenditure of public funds under the idea that competition between private providers should bring costs down[24].

The fact that local authorities are now increasingly purchasing rather than providing services directly can lead to a fragmentation of the care market through the multiplication of private providers. In addition, the development of private care markets might hinder the ability of public authorities to plan and coordinate the provision of services by multiple stakeholders. Local case managers must balance the promotion of free choice for service users and competition between private providers, who compete against each other to bid for services.

Finland is about to engage in a far-reaching reform of its health and social care system by introducing the free choice model. However, ESN's Danish members warn about the

for Civic Education), pp. 17-24. Available at: http://www.bpb.de/apuz/31339/dieoekonomisierung-dersozialen-arbeit?p=all (last accessed on 18 November 2016).

[20] Ranci, C.; and Pavolini, E. (2015): Not all that glitters is gold: Long-term care reforms in the last two decades in Europe, Journal of European Social Policy, Vol. 25:3, pp. 270–285.

[21] Brennan et al. *Op.cit.*

[22] Brennan et al. *Op.cit.*

[23] European Social Network (2013): Independent living: making choice and control a reality, pp.16-17. Available at: www.esn-eu.org/raw.php?page=files&id=846 (last accessed on 18 November 2016).

[24] Brennan et al. *Op.cit.*

detrimental effect that free choice may have on service users. Whilst the free choice model can increase freedom of choice for users and lower costs due to increased competition from private providers, evidence from Denmark, Sweden, the UK and Finland[25] suggests that it can also lead to poorer performance, poorer service coordination and eventually, poorer outcomes for users. For example, several private social services providers in Denmark and the Netherlands[26] have gone bankrupt in the past few years leaving people using their services in a state of uncertainty and vulnerability.

Co-production

In times of increasing demand for services caused by demographic change, coupled with pressure on public resources, the concept of co-production asks what role service users and the wider population play in service provision and how this correlates with the role of the state and the services market.

Co-production argues that the recipient of the services and people in the wider community also play an active role in the delivery of public services. It is based on joint service delivery by the service user and the provider and on the active involvement and participation of citizens[27]. For example, the involvement of children and the need to listen to them in the provision of children's services has been strengthened by a shift to recognise children as agents of their own life[28].

Therefore, co-production differs from the traditional model of public service production where only public officials are responsible for designing and providing services. Co-production is linked to the transfer of responsibilities for service management and delivery to the local level, as municipalities are most in touch with peoples' needs and concerns.

Among recent examples, we could mention the decentralisation reform in the Netherlands[29] that aims to involve volunteer and community organisations in supporting vulnerable people, or draft bills put forward by the Spanish government to strengthen its third and social volunteering sectors[30].

Co-production aims for more participative forms of service provision and closer involvement of community and voluntary organisations, and may lead to a reduction of costs, higher

[25] See for instance: Junnila et al (2016); Sinervo et al (2016) National Institute for Health and Welfare - THL; Brommels et al (2016) expert group of the Ministry of Social Affairs and Health; Heikki Hiilamo and Martti Kekomäki University of Helsinki

[26] See Country profile – Netherlands (p.56) in Doyen, M., Lara Montero, A., Connecting Europe with local communities: social services priorities for the European Semester 2017, The European Social Network, Brighton, 2016.

[27] Pestoff, V. (2011) Citizens and coproduction of welfare services: childcare in eight European countries, in: Pestoff, V., Drandsen, T.; and Verschuere, B. New public governance, the third sector, and coproduction, pp. 1-20. Available at: emes.net/content/uploads/publications/co-production_chapter_pestoff.pdf (last accessed on 18 November 2016).

[28] Davis, J.; Ravenscroft, J.; McNair, L.; and Noble, A. (2012) A framework for European collaborative working, inclusive education and transition: analysing concepts, structures and relationships. Available at: http://www.enableireland.ie/sites/default/files/publication/FIESTA_Literature_Review_v6_9_12.pdf (last accessed on 18 November 2016).

[29] Organisation for Economic Cooperation and Development (2014) Territorial reviews: Netherlands. Executive summary. Available at: http://www.oecd.org/gov/regional-policy/netherlands-executive-summary.pdf (last accessed on 18 November 2016).

[30] European Social Policy Network (2015) For the Netherlands: Labour market activation: Recent developments in the making of a profession. Available at: http://ec.europa.eu/social/BlobServlet?docId=13845&langId=en (last accessed on 18 November 2016). For Spain: Progress towards a legal framework for the social action third sector and new regulation on volunteering. Available at: http://ec.europa.eu/social/BlobServlet?docId=13841&langId=en (last accessed on 18 November 2016).

service quality and a more democratic process by involving people in public policy. Co-production is also a pre-condition for personalisation, which is the shaping of services around the needs of service users.

As well as service users, civil society and public authorities, private companies must also be included when considering co-production and service delivery. In a context of decreasing public resources, private companies may play a significant role through their Corporate Social Responsibility (CSR) policies in integrating vulnerable people in the labour market. This may happen through new forms of partnerships, apprenticeships and other mentoring strategies.

Decentralisation

Some European countries have recently introduced laws that give more responsibility for the organisation of care to local authorities. In Sweden, the 1992 'Ädel reform' made municipalities completely responsible for the care of older and disabled people. Municipalities also became responsible for patients ready to leave hospital and are obliged to pay fees if a patient stays in hospital longer than needed. Since then, cooperation and coordination between municipalities and health authorities has moved on, albeit not without friction and regional variations. There is legislation which has recently been proposed on safe and effective care planning prior to discharge from hospital, which calls for even more coordination and cooperation with the focus firmly on the 'patients' needs'.

In England, the 2014 'Care Act' has given local authorities new legal responsibilities to provide care and support services focused on service user empowerment, choice, and control. Local authorities are "expected to shape the market primarily through commissioning quality, outcomes-based services focused on wellbeing"[31].

In the Netherlands, major changes in the social sector happened in January 2015 with an important devolution of tasks from the national to the local level as the 'Youth Act', the 'Participation Act', and the 'Social Support Act' entered into force. Local authorities became responsible for the provision of welfare services, youth care, personal care, work and income.

Decentralisation in the social and health sector is the most visible example of major welfare reforms occurring in European countries over the past few years, and has represented a considerable shift in the way public policies are planned and delivered. The shift involves not only the devolution of competences and resources to the local level, but local authorities are also required to work in an even more integrated way, especially because they have to cope with less financial resources.

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[31] Local Government Association (2014) Guide to the Care Act 2014 and the implications for providers, pp.10. Available at: http://www.local.gov.uk/documents/10180/6869714/L14-759+Guide+to+the+Care+Act.pdf/d6f0e84c-1a58-4eaf-ac34-a730f743818d (last accessed on 18 November 2016).

Crisis and fiscal constraints

In many countries, the economic and financial crisis resulted in increased demand for social services, coupled with reductions in public expenditure. In 2014, compared to 2008, around 9 million more people were out of work and the number of people at risk of poverty and social exclusion rose by more than 6 million[32]. Social protection expenditure played an important role in cushioning the impact of the crisis, the effects of which on employment and income were smaller in countries with efficient social protection systems, activation measures linked to benefits, greater availability of training and the use of part-time working arrangements[33].

In countries most affected by high unemployment and fiscal consolidation, social services have dealt with an increased number of service users (many were new service users, not in need of services before the crisis), reductions in their budgets and changing working conditions with reductions in staff numbers and salaries[34].

Furthermore, the implementation of reforms has sometimes been delayed or postponed. In Spain, the implementation of the long-term care reform 'System of personal autonomy and assistance to persons in situations of dependence (SAAD)' was delayed and some benefits were reduced[35]. In Italy, local authorities have undergone severe financial cuts in social care, while waiting times to access benefits have increased[36].

Local authorities have had to find ways to react to smaller budgets and increasing demand whilst maintaining service accessibility. Most of them have had to concentrate on critical services, while access to services, benefits and eligibility criteria were tightened[37]. These developments have caused a 're-thinking' process of public service provision by finding efficiencies and savings through enhanced service cooperation.

Assessment of the principles proposed by the Pillar

The proposal for the Pillar could be compared to a compass that could help find a balance between social and economic policies. This is particularly necessary since due to the financial crisis over the past eight to ten years, divergence has been growing between Member States, who had been otherwise converging throughout the previous 30 years. Therefore, the Pillar should aim to support EU social welfare systems' resilience to prevent a crisis similar to the last and promote upward convergence between Member States.

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[32] European Commission (2015) Employment and Social Developments in Europe 2014. Available at: http://ec.europa.eu/social/BlobServlet?docId=13404&langId=en (last accessed on 18 November 2016).
[33] European Commission (2015) *op.cit.*
[34] European Social Network (2015) Public social services in crisis: challenges and responses from 2008-2014: a response from ESN members. Available at: http://www.esn-eu.org/userfiles/Documents/2015/2015_Public_Social_Services_in_Crisis_report_-_FINAL.pdf (last accessed on 18 November 2016).
[35] European Commission and the Social Protection Committee (2014) Adequate social protection for long-term care needs in an ageing society. Available at: http://ec.europa.eu/social/BlobServlet?docId=12808&langId=en (last accessed on 18 November 2016).
[36] Ranci, C.; and Pavolini, E. (2015) op.cit.
[37] European Social Network (2015) op.cit.

Back in 2011, Frank Vandenbroucke[38] spoke of the need for the EU to have a social investment pact. Five years later, the European Commission is trying to find a formula which will help guide policies to improve social welfare systems' performance across the EU. As in 2011, ESN believes that social welfare systems should fulfil a three-fold function: social investment, social protection and the stabilisation of the economy and include principles and programmes addressing the difficulties that people may face in their lives.

From the way the current proposal has been formulated there is a risk that social rights are understood as collective rights conferred by employment status. However, **social rights are individual rights** that apply to people of all ages and to everyone, not just those in employment. Following this logic, a proposal for a social rights pillar should not identify these solely with employment rights. While employment rights are important, the proposal should emphasise that social rights apply to people of all ages and to everyone, regardless of whether they are in employment. Therefore, the proposal should be re-worded along the lines of the life course approach, which was put forward by the Social Investment Package[39] in 2013.

When it comes to promoting adequate social protection, we would like to see that the Pillar recognises that public authorities have **a duty of care** towards the **individual along the life-course**. This would ensure that the **social protection principles** of the Pillar are made **relevant** for **local authorities**, who in most European countries have the statutory duty of protecting the most vulnerable along the life-course.

For instance, key statutory duties of public social services include working with vulnerable families, families in need of housing, children who need to be protected from harm, protecting and safeguarding vulnerable adults with a disability, providing care and support for frail older people. **A key challenge is to make sure that the provisions in the Pillar resonate with these statutory duties at local level** so that the proposal does not remain a bureaucratic exercise and **trickles down** from the EU **to the local level**.

The Pillar could be useful to establish long-term strategic objectives, promote greater consistency between policy measures and lead to the setting of minimum social standards across European countries. However, the proposed Pillar structure is not clear on how it would address the issues highlighted under the proposed principles, given the fact that they are often dealt with by different government departments at different levels.

Investing in children, improving outcomes

The Commission's proposal in the field of children focuses on childcare as a tool to enhance the cognitive and social development of children, their educational and labour market prospects (particularly for those living in disadvantaged households), and as a tool to encourage parental employment, especially for women. Therefore, the Commission

[38] Vandenbroucke, F., Hemerijck, A. and Palier, B. (2011) The EU Needs a Social Investment Pact, OSE Paper Series, Opinion paper No. 5.
[39] European Commission (2013) A Communication on Social Investment for Growth and Cohesion. Available at: http://ec.europa.eu/social/BlobServlet?docId=9761&langId=en (last accessed on 13 December 2016).

proposes that Member States guarantee access to quality and affordable childcare for all children and specific measures are taken to encourage attendance of children with disadvantaged backgrounds. While ESN agrees with the analysis and principles put forward, it seems as **if children's rights are largely shoehorned into childcare and parental employment**. Therefore, we suggest broadening the current principles along the lines of the 2013 European Commission's Recommendation on 'Investing in children' focusing on children's access to resources, quality services and their right to participation in society[40]. Below, we present specific proposals as to how this may be done with a focus on additional considerations regarding **inclusive education** and care as well as **protection for children at risk.**

In our recent report *Investing in Children's Services, Improving Outcomes*[41], we undertook an assessment of children's services in 14 European countries. For early childcare services, the report highlights the importance of the quality, coverage and intensity of children's services as key principles to ensure successful outcomes for children. The importance of universal availability of affordable childcare should be stressed, particularly for children of low socio-economic status, who are less likely to be enrolled in such programmes. While the provision of a comprehensive system of childcare is costly, it may account for 2% of GDP[42], most of the outlay would be recovered through greater tax revenue from working parents and productivity gains on the behalf of a better-educated population[43]. However, to ensure positive educational outcomes, the report stresses the need to follow up investment in early childcare with investment in schools, but suggests that this is not always the case. Therefore, the Pillar should emphasise the importance of **transition** for children from pre-school to school and recognise that **investment in early childcare needs to be followed up with investment in schools** to improve educational outcomes for children.

Moreover, some countries continue to make heavy use of special schools for children with disabilities and additional educational needs. Due to the lack of investment for additional support in mainstream schools, special schools are sometimes considered (even by families and children themselves) as better alternatives. It is therefore important that the Pillar recognises **the need to invest in strengthening support for mainstream schools** so that they can accommodate children with special needs, as this is the way to ensure that all **children grow up in an inclusive environment**.

In terms of alternatives to traditional, institutional care for children needing a high level of support our study found that many countries were increasingly focusing on prevention – making every effort to keep the child with their family – and were introducing foster care legislation for those unable to remain in the family home. However, there are still thousands of children in institutional care across Europe. Though legislation usually favours keeping the child within the family and placement may be implemented as a last resort, there is still a worrying trend to place children in long-term residential facilities, when kinship and professional foster care could still be further developed.

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[40] European Commission (2013) Investing in children: breaking the cycle of disadvantage. Available at: http://ec.europa.eu/justice/fundamental-rights/files/c_2013_778_en.pdf (last accessed on 13 December 2016).
[41] Lara Montero, A. (2016) Investing in Children's Services, Improving Outcomes. European Social Network, Brighton, United Kingdom. Available at: http://www.esn-eu.org/publications/index.html (last accessed on 18 November 2016).
[42] Ibid.
[43] Esping-Andersen G. (2009) The Incomplete Revolution. Policy Press, Cambridge, UK.

Support for unaccompanied children inescapably shaped much of the discussion at the launch of ESN's report *Investing in Children's Services, Improving Outcomes*[44]. Concerns centred not only on the welfare of these children, but also on their potential risk of radicalisation due to the conditions of poverty and social exclusion that they may face, and how services can ensure they are socially included and make them active participants in community life. Responding to the needs of unaccompanied children has put great strain on the resources of public services. Municipalities have faced shortages of emergency foster care homes and residential accommodation, school places and interpreters. Our Swedish member explained that many social workers had been required to work extensive overtime and some had been brought back from retirement.

The above shows that there is a whole body of evidence as to why **the Pillar should have a focus on children's rights.** Both the United Nations Convention on the Rights of the Child (UN CRC), to which all EU Member States have signed up, and the EU Charter for Fundamental Rights recognise that "the child's best interests must be a primary consideration[45]", when public authorities assess the need to provide children with care and protection. Therefore, it would be advisable that the Pillar recognises that **all children in need of care, regardless of their legal status, should grow up in a family environment.**

Enhancing support for disadvantaged youth

As highlighted above, the Pillar should recognise that investing in early childcare needs to be followed up with investment in education to break the inter-generational transmission of disadvantage and address the difficulties faced by the most vulnerable young people. These include young people dropping out of school, young people leaving care, young migrants and young offenders.

Young people in Europe are disproportionately more likely to be suffering from the economic crisis. More than 4.5 million young people (approximately 20%) are unemployed today in the EU[46], and long-term youth unemployment is still at record highs. Their patterns of employment are often characterised by temporary, part-time or temporary work, in particularly for some of the groups listed above. Disadvantaged young people are more likely than young people in general to not be in employment, education or training, be socially excluded, homeless or overrepresented in the prison population.

Several EU legal provisions are relevant for vulnerable youth, including the 2011 Council Recommendation on policies to reduce early school leaving[47], the 'Moving Youth into Employment' Communication from the Commission[48] and the Europe 2020 Strategy

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[44] This event took place on 30-31 May 2016 in Brussels. See more at: http://www.esn-eu.org/events/84/index.html
[45] EU Charter of Fundamental Rights, article 24.
[46] Eurostat, Unemployment statistics. Available at: http://ec.europa.eu/eurostat/statistics-explained/index.php/Unemployment_statistics#Youth_unemployment_trends (last accessed on 13 December 2016).
[47] Council Recommendation of 28 June 2011 on policies to reduce early school leaving. Available at: http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:C:2011:191:0001:0006:en:PDF (last accessed on 13 December 2016).
[48] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions (2012) Moving Youth into Employment. Available at: http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52012DC0727&from=EN (last accessed on 13 December 2016).

objective of reducing the early school leaving rate below 10%[49]. However, the social protection chapter of the European Commission's proposal does not refer to the most vulnerable young people. Therefore, ESN suggests that the Pillar acknowledges that **vulnerable young people should have access to preventive and targeted support**.

Examples of this support may take several forms but should always be part of a coordinated and combined effort between social services and housing, mental health, education and employment services. In order to ensure that the Pillar gives visibility to young people, ESN suggests that the Youth Guarantee is reinforced with a **'care guarantee'** for vulnerable young people, such as care leavers, that could take the form of a one-stop-shop mechanism providing them with information, guidance, support and services[50].

Promoting social inclusion for adults with mental health problems and disabilities

In its assessment, the Commission does not make a reference to people with mental health problems, but highlights that people with disabilities are at a much higher risk of poverty and social exclusion than the general population, face the lack of adequate accessibility in the work-place, and suffer from tax-benefit disincentives. The Commission also underlines that the availability of support services can affect their capacity to participate in employment and community life.

Therefore, the Pillar proposes that persons with disabilities have access to enabling services and basic income security so that they have a decent standard of living and that the conditionality of benefits does not create additional barriers to their employment. The Commission could go further and suggest that Member States invest in programmes promoting the participation of people with mental health problems and disabilities in the competitive labour market through Individual Placement and Support (IPS) schemes, which are deemed to be more effective in promoting active and social inclusion than traditional sheltered workshops[51].

ESN would also suggest enlarging the Commission's assessment to include issues around institutionalisation, which tends to create parallel structures in communities, preventing people with disabilities from fully participating in society. Despite the fact that the EU and 27 of its Member States (all bar Ireland) have ratified the UN Convention on the Rights of Persons with Disabilities (UN CRPD), **disability is not mainstreamed in the proposed Pillar**, since persons with disabilities mainly appear as recipients of care and social benefits instead of being considered active citizens.

As a result, ESN suggests that the Pillar acknowledges that **people with mental health problems and people with disabilities should be supported to live independently and participate actively in the life of their communities**. This goes in line with art. 19 of the

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[49] European Commission (2011) Europe 2020 targets. Available at: http://ec.europa.eu/europe2020/targets/eu-targets/index_en.htm (last accessed on 25 November 2016).
[50] European Social Network (2016) The key role public services play in supporting care leavers' transition to adulthood. Available at: http://www.esn-eu.org/news/848/index.html (last accessed on 13 December 2016).
[51] European Social Network (2011) Mental Health and Wellbeing in Europe. Available at: http://www.esn-eu.org/raw.php?page=files&id=39 (last accessed on 13 December 2016).

UN CRPD, which states the right of people with disabilities to measures "designed to ensure their independence, social and occupational integration and participation in the life of the community", as well as art. 26 of the EU Charter of Fundamental Rights[52].

Already in motion in all EU countries, the deinstitutionalisation process (understood as the transition from institutional to community-based care) should be supported by the development of person-centred, community-based services[53]. Here, the European Union's Structural and Investment Funds and especially, the European Social Fund, are particularly relevant when it comes to developing services in the community and (re)training health and social care professionals.

At the EU level, 49% of persons with a severe disability aged 16-64 are at risk of poverty or social exclusion. This same rate is 32% for persons with a moderate disability and 22% for persons without disabilities. Such data "reveal the urgency to act in favour of persons with severe disabilities"[54].

Being able to work is a significant component of social inclusion. People with disabilities who work emphasise how important their job is for their lives. However, employment rates of people with disabilities remain lower than for other groups, ranging from 20% (Croatia) to 59% (Sweden). At the EU level, the employment rate of severely disabled people is 28%, for persons with a moderate disability it is 55% and for non-disabled, it is 72%. There is a difference of 27 percentage points between persons with severe disabilities and moderate disabilities[55]. For people with learning disabilities the rate of employment is only marginal, despite them expressing a clear willingness to work. In the United Kingdom in 2012, it was estimated that 65% of people with learning disabilities would like a paid job[56]. However, only 7% of them were said to be in some form of paid employment.

Numerous examples have also proved that employing people with disabilities is both possible and financially beneficial. People who work in the open labour market can support themselves without relying extensively on social benefits, thus lifting the pressure weighing on social welfare systems. Their wellbeing is improved; they are less isolated because they are included in the community. In the Netherlands, the Locus Network works with local authorities' social services and companies to adapt jobs in companies for people with disabilities[57]. By reassigning and rationalising tasks, substantial savings have been made, without companies having to rely on financial incentives to hire people with disabilities. In

[52] "The Union recognises and respects the right of persons with disabilities to benefit from measures designed to ensure their independence, social and occupational integration and participation in the life of the community" in EU Charter of Fundamental Rights (2012). Available at: http://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:12012P/TXT (last accessed on 14 December 2016).

[53] See *Common European guidelines on the transition from institutional to community-based care.* Available at: http://deinstitutionalisationguide.eu/ (last accessed on 18 November 2016).

[54] Stefanos Grammenos (2013) European comparative data on Europe 2020 & People with Disabilities. Final report prepared by Stefanos Grammenos from Centre for European Social and Economic Policy (CESEP ASBL) on behalf of the Academic Network of European Disability Experts (ANED). Available at: http://digitalcommons.ilr.cornell.edu/gladnetcollect/568?utm_source=digitalcommons.ilr.cornell.edu%2Fgladnetcollect%2F568&utm_medium=PDF&utm_campaign=PDFCoverPages (last accessed on 18 November 2016).

[55] Stefanos Grammenos (2013) *op.cit.*

[56] Department of Health's Adult Social Care Outcomes Framework (2012). Quoted by the Foundation for people with learning disabilities.

[57] European Social Network (2015) Active inclusion of people with disabilities: the role of public social services. Available at: http://www.esn-eu.org/news/729/index.html (last accessed on 18 November 2016).

Aarhus (Denmark), a local programme has placed 100 people with learning disabilities and mental health problems at work with social services support. This has resulted in an annual saving of EUR 500,000[58] for social services.

Therefore, ESN suggests that the Pillar recognises that **people with disabilities should be supported in an integrated fashion** (along the lines of the 2008 European Commission's Recommendation on Active Inclusion[59]) **to secure and retain jobs in the open labour market.** This is both in the interest of persons with disabilities, employers, governments, and society at large. This principle goes alongside art. 27 of the UN CRPD: "persons with disabilities have the right to work. This includes "[gaining] a living [...] in a labour market and work environment that is open, inclusive and accessible[60]".

Integrating benefits and services for the long-term unemployed

In its Pillar proposal, the Commission highlights that the multiplicity of benefits and services, agencies, and application procedures may make it difficult for people to access the support they need. Therefore, better integration of social benefits and social services would be advisable to reduce poverty and support effective social and labour market integration. This is particularly the case for those facing multiple disadvantages, such as those who have been long-term unemployed, ie out of work for more than 12 months. ESN agrees with the Commission's proposal which requests Member States improve coordination between social protection benefits and social services to strengthen the consistency and effectiveness of measures supporting active and social inclusion.

Here the Pillar should emphasise that **people who have been long-term unemployed often need a complex set of interventions that go beyond employability**[61]. Access to quality public social services is key to supporting these people with their individual challenges and to find them suitable training or employment. 'Negative' labour market activation incentives, such as financial sanctions, are unlikely to prove effective in the long-term and may drive vulnerable people into precarious work or into poverty, unless they are accompanied by personal advice and support services that are of adequate quality[62]. In Denmark, Diop-Christensen questions the effectiveness of harsh benefit sanctions in the long run. Although these can incentivise long-term unemployed people to take up employment, they rarely do so for more than three months[63].

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[58] Originally expressed as DKK 3.5 million. Source: City of Aarhus, Department of Employment.
[59] European Commission (2008) Recommendation of 3 October 2008 on the active inclusion of people excluded from the labour market. Available at: http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2008:307:0011:0014:EN:PDF (last accessed on 18 November 2016).
[60] UN CRPD – Article 27 - Work and employment.
[61] European Social Network (2015) Looking ahead – Local public social services priorities for the European Semester 2016, p.26. Available at: http://www.esn-eu.org/raw.php?page=files&id=1868 (last accessed on 25 November 2016).
[62] Ibid.
[63] Diop-Christensen, A. (2015) Is 'making work pay' effective for the 'unemployable'? The impact of benefit sanctions on social assistance recipients in Denmark, Journal of European Social Policy 2015, Vol. 25(2) 210–224. Available at: http://esp.sagepub.com/content/25/2/210.full.pdf+html (last accessed on 18 November 2016). This analysis presents the Danish policy that sanctions married recipients of long-term social assistance if they fail to meet the requirement of working at least 300 hours over a two-year period, by removing the social assistance payments for one of the spouses altogether.

In 2014, about 5% of the EU population of working age was long-term unemployed[64]. Many long-term unemployed people do not receive adequate support or are not eligible because they are not officially registered as unemployed[65]. Generally, social or unemployment assistance replacement rates in EU Member States for the long-term unemployed are lower than unemployment insurance benefits for the short-term unemployed. Some countries have very low levels of unemployment assistance, such as Slovakia with a net replacement rate[66] of just 7%, clearly putting recipients at risk of deprivation[67]. Coverage may also be a cause for concern. In 2011, 48.2% of the long-term unemployed in Spain received no social benefits at all[68].

In October 2015, the European Commission proposed Member States a Recommendation with measures to address long-term unemployment[69]:

- Encourage the registration of the long-term unemployed with an employment service;
- Offer the long-term unemployed an individual in-depth assessment of their needs and employment prospects after 18 months of unemployment at the latest;
- Offer them a job integration agreement, an individualised plan to bring them back to work which might include job search assistance, training, work experience, mentoring, debt counselling, rehabilitation, child and health care services, migrant integration support, housing and transport support.

ESN supports these recommendations but suggests that the individual assessment and subsequent joint support takes place as soon as someone becomes unemployed, since the longer people are unemployed, the more they become susceptible to suffer from a "skills atrophy[70]" that may impact on their recruitment potential and put them at a higher risk of poverty and social exclusion.

Addressing housing exclusion

The European Commission highlights the lack of adequate housing and housing insecurity as a serious concern across the EU as it represents a barrier for labour mobility and

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[64] European Commission (2015) 'Long-term unemployment: Commission proposal for a Council Recommendation – fact sheet'. Available at: http://ec.europa.eu/social/BlobServlet?docId=14472&langId=en (last accessed on 14 December 2016).
[65] Ibid.
[66] The net replacement rate provides a measure of the generosity of unemployment and other social benefits. It is defined as the net income of an unemployed person receiving unemployment and possibly other benefits. See more at: http://ec.europa.eu/economy_finance/db_indicators/tax_benefits_indicators/definitions_en.htm (last accessed on 14 December 2016).
[67] Esser, I., Ferrarini, T., Nelson, K., Palme, J. and Sjöberg, O. (2013) 'Unemployment benefits in EU member states' European Commission, Directorate Employment, Social Affairs & Inclusion, Brussels. Available at: ec.europa.eu/social/BlobServlet?docId=10852&langId=en (last accessed on 25 November 2016).
[68] Konle-Seidl, R., Rhein, T., and Trübswetter, P. (2014) Arbeitsmärkte im europäischen Vergleich: Erwerbslose und Inaktive in verschiedenen Sozialsystemen (A European Comparison of Labour Markets: the Unemployed and Inactive in different social systems), IAB-Kurzbericht, 08/2014.
[69] European Commission (2015) Proposal for a Council Recommendation on the integration of the long-term unemployed into the labour market. Available at: http://ec.europa.eu/social/BlobServlet?docId=14480&langId=en (last accessed on 14 December 2016).
[70] See ESN's article 'European Commission proposes measures to address long-term unemployment', 7/10/2015. Available at: http://www.esn-eu.org/news/698/index.html (last accessed on 25 November 2016).

independent living. The Commission also underlines that restrictions to supply in the housing sector and distortions in the rental market are contributing to the lack of availability.

ESN agrees with this analysis, which is in line with the assessment carried out by the members of the Reference Group on the European Semester, who highlighted difficulties in accessing housing, increasing homelessness, and that middle-income people and households are increasingly concerned by housing problems in 2015 and 2016[71].

For instance, in France, the high level of house prices in metropolitan areas is a source of inequality as well as an obstacle for competitiveness, says the French Association of Directors of Social Services (ANDASS). According to ANDASS, the supply-side policy initiated by the government should be fully implemented across the country. Already in 2015, the Swedish Association of Directors of Social Welfare Services (FSS) reported that addressing the housing shortage was a challenge for Swedish social services. On the one hand, they are required by law to provide housing for those in need; on the other hand, social services are not formal actors in the housing market. Consequently, FSS recommended that the government implements a more active housing policy in close cooperation with local authorities and housing companies.

Belgium is experiencing a serious shortage of accommodation in the private market, an acute lack of social housing and a sharp increase in energy prices, all of which place a burden on social services to find adequate solutions for people in need. The situation may worsen due to the refugee crisis. This is the case in Sweden, where the need for housing is growing as municipalities must accommodate the increasing number of refugees. However, the municipalities lack housing availability and cannot meet the demands. The Croatian County Association noted that an increasing number of people have problems with housing and are seeking help from social services to pay rents and bills. In the Netherlands, access to the housing market is particularly difficult for young people and low-income families. In Spain, a high number of families have house-related debts and the number of evictions is increasing. As for Romania, the country does not have a national housing plan, which would be useful in addressing housing problems.

The Commission proposes that Member States make two commitments:

- Provide access to social housing or housing assistance, protection against eviction for vulnerable people, and support for low and medium income households to access housing;

- Provide shelter to those that are homeless, and link with other social services to promote social integration.

Members of ESN's Reference Group on the European Semester highlighted several initiatives, which have been implemented to address these challenges. Those include the implementation of 'Housing First' in Danish and Belgian municipalities, restrictions for landlords on increasing rents in Ireland or a study on social housing which will be the basis for new legislation in Slovenia. Based on these examples, we agree with the first proposal

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[71] Doyen, M., Lara Montero, A., Connecting Europe with local communities: social services priorities for the European Semester 2017, The European Social Network, Brighton, 2016. Available at: http://www.esn-eu.org/publications/index.html (last accessed on 18 November 2016).

and would suggest enlarging the second proposal to include **the provision of an integrated social inclusion plan for homeless people linking housing with community-based services and access to education, training and work.**

Developing community-based care for older people

The shift from long-term care provided predominantly in residential settings to more home and community-based long-term care provision is evident all over Europe. However, the availability, accessibility and quality of community-based care varies between Member States, as does the commitment to invest in improving them. In many countries, home-based care is still largely provided by (mostly female) family members, which can create high opportunity costs for informal carers' reduced employment.

Although we can observe a trend towards a model of care with more integrated, person-centred services, most countries continue to provide health and social care services for older people in silos rather than in an integrated way[72]. There is currently no EU guidance in this area. However, the WHO Global Strategy on people-centred and integrated health services[73] provides a comprehensive overview of the principles, benefits and possible paths to person-centred health and social care. A study carried out by the European Social Network and Vilans has shown the multidimensional benefits of integrated care for people, their families and carers, and for public services[74].

In its assessment, the Commission underlines current challenges for long-term care systems including population ageing, changing family structures and women's increased participation in the labour market. The Commission also refers to the role of family carers, usually women, who often fill the gap left by unavailable or costly care services. In its proposal for the Pillar, the Commission requests that Member States strengthen the financing and provision of quality and affordable long-term care services, including home-based care, provided by adequately qualified professionals.

ESN agrees with the analysis presented by the Commission but suggests rewording its recommendation so it explicitly invites Member States **to improve the availability and quality of their home and community-based services for older people**, since this will prove more beneficial in the long run.

ESN acknowledges that the proportion of long-term care recipients over the age of 65 who are receiving care in the community or at home has increased everywhere in Europe, except Finland, between 2000 and 2013[75]. The proportion of public expenditure on long-term care

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[72] Harding, E., Wait, S. and Scrutton, J. (2015) The state of play in person-centred care: A pragmatic review of how person-centred care is defined, applied and measured, featuring selected key contributions and case studies from across the field, The Health Policy Partnership.
[73] World Health Organization (2015) WHO global strategy on people-centred and integrated health services – Interim report
[74] Lara Montero, A.; van Duijn, S.; Zonneveld, N.; Minkman, M.; Nies, H.; Integrated Social Services in Europe, European Social Network, Brighton, 2016. Available at: http://www.esn-eu.org/raw.php?page=files&id=1965 (last accessed on 14 December 2016)
[75] OECD (2015) Health at a glance. Available at: http://www.oecd.org/health/health-systems/health-at-a-glance-19991312.htm (last accessed on 13 December 2016).

services provided at home as opposed to expenditure on institutional long-term care has also increased in many countries between 2005 to 2013, particularly in Estonia (+15.6%), France (+7.0%), Finland (+6.4%) and Spain (+5.4%). Nevertheless, most Member States increased their expenditure on community long-term care, or care at home, only marginally.

In some cases, the direct costs of independent living support may be higher given that staff to user ratios are lower than in residential care. Yet, as Mansell points out, "community-based models of care are not inherently more costly than institutions, once a comparison is made on the basis of comparable needs of residents and comparable quality of care"[76]. By focussing on the individual needs and wishes of the service user, their strengths and capabilities, and encouraging self-management, this approach can contribute to an active ageing strategy and delay the need for costly residential care[77]. A local example for this is the 'life-long living programme' in Fredericia (Denmark). Launched in 2008, it seeks to support older people to live in their own homes as independently as possible. Despite an initial investment into restructuring the service, the project has saved the community around EUR 10 million over five years compared to the previous care model[78].

There is a correlation between the availability of formal care and the share of the population aged 65 or older receiving informal care. In countries where formal care is easily accessible and available to those who need it, such as the Netherlands, Switzerland, Sweden and Denmark, reliance on informal care is much lower than in countries where the former is less available. The lack of availability and accessibility of formal care in Italy, Spain and Poland for instance, is correlated with a relatively high reliance on full-time informal care.

Undeclared work is common in the personal and home care sector, to the detriment both of workers, who cannot benefit from work protection legislation, minimum wage, working time regulations and insurance tied to employment status; and of the state, for which undeclared working arrangements mean a loss of tax revenue. Given how difficult it is to monitor and assess working conditions and hours in someone's own home, it is vital to provide information for service users and their families and to prevent them from employing carers under these kinds of conditions.

Therefore, it is recommended that the Pillar includes a principle on **improving support for informal carers and those working in personal and home care services**. This will in the long run create a more sustainable personal and home care system with less indirect costs, better care quality and less staff turnover. This correlates with the ILO Convention No 189 on decent work for domestic workers, which so far has been ratified by six Member States only. Some EU countries have specifically legislated in this matter and could be an inspiration for the Pillar. Since 2009 in Sweden, the Social Services Act requires municipalities to provide support, advice, assistance and relief to informal carers. In 2016, France enshrined the

[76] Mansell, J., Knapp, M., Beadle-Brown, J. and Beecham, J. (2007) 'Deinstitutionalisation and community-living – outcomes and costs: report of a European study'. University of Kent, Canterbury, UK.
[77] Harding, E., Wait, S. and Scrutton, J. (2015) 'The state of play in person-centred care: A pragmatic review of how person-centred care is defined, applied and measured, featuring selected key contributions and case studies from across the field', The Health Policy Partnership.
[78] Hansen, M. and Dalgaard A. M. 'Live-long living: maintaining everyday life as long as possible', ESN Practice Library http://www.esn-eu.org/raw.php?page=files&id=1743 (last accessed 13 December 2016).

formal recognition of carers' role as well as their right to respite in the new 'Law on Adapting society to ageing'[79].

Suggestions for successful implementation and monitoring

The Pillar could be a useful **instrument** to establish **long-term strategic objectives**, promote **greater consistency between policy measures** and lead to **setting minimum social standards** across European countries. However, if the Pillar is to have **credibility**, it is important that it is accompanied by a document outlining how **it will be implemented** (for instance, through some form of roadmap) and **how the implementation will be monitored** (for instance, which indicators will be used to measure each of the principles included in the proposal). The proposed Pillar structure would also benefit from greater clarity as to how it would address the issues highlighted under the proposed principles, given the fact that they are often dealt with by different government departments at different levels in Member States.

In terms of **nomenclature**, the term 'rights' creates the expectation that if someone feels that their social rights have not been respected, they could bring their government to the courts. This is why the Commission should clarify to what extent the provisions contained in the Pillar relate to a **legislative** or a **benchmarking** agenda. If the Commission wants to establish a legislative agenda, it should clarify the relation between the Pillar and the legal *acquis* in the areas where the Commission has competences. In this sense, it may be interesting to request **adherence** to the Pillar for **countries seeking EU accession** and the **allocation of EU Structural Funds** could be used to support implementation of the Pillar's principles.

On the other hand, if the exercise remains at the level of benchmarking, it would be necessary that the Commission together with representatives from national governments (for instance, from the Social Protection Committee and from the Employment Committee) agree specific **benchmarks, or guidelines** to establish those benchmarks at national level. It would also be advisable that the Commission clarifies as to whether the mechanism for monitoring the implementation of the Pillar remains some form of **'soft policy' coordination** instrument similar to the Open Method of Coordination (OMC)[80]. This mechanism may draw on existing **scoreboards**, such as the **scoreboard of key employment and social indicators** introduced in 2014 in the framework of the European Semester, which monitors progress towards the objectives of the EU 2020 Strategy.

The scoreboard could be further **developed** to include indicators related to the **social inclusion of vulnerable groups.** For instance, the 'youth' heading could be broken down to include young people leaving care, young people with mental health problems and young

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[79] Loi d'adaptation de la société au vieillissement (ASV). Available at : http://www.pour-les-personnes-agees.gouv.fr/actualites/la-loi-relative-ladaptation-de-la-societe-au-vieillissement (last accessed on 2 December 2016).
[80] The Open Method of Coordination (OMC) is a method of soft governance initiated by the Lisbon European Council in 2000. It aims to spread best practice towards EU goals in those policy areas, which fall under the competence of Member States. See more at: http://www.europarl.europa.eu/EPRS/EPRS-AaG-542142-Open-Method-of-Coordination-FINAL.pdf (last accessed on 18 November 2016).

people with addictions. Evidence shows that social exclusion, the lack of social or soft skills and challenging family and individual patterns play a major role in the (lack of) success of young people's labour market integration in the long-term – hence our suggestion that the Youth Guarantee is complemented with a 'care guarantee'.

When it comes to **evaluation**, it is suggested that the Commission could look at other EU processes, such as the procedure adopted with the European Structural Funds. It is recommended that the evaluation takes place at all stages of the process: **before** (as it was done through ex ante evaluation and ex ante conditionalities) and **during implementation** to make it possible to adapt interventions along the way.

Concluding messages

Five years after the discussion on a social investment pact for Europe, the European Commission is proposing a Pillar of Social Rights to help guide policies to improve social welfare systems' performance across the EU. Social welfare systems should fulfil a three-fold function: social investment, social protection and stabilisation of the economy. In the field of social protection, the Pillar should recognise public authorities' **duty of care** towards the individual throughout the life-course.

Key statutory duties of public social services include working with vulnerable families, families who need housing, children who need to be protected from harm, protecting and safeguarding vulnerable adults, and providing care and support for frail elderly people. **A key challenge is** to ensure that the social protection principles of the Pillar resonate with these statutory duties at local level so **that local communities feel that the Pillar is relevant for them.**

Following this logic, a proposal for a social rights pillar should not focus solely on employment rights. While employment rights are important, a document on social rights should emphasise that **social rights apply to people of all ages and to everyone**, regardless of whether they are in employment or not. Therefore, the proposal should be re-worded along the lines of the life-course approach, which was put forward by the Social Investment Package in 2013.

Accordingly, this paper proposes a number of principles, which we believe should be included in the Pillar. To start with, the Pillar should recognise that "the child's best interests must be a primary consideration" when public authorities assess the need to provide children with care and protection, hence it is recommended that the Pillar recognise **the need to invest in children in an integrated way** in a similar manner as the 2013 Investing in Children Recommendation. Based on the UN CRC, which has been ratified by all EU Member States, the Pillar should recognise that **all children in need of care (regardless of their status) should grow up in a family environment.**

The paper suggests that the Pillar acknowledges that vulnerable young people should have access to preventive and targeted support, which should take the form of a coordinated and combined effort between social services and housing, mental health, education and

employment services. For instance, the Youth Guarantee could be reinforced with a **'care guarantee' for vulnerable young people**, such as care leavers.

Disability is not mainstreamed in the proposed Pillar, where persons with disabilities mainly appear as recipients of care and social benefits, instead of active citizens. Therefore, this paper argues that the Pillar should acknowledge that **people with mental health problems and people with disabilities must be supported to live independently and participate actively in the life of their communities.**

The Pillar should emphasise an **integrated approach when working with people with multiple and complex needs in the field of active and social inclusion**. Following on from the 2008 European Commission's Active Inclusion Recommendation, access to quality public social services is key to supporting these people to find suitable training or employment. As suggested by the 2015 European Commission's Recommendation on long-term unemployment, this could take the form of an **individualised integrated plan.** An integrated approach is particularly relevant when working with the homeless and those facing social exclusion. ESN agrees with the Commission's proposal for a commitment from Member States to tackle housing exclusion. Specifically, this paper calls for the proposals to include the provision of an integrated social inclusion plan for homeless people linking housing with community-based services and access to education, training and work.

The Pillar should call on Member States to **improve the availability and quality of home and community-based services for older people,** since this will prove more beneficial in the long run. Likewise, it is important that the Pillar includes a principle on **improving support for informal carers and those working in the personal and home care services,** with the aim to create a more sustainable personal and home care system with less indirect costs, better care quality and less staff turnover.

In terms of nomenclature, the term 'rights' creates the expectation that if someone feels that their social rights have not been respected, they could bring their government to the courts. The Commission should **clarify** to what extent the provisions contained in the Pillar relate to a **legislative** or a **benchmarking** agenda. If the Commission wants to establish a legislative agenda, it should clarify the relation between the Pillar and the legal *acquis* in the areas where the Commission has competences.

If the proposal will take the form of benchmarking, it would be advisable that the Commission clarify whether the mechanism for monitoring the **implementation** of the Pillar may include some form of 'soft policy' **coordination** instrument similar to the Open Method of Coordination (OMC). It would also be constructive if the proposal addressed how the issues highlighted under each principle should be addressed and by whom, given the fact that they are often dealt with by different government departments at different levels in the Member States.

The Pillar could be useful to establish **long-term strategic objectives**, promote **greater consistency** between **policy measures** across Member States and lead to setting **consensual social standards** across European welfare states. In terms of improving **convergence** between Member States, it is key that the policy principles included in the proposal include a combination of **social investment** and **social protection** measures. Finally, for ESN, whose members largely work in **local communities** across Europe, the success of this social and societal instrument depends on the European Union reaching out to **all** citizens.

Table with a proposal for revised principles

Proposals in the left-hand column correspond to the structure found in the European Pillar of Social Rights.

Commission proposal	ESN revised/additional proposal
1. *Skills, education and life-long learning* ❯ **All persons shall have access to quality education and training throughout the life course (…). Low skilled young people and working age adults shall be encouraged to up-grade their skills.**	❯ Investment in early childcare shall be followed up by adequate investment in inclusive education to support the most vulnerable young people, including those dropping out of school, those leaving care, young migrants and young offenders. ❯ The youth guarantee shall be complemented by a 'care guarantee' that could take the form of a one-stop-shop mechanism providing them with information, guidance, support and services.
a) *Flexible and secure labour contracts* ❯ **Equal treatment shall be ensured (…) Misuse or abuse of precarious and non-permanent employment relationships shall be prevented.**	❯ Support for informal carers and those working in the personal and home care services shall be improved.
b) *Active support for employment* a. **All people under the age of 25 years shall receive a good-quality offer (...)** b. **(…) registered long term unemployed persons are offered in depth individual assessments and guidance and a job integration agreement (…) at the very latest when they reach 18 months of unemployment.**	❯ The youth guarantee shall be complemented by a 'care guarantee' that could take the form of a one-stop-shop mechanism providing them with information, guidance, support and services. ❯ People who have been long-term unemployed shall be provided with a set of interventions that go beyond employability. This shall include access to quality social services, supporting them with their individual challenges and to finding them suitable training or employment. ❯ Individual assessment and subsequent joint support shall take place as soon as someone becomes unemployed.
11. *Integrated social benefits and services*	❯ Labour market activation incentives shall be used accompanied by personal advice and support services that are of adequate quality.

➢ **Social protection benefits and services shall be integrated to (…) support social and labour market integration.**	
16. Disability benefits ➢ **Persons with disabilities shall be ensured enabling services and basic income security that allows them a decent standard of living. The conditions of benefit receipt shall not create barriers to employment.**	➢ Support programmes in the competitive labour market, such as individual placement and support schemes, shall be provided to help people with disabilities secure and retain jobs in the open labour market. ➢ People with mental health problems and people with disabilities shall be supported to live independently and participate actively in the life of their communities. ➢ The deinstitutionalisation process shall be further supported through the development of person-centred, community-based services with the financial support of EU Structural Funds.
17. Long-term care **a. Access to quality and affordable long-term care services, including home-based care, provided by adequately qualified professionals shall be ensured** **b. The provision and financing of long-term care services shall be strengthened and improved in order to ensure access to adequate care in a financially sustainable way.**	➢ The availability and quality of home and community-based services for older people shall be reinforced. ➢ Support for informal carers and those working in the personal and home care services shall be improved to create a more sustainable personal and home care system with less indirect costs, better care quality and less staff turnover.
18. Childcare **a. Access to quality and affordable childcare services, provided by adequately qualified professionals, shall be ensured for all children.** **b. Measures shall be taken at an early stage and preventive approaches shall be adopted to address child poverty, including specific measures to encourage attendance of children with disadvantages backgrounds.**	➢ Children's policies shall be developed in an integrated manner including provisions to support children's access to resources, quality services and their right to participation. ➢ Investment in universal early childcare, particularly for disadvantaged children, shall ensure its quality, coverage and intensity to ensure successful social outcomes for children. ➢ The importance of the transition for children from pre-school to school shall be recognised, and investment in early childcare followed up with investment in schools to improve educational outcomes for children.

	➢ Support for mainstream schools shall be strengthened so that they can accommodate children with special needs, as this is the way to ensure that all children grow up in an inclusive environment. ➢ Children in need of care, regardless of their legal status, shall grow up in a family environment.
19. Housing **a. Access to social housing or housing assistance shall be provided for those in need. Protection against eviction of vulnerable people shall be ensured, and support for low and medium income households to access home property provided.** **b. Shelter shall be provided to those that are homeless, and shall be linked up to other social services in order to promote social integration.**	➢ Specific support for people at risk of losing their homes shall be provided. ➢ An individualised, integrated social inclusion project shall be provided to homeless people linking housing with community-based services and access to education, training and work.

The European Social Network (ESN) is the independent network for local public social services in Europe. It brings together people who plan, finance, research, manage, regulate and deliver local public social services, including health, social welfare, employment, education and housing. We support the development of effective social policy and social care practice through the exchange of knowledge and experience.

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