Pathways to Activity

Active inclusion case-studies from the ESN policy & practice group
active inclusion and employment

Date: 12/02/2009

European Social Network
Social Services in Europe

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.
Social exclusion of vulnerable people remains one of the biggest European challenges. Faced with the steady number of people at risk of social exclusion and with growing pressures to deliver its promise that ‘everyone in Europe can participate actively in the economy and in society more generally’\(^1\), the European Commission initiated in 2007 its initiative on Active Inclusion.

In 2008, the European Social Network launched its policy & practice group on active inclusion and employment, creating a forum for local public social and employment directors to analyse together the challenges and reflect on how to achieve and measure success in relation to active inclusion.

The group contributed to the EU policy-making process. It participated in the Commission’s consultation on active inclusion, commented on its proposed recommendation, reviewed the relevant parts of the NRS SPSI\(^2\) and wrote to all 27 Ministers for Labour and Social Affairs in the time of the December EPSCO\(^3\) Council. The group also gave ample attention to the practice side of managing active inclusion services. With members representing seven countries and a variety of approaches, the group proved to be an excellent platform for exchanging practice.

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\(^2\) National Strategy Reports on Social Protection and Social Inclusion submitted by all EU member states to the Commission every 2 years. Available at: [http://ec.europa.eu/employment_social/pspi/strategy_reports_en.htm](http://ec.europa.eu/employment_social/pspi/strategy_reports_en.htm)

\(^3\) Employment, Social Policy, Health and Consumer Affairs Council, one of the formations of the Council of the European Union, composed of employment, social protection, consumer protection, health and equal opportunities ministers, who meet around four times a year.
INTRODUCTION

Agreeing that active inclusion covers policies and structures which connect people at risk of poverty and exclusion to jobs and to other meaningful forms of activity in the community, the group sought to define who the most vulnerable people are. Based on members’ experience, service users include:

- lone parents
- people with ethnic background and low level of skills
- people with a history of mental health problems
- people with addictions
- 45+, long term unemployed people
- people with multiple disadvantages
- people with physical and learning disability

The group recognised that active inclusion as policy and practice can produce positive results for all these groups and as well as for the wider community. It does so by increasing employment, reducing social expenditure, including previously excluded people, breaking the cycle of poverty and its intergenerational transmission. It is nonetheless a potentially expensive strategy and clear indicators of what constitutes success are lacking.

Whereas in the case of traditional employment services it is easy to assess their performance, it is less straightforward when it comes to activating services working with people furthest from the labour market. Service users often having multiple disadvantages and their achievement on the labour market cannot be demonstrated without some difficulty and their improved social inclusion is simply not taken into account.

This is why the group decided to study in more detail the pathways to activity as designed and delivered to the first three categories of users above. Three case studies allowed members to address the question of performance of activating services and reflect on the role of benefits conditionality.

People at margins usually have multiple problems and disadvantages. Often they develop a very passive attitude: such as lack of will to take up a job. We need to invent new “carrots” and “sticks” to reach such jobless households and people who never knew how it is to work – Sari Toivianen
CASE STUDY 1: LONE PARENT

A child is always a priority for social services. We will therefore seek to provide the young mum with social housing and a whole range of additional benefits to make sure that neither she nor her child are to live in poverty. – Becca Randell

Niels van Tent, Dutch member of the AIE policy & practice group, delivered a presentation on how services in Amsterdam support young mothers-to-be, still living with their parents, having debts and low educational attainment.

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<th>Households with dependent children by work-status of the parent</th>
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<td>Women in couples</td>
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<td>Norway</td>
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Source: Study on Poverty and Social Exclusion among Lone Parent Households, European Commission, February 2007

In the Netherlands, activation measures have been provided by local public social services (Department of Work and Income) since 2004 as a result of the decentralisation of income and employment services. Local authorities have become responsible for social welfare and were given more control over their financial resources. This move
created a strong incentive for local authorities to improve employment levels and thus spend less on benefits. All money saved that way can be retained by the municipality and redirected to other budget lines.

This strategy proved to be successful, both by improving the shape of the local budget and by bringing the unemployment level to its lowest in history. This has encouraged Dutch municipalities to take on new responsibilities such as services for disabled people, seeing it as opportunity to further stimulate social inclusion and labour market participation while improving cost-efficiency of public spending.

In its activation strategy, the City of Amsterdam uses a ‘5 Steps to Work’ approach with ‘step 1’ being the furthest from the labour market and ‘step 5’ meaning: immediately ready for work. The table above shows the current (autumn 2008) allocation of service users into the 5 categories.

A young pregnant woman who dropped out of school and had debts would be allocated to the first step during her first visit to social services. Her Client Support (CS) Manager would advise her on supportive instruments available to her, such as: (future) childcare, debt counselling and reimbursement of selected expenses.

Several weeks after birth, the CS Manager would encourage his client to move forward by improving her social skills and self-esteem, which should lead to greater social participation and independence. At this stage, the “trajectplan” or personalised pathway to work contract is being drafted.

There is a growing pressure upon social services to prove their cost-effectiveness. We must remember however that some social “gains” are not straightforwardly quantifiable. The value of one’s improved social activity cannot be easily priced – Matthias Schulze-Boeing
Norwegian social services put a lot of emphasis on education of lone parents. We always encourage them to go back to school, as the diploma can help them improve their situation. An educated parent is also beneficial to the child. It is a classic win-win situation - Asle Hovdal

With its signing, the user moves to the 3rd step where her skills are assessed in relation to labour market needs. The CS Manager encourages a young mum to resume her interrupted education (the cost of which would be covered by the service). Her child would meanwhile be given a place in a crèche.

The transition to the next step would take place with an internship or apprenticeship offer. During this period, the social benefit received previously is converted into an internship or apprenticeship allowance.

Finally, the experience gathered during training should allow the user to access the primary labour market. Should the work placement be successful, the service will for some time continue to support the user in work, until the CS Manager is confident she can no longer needs support.

The trajectplan may cover a period of 2-3 years and be modified along the way. This rather long perspective leaves enough room for re-integration and re-orientation measures alongside social and employment training. It aims to provide the users with as many tools as possible to facilitate them finding and changing jobs in future. It reflects the “work first” principle – strongly embedded in both policy and practice in the Netherlands – and emphasises the value of work.
CASE STUDY 2: PERSON WITH MENTAL HEALTH CONDITION >>

Doctors and therapists are often the first professionals to support social activation of the persons by helping them to overcome the health problems. Social and health services must cooperate for the benefit of their users – Sari Toivianen

Becca Randell presented the example of a client with a history of mental health problems through the British Pathways to Work Programme. The British approach is characterised by a broad cooperation between numerous stakeholders including NHS Trusts, JobCentrePlus, employers, schools and third sector organisations. It aims to bring back to the labour market some of the 3 million people of working age who have been receiving benefits for over a year.

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\text{LFS data demonstrating levels of employment (in England)}
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\begin{array}{ccccccc}
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\text{Whole population} & 80 & 70 & 70 & 70 & 60 \\
\text{Physical health problems} & 50 & 45 & 45 & 45 & 40 \\
\text{Mental health problems} & 20 & 15 & 15 & 15 & 10 \\
\end{array}
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Source: Presentation “Helping people with enduring mental health problems gain and retain employment: from research to practice”, Miles Rinaldi

Introduced in April 2008, Pathways to Work is designed to be client-driven. The type of activity, pathway, pace and venue are chosen with the user who is regularly consulted on the progress and can review its elements with his Personal Advisor. This gives the sense of ownership and places responsibility with the client, without however leaving him on his own.

There are levers and incentives attached to this programme and clients are able to access various financial or support programmes (e.g. Job Introduction Schemes, Return to Work Tax Credit, or Access to Work).
The client’s journey through system can be summarised by the scheme below:

In the case of a person experiencing mental health problems and being in and out of hospital it starts with the community psychiatric nurse and/or psychiatrist who encourage the client to consider returning to work as a part of his/her recovery. The first step is then a new medical assessment which examines what the user can do, rather than what s/he cannot.

This new focus on people’s abilities was introduced in October 2008, with the Employment and Support Allowance, which complements the Pathways to Work approach.

*People with mental health problems are still strongly stigmatised and have serious difficulties in finding and keeping jobs. Social and employment services must work closely with employers to ensure them that with adequate level of support, these users can be valuable employees – Becca Randell*

According to the Department of Work and Pensions (DWP), the Employment and Support Allowance builds on the Pathways to Work scheme, which helps people with an illness or disability into work, if they are able. This includes the support of a personal adviser who can provide access to a range of financial support, return-to-work programmes such as the New Deal for Disabled People, and specialist provision, including access to the Condition Management Programme.

The Condition Management Programme is designed to help users to cope with their illness or disability in a work context and is delivered by healthcare professionals.
Following medical assessment, the user will draft his/her own Action Plan together with his/her Personal Advisor. They will establish needs and personal circumstances, barriers, capabilities, experience, aptitudes and aspirations of the user and consequently confirm the understanding of mutual expectations, quality standards and procedures.

Finally, an agreed Action Plan will be signed and the Personal Advisor will refer the client to partner organizations for necessary training and skills improvement, while preparing a series of work-focused interviews and a customer toolkit.

Partner organizations (or in some cases the pathway provider itself) will provide the basic skills training (‘soft skills’), work-related training, Condition Management Programme and a whole range of other supportive measures such as debt counselling, job coaching, work trials etc.

Once the user is judged to be work-ready, s/he can participate in site visits to employers, get a work trial, complete an apprenticeship and start a job. S/he will be offered in-work support for a period of up to 13 weeks and in case of failure can return to any earlier step and restart his pathway.

Overall, the Pathways to Work and Employment and Support Allowance, focus on people’s abilities and not their long-term illnesses or disabilities thus creating more favourable conditions for their return to activity. As such, they increase social inclusion of people with physical and intellectual disabilities and mental health problems. By involving a number of partner organizations and key stakeholders, they also have potential to build stronger community care network to the benefit of all.

In Poland, when it comes to mental health, the gap between urban and rural area is huge. In cities, users can find services they need, whereas in the countryside they can only rely on neighbours and family support. We must make sure to improve the coverage of services – Agnieszka Hryniewicka.
CASE STUDY 3: PERSON WITH ETHNIC BACKGROUND AND LOW LANGUAGE SKILLS

Working with migrants can be particularly challenging. We know how difficult it is for them to make a first step and come to our offices. Therefore we do our best to welcome them warmly, make sure we have an interpreter at hand and newspapers in their native language. These efforts are worthwhile! – Asle Hovdal

Matthias Schulze-Boeing, German member of the group, demonstrated a typical pathway of a person of migrant origin with poor knowledge of German.

The German approach is based upon two principles ‘Fördern und Fordern’ (‘carrot and stick’). It implies that the user should actively seek to overcome his problems and improve his situation in the first place by finding a job on the primary labour market. Should that not be possible, the user is obliged to accept a community work offer in order to avoid prolonged inactivity and dependency.

Figure S1: Migrant women’s labour force participation rate (LFPR) deficits relative to native-born women, by years of residence, 2005

Source: EU LFS 2005

Source: Technical rapport “Migrant women in the EU labour force”, Rand Europe 2008 (commissioned by the European Commission)

There are however situations, where users can refuse the job offer. This happens when the user is caring for a child under the age of three or for an older child when childcare provision cannot be guaranteed by the authorities. Likewise, when a user is caring for a chronically ill relative and no other option is at hand (such as: family networks, private or public care services), he can be exempted from his work obligation.
It is one of key challenges for Hungary to restore the provision of childcare. With over 80% of places in crèches lost in the 1990s, we now have only 10% of children aged 0-3 who go to nurseries. This clearly affects of women in the labour market – Agnes Simonyi

In all other cases, the user is required to sign an “Integration Contract” with the Job Centre (JC). This contract typically covers such areas as:

- the services the JC can and will provide to the client
- the specific actions the client can and will take to get a job, become job ready and/or improve employability
- the claims the client has to make towards other public or private agencies (e.g. social security, youth welfare, responsible individuals, debtors)

It is important to note that the ‘integration contract’ can also include services for the family of the client (e.g. child care, social services). This illustrates the holistic approach of German local social and employment services.

In practice, the pathway for users, as applied in Offenbach, can be exemplified by the graph below. It shows different phases of activation and emphasises continuous engagement of social and employment professionals.

Activation and integration – practice in Offenbach-am-Main, Main-Arbeit GmbH

In our case study of the user with poor knowledge of German, ethnic origin and childcare needs, the key question for social services is the age of the child. Only if the child is older than three and childcare is available, can the parent be requested to participate in activation measures.

Having established that these two conditions are fulfilled, services will invite the user to a three-week, intensive, full-time “orientation course”. It aims to profile the user’s strengths and weaknesses, to discover their wishes and preferences and to match them with the labour market. During this period, case managers decide on what training the client may need, including those concerned with soft skills (e.g. confidence building).
We consider that service users we work with deserve our respect and their views must be sought actively. That’s why we put in place user councils who involve community groups and representatives of the city of Amsterdam – Niels van Tent

It is important not only to see what an individual can bring to society through working life but also through participation in other ways. For people who cannot work, this is all the more crucial – Asle Hovdal

It is generally a very difficult task for public services to strike the right balance between the user’s expectations, labour market situation and the budgetary constraints. Subsequently, the user will sign a 6-month contract with the service, outlining mutual expectations and obligations. Although the client has some limited bargaining power, the contracting parties are not in the same position: the user must eventually sign the agreement or lose their benefits.

In order to improve the user’s linguistic skills, social services will offer up to 1200 hours of German language. The user’s reading and writing skills will be tested and when judged sufficient, an extra 300 hours of work-related language training will be provided together with 2 months internship or community work. This preparation should lead to job placement on the general labour market or to community work.
CONCLUSION >>

The three case studies presented above demonstrate the richness of active inclusion and employment schemes across Europe. They may vary in some regards, but they place the user at heart of their actions and bring together a wide range of services designed to address multiple disadvantages of people furthest from the labour market. All three models share the view that the social situation of users must be addressed as the first priority, before the person can be job ready. They pay significant attention to ‘soft skills’ and spend a considerable amount of time working with users to ensure that their sense of worth, confidence and ability to interact with others are reinforced.

In the three case-studies, services involve users in drafting their action plans (trajectplans or integration plans). This guarantees the clarity of mutual obligations and rights and – for users – it adds to the sense of ownership of their lives.

Another visible characteristic of the three case studies is the role of local authorities in fostering essential partnerships between public actors, non-for-profit and private entities to tackle social exclusion and unemployment. Local authorities are responsible not only for the delivery of services and also for the design of comprehensive local strategies, involving all relevant stakeholders.

It is also worth emphasising that well-developed cooperation between all services responsible for active inclusion is still not the case in some European countries, where services operate in a disconnected way. Their enhanced coordination and a shift toward more inter-agency work would significantly improve their effectiveness and would thus bring benefits for service users and the wider community.

Finally, in all three countries, services recognise that whereas employment is the most desired outcome of their activation efforts, it may not be realistic for all users. Some people, due to their multiple disadvantages, will not be able to access the primary labour market. It is crucial for social and employment professionals to make sure that these people are not left behind. Active inclusion has much to offer also to those who cannot work and this aspect should not be ignored. For many vulnerable people in our societies, a chance to learn new skills, to engage in voluntary work, to go out and meet new people is a personal success in itself.

ESN has on many occasions drawn European and national policy-makers’ attention to the fact that active inclusion is not only about jobs but also about social cohesion, interaction and involvement of disadvantaged persons in social, cultural and other types of activities.

To find out more about the Policy & Practice Group Active Inclusion and to download the companion brochure ‘Realising Potential’ (English/français), go to http://www.esn-eu.org/active-inclusion