



# **A life-course approach to social welfare policies**

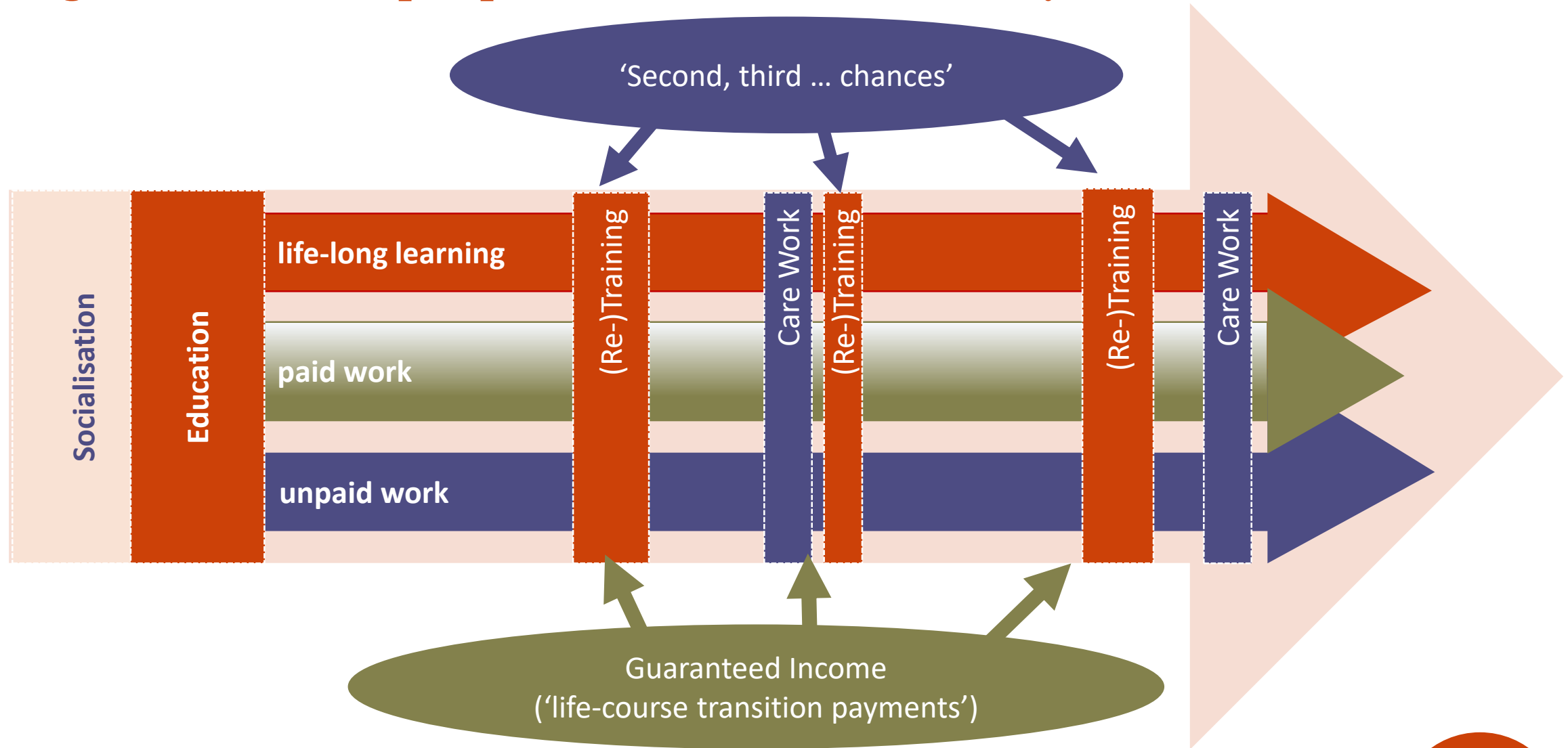
Rationale and perspectives for policy-making

Kai Leichsenring

GAM 2018

## Elaborating on “Ageing 4.0”

### Integrated life-course perspectives in a solidaristic society



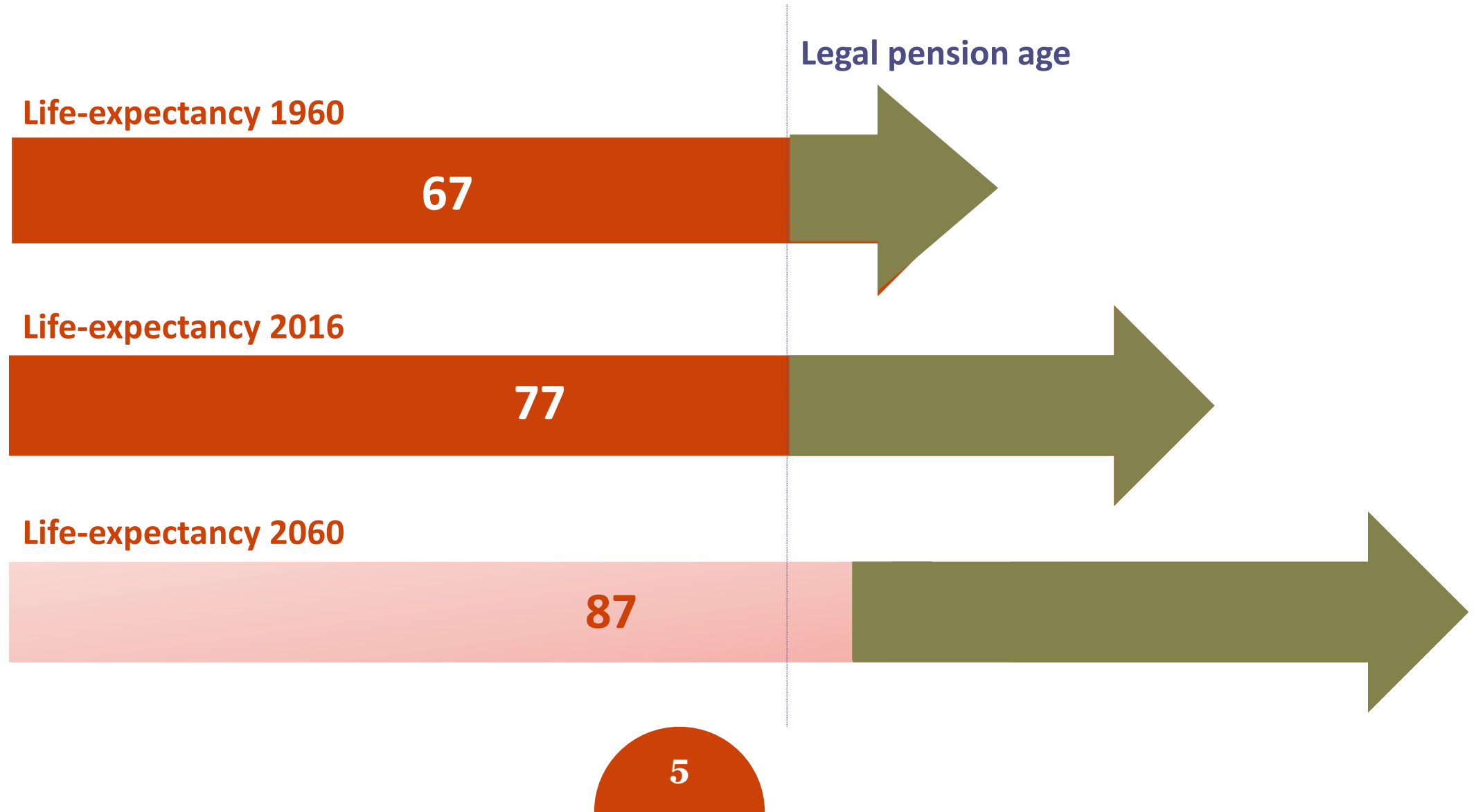
## Key challenges of social policies

- Social security systems are generally still built around a male breadwinner-model and a standardised age-differentiated life-course – outdated!
- Reforms during past decades have undermined social security, in particular the trust of citizens in social security systems by additional solicitations such as ‘extending working-life’ and ‘life-long learning’
- Technological change is faster than institutional and individual adaptations

## Key challenges of social policies

- Life-course events as individual risks: marriage/divorce, child care, care for older parents, loss of job, unpaid work ... (gender inequalities)
- Transitions as individual risks: education/employment, work/care, back to work after care, work to pension ... (gender inequalities)
- 'New risks' are poorly addressed by traditional social security systems: cash benefits, ALMP (?), care leaves ... (gender inequalities)
- Inequalities are consistent between classes and between men and women (cumulative inequalities over the life course) – education as a key factor!

## Longer lives as an opportunity for new types of life-courses



# Facilitating a new balance of education, work and care over the life-course

- New types of social security and innovative social policy to reduce inequalities and to offer opportunities for 'Ageing 4.0'
- Second, third ... chances: education periods during adulthood, rather than 'mini-courses' or 'mini-jobs'
- Appropriate acknowledgement (and remuneration) of care work
- Conditional, but guaranteed income to enhance inter-generational equity and gender equality

# Social policy research with a (new) life-course perspective?

## Principles in life-course theory

- Lifelong development: early experiences affect later life
- Agency: individuals take decisions (opportunities and constraints)
- Context: time and place
- Timing of various life-events
- Linked lives (family and kinship, friendships ...)
- Multidimensional transitions and trajectories

- Addressing cumulative inequalities
- Adapting public support mechanisms to transitions / timing
- Adapting social policies to regional idiosyncrasies and developmental paths
- How to design social security systems to positively impact on specific trajectories
- The end of the traditional 'old-age dependency ratio'?
- ...

# The European Centre's activities, projects and their findings from a life-course perspective

## Session 1: **Social rights over the life-course in Europe**

- Access to social security
- Access to adequate housing
- Measuring rights-based approaches to long-term care of older people

## Session 2: **Employment over the life-course in Europe**

- Potentials and caveats of risk-profiling of long-term unemployed
- Potentials and challenges of working in LTC
- Potentials and challenges of working across borders in Europe



# The European Centre's activities, projects and their findings from a life-course perspective

## Session 3: **Employment over the life-course in Europe**

- Potentials and caveats of risk-profiling of long-term unemployed
- Potentials and challenges of working in LTC
- Potentials and challenges of working across borders in Europe

## Session 4: **Social and health services over the life-course**

- The need for social services over the life-course: The case of Kosovo
- Preventive approaches in social service provision: The case of young drug users
- Technological solutions as a panacea? The case of assessing eHealth applications
- Policy and practice solutions by integrated services, user enablement and prevention

# The European Centre's activities and projects from a life-course perspective

## Session 5: Challenges for a life-course approach in social welfare policies

With interventions by:

- **Thore Hansen**, NLO Norway: Department of Research and Analysis, NAV - Directorate of Labour and Welfare
- **Žarko Šunderić**, Director, Center for Social Policy, Belgrade (Serbia)
- **Chris Fox**, NLO UK: Professor of Evaluation and Policy Analysis, Director, Policy Evaluation & Research Unit, Manchester Metropolitan University
- **Davor Dominkus**, NLO Slovenia: Ministry of Labour, Family and Social Affairs



# Social rights over the life-course in Europe

For a discussion on the rights we have and the rights we need  
along the life-course

Ricardo Rodrigues, Michael Fuchs and Eszter Zólyomi

EUROPEAN CENTRE FOR SOCIAL WELFARE POLICY AND RESEARCH



# „These are your rights Oh, know your rights“ (The Clash)

*Article 2.* Right to life

*Article 3.* Right to the integrity of the person

*Article 6.* Right to liberty and security

*Article 7.* Respect for private and family life

*Article 14.* Right to education

*Article 15.* Freedom to choose an occupation and right to engage in work

*Article 23.* Equality between **women and men**

*Article 24.* **Children** shall have the right to such protection and care as is necessary for their well-being.

*Article 25.* ...**rights of the elderly** to lead a life of dignity and independence and to participate in social and cultural life.

*Article 26.* ... **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

*Article 35.* Everyone has the right of access to preventive health care and the right to benefit from medical treatment

Source: EU Charter of Fundamental Rights

# Are rights the same along the life-course?



Source: Nordic Life Course Research Initiative, <http://nordiclifecore.com/>

Right to education  
Right to contact to parents  
*Citizenship*  
*Residency*

Right to work  
Rights to reconcile family/work  
*Welfare*  
*Workfare*

Right to independent living  
Right to minimum living standards  
*Citizenship*  
*Welfare*

Right to health

Equality between men and women

Non-discrimination

Dignity

# Three examples of rights along the life-course

- Right to adequate basic security: ensuring access to means-tested social assistance/minimum income (and support for labour market integration)
- Right to adequate housing: ensuring access to affordable, secure and good quality homes
- Conceptualizing and measuring the rights of older people in need of care and support

# Right to a living income?

## The European Pillar of Social Rights

Chapter III/14: Minimum income

Everyone **lacking sufficient resources has the right to adequate minimum income benefits** ensuring a life in dignity at all stages of life, and effective access to enabling goods and services. For those who can work, minimum income benefits should be combined with incentives to (re)integrate into the labour market.

## EU Charter of Fundamental Rights

Art. 34.3 : Right to housing assistance

“In order to combat social exclusion and poverty, the Union recognises and respects **the right to social and housing assistance** so as to ensure a decent existence for all those **who lack sufficient resources**, in accordance with the rules laid down by Union law and national laws and practices”.

# Access to Social Assistance/Minimum Income: Determinants of non-take-up

- Key performance criterion of social protection systems is that benefits reach their target groups
- Means-tested programmes, however, tend to be characterised by a certain extent of access problems
- In the sense of a cost-benefit equation, a household will apply if the anticipated benefit exceeds the anticipated costs (direct and indirect costs including both objective barriers and subjective motives)
- Pecuniary determinants; information costs; administrative costs; social and psychological costs
- “Primary” vs. “secondary” non-take-up



# Non-take-up rates in selected EU countries

Country	Benefit	Year	Claimants/Payments
AT	Open Social Assistance (HLU)	2003	56/48%
BE	Minimum guaranteed income (Leefloon) aged 18-65	2005	62/45%
CZ	Material need benefit	2010/11	72/-%
DE	Social assistance (Grundsicherung) employable, 65+	2008	34-43/-%
FI	Social assistance	2010	55/-%
FR	Active solidarity minimum income	2010	50-64/-%
HU	Regular social assistance	2003	43-45/-%
LT	Social assistance	2011	68/43%
PL	General social assistance scheme	2005	57/-%
PT	Minimum guaranteed income	2001	28/-%
SE	General social assistance	2001	31/-%
UK	Income Support (+ income-related empl./support allowance)	2013/14	19-23/-%

# The consequences of non-take-up

- If costs are consequences of intransparent and complex schemes, poor information, or similar institutional barriers, they imply a failure in design or implementation
- Low participation rates may distort intended welfare impact of targeted social transfers
- Non-participation causes unjustified disparities among eligible clients
- Non-take-up reduces the capacity to anticipate both social outcomes and financial costs of policy reforms
- Approaches to address non-take-up may need to apply multiple strategies simultaneously: Changes in drawing-up of laws, implementation of rules, attitudes of administrations, communication about existing measures, ...

# The life course perspective?

- Make ends meet
- Educational and participation opportunities of household members (incl. children)
- Outcomes on material situation in old age, etc.
- Right to work in a changing world
  - Access to labour market policy support
  - Incentives to work, labour supply of clients
  - Limits of activation? “Revolving door effect”
  - Increase of low-paid sector? Crowding-out effects by work opportunities?

# Right to housing

## EU Charter of Fundamental Rights

Art. 34.3 : Right to housing assistance

“In order to combat social exclusion and poverty, the Union recognises and respects **the right to social and housing assistance** so as to ensure a decent existence for all those who lack sufficient resources, in accordance with the rules laid down by Union law and national laws and practices”.

# Access to affordable housing

## A growing problem in the post crisis landscape

- The global financial crisis had a strong impact on housing markets in Europe
- With rising housing costs access to affordable housing remains out of reach for many families
- Burden of housing costs and arrears considerably heavier for low-income households
- Experience of housing exclusion and homelessness among families with children

# How effective are housing assistance policies in reducing poverty and inequality?

## The case of housing allowance

	Share received by poorest 20%	Poverty reducing effect
Italy - Rent supplement	26%	-0.07
Greece - Rent subsidy	81%	-0.04
Netherlands - Rent benefit	63%	-2.21
Austria - Housing benefit	68%	-0.43
Sweden - Housing allowance	92%	-1.59
UK - Housing benefit	35%	-5.47

In 2016, benefit was **most narrowly targeted at lowest-income group in Sweden**

**Impact of this housing policy on poverty was strongest in the UK, weak in Italy, Greece & Austria**

Anti-poverty effect **decreased compared to 2007 in Sweden and Greece, improved in UK, no change in the Netherlands, Austria & Italy**

Source: Figari, F., Hollan, K., Matsaganis, M. & Zolyomi, E. (2017)

# Re-claiming the right to housing

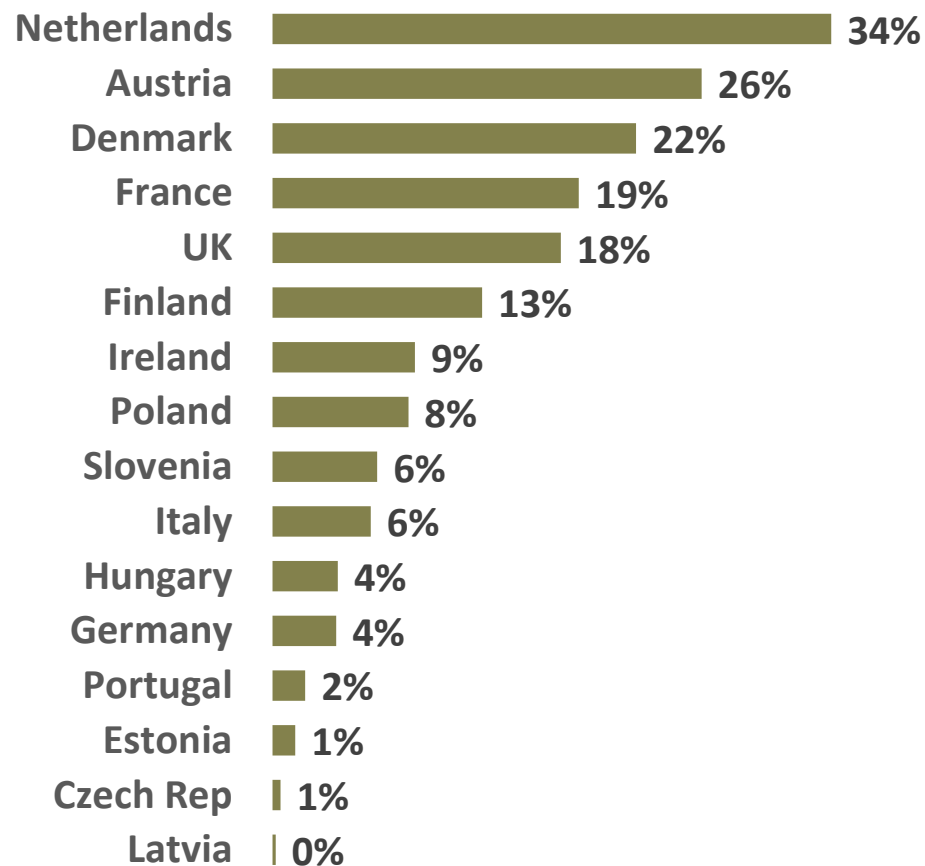
## The European Pillar of Social Rights

Chapter III/19: Housing and assistance for the homeless

- a. **“Access to social housing or housing assistance** of good quality shall be provided **for those in need;**
- b. **Vulnerable people** have the right to appropriate assistance and **protection against forced evictions;**
- c. **Adequate shelter and services** shall be provided **to the homeless** in order to promote their social inclusion.”

# Access to social housing

## Social rental housing sector as a share of the housing stock (%)



- Provided in the form of rental housing with below market rents and allocated according to need
- Large variations in terms of scale of provision, eligibility conditions, ownership
- Overall, those with lower incomes are overrepresented among social tenants
- Families with children without a home tend to have priority access

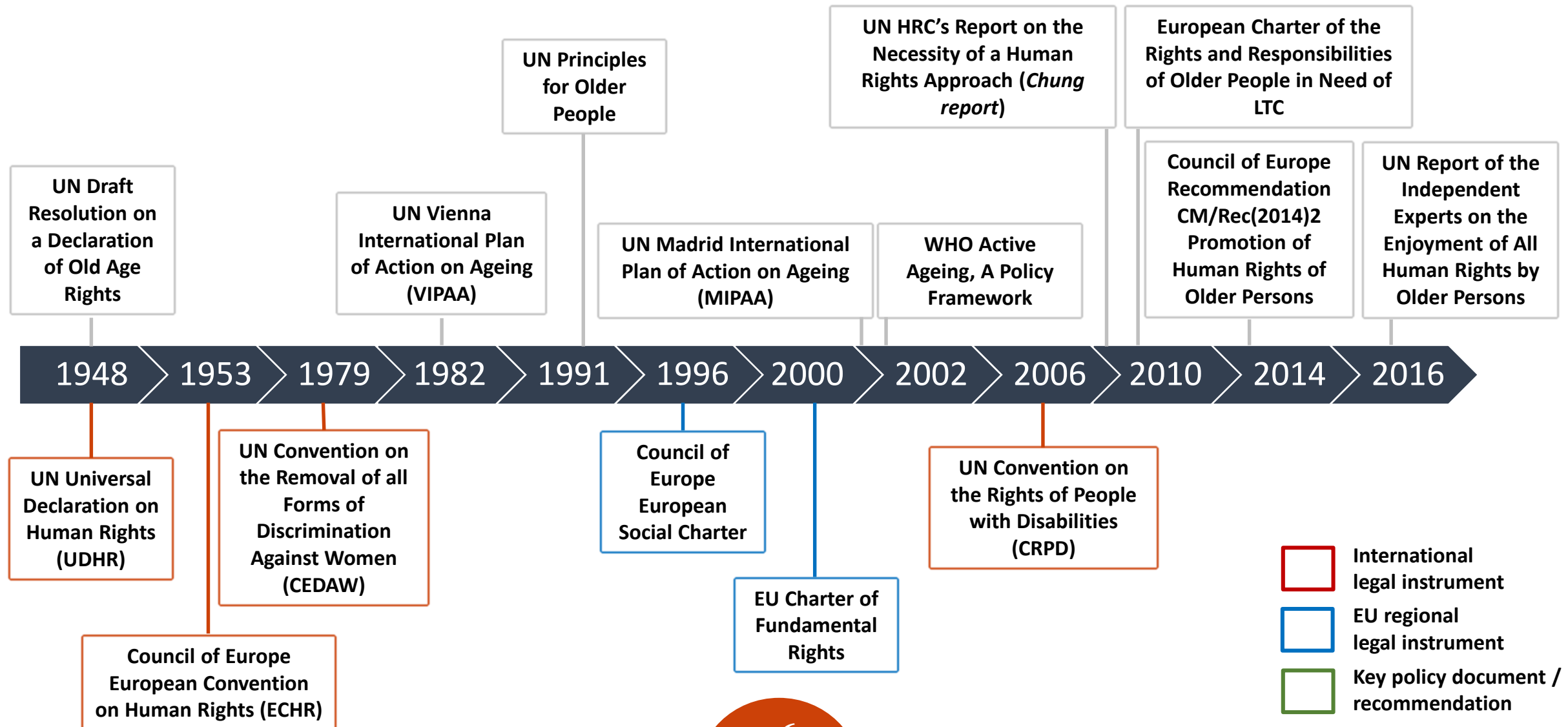


# (Why) do we need a life-course approach to housing?

- Importance of early life influences on later life outcomes (detrimental effects of poor housing conditions, housing instability and homelessness during childhood and adolescence)
- To take into account 'the temporal' i.e. changes in aspirations & needs across generations and through the life course of individuals and households
- Reflecting the lived experience of housing (e.g. critical points of transition) and the varying housing trajectories of different groups (e.g. based on socio-economic background)



# Rights of older people: The long and winding road...



# Right to social life

## EU Charter of Fundamental Rights

Art. 25: The rights of the elderly

The Union recognises and respects the **rights of the elderly to lead a life of dignity and independence** and to participate in **social** and cultural life.

# Accessing the public space

## VI. Participation & social inclusion

Austria\*

100.0

Sweden

64.5

Slovakia

64.5

Poland

40.9

1.1 Legislation addressing accessibility of public spaces

na

2

2

3

1.2 Legislation addressing (de)institutionalisation

3

3

3

1

2.1 Procedures to ensure accessibility of public spaces

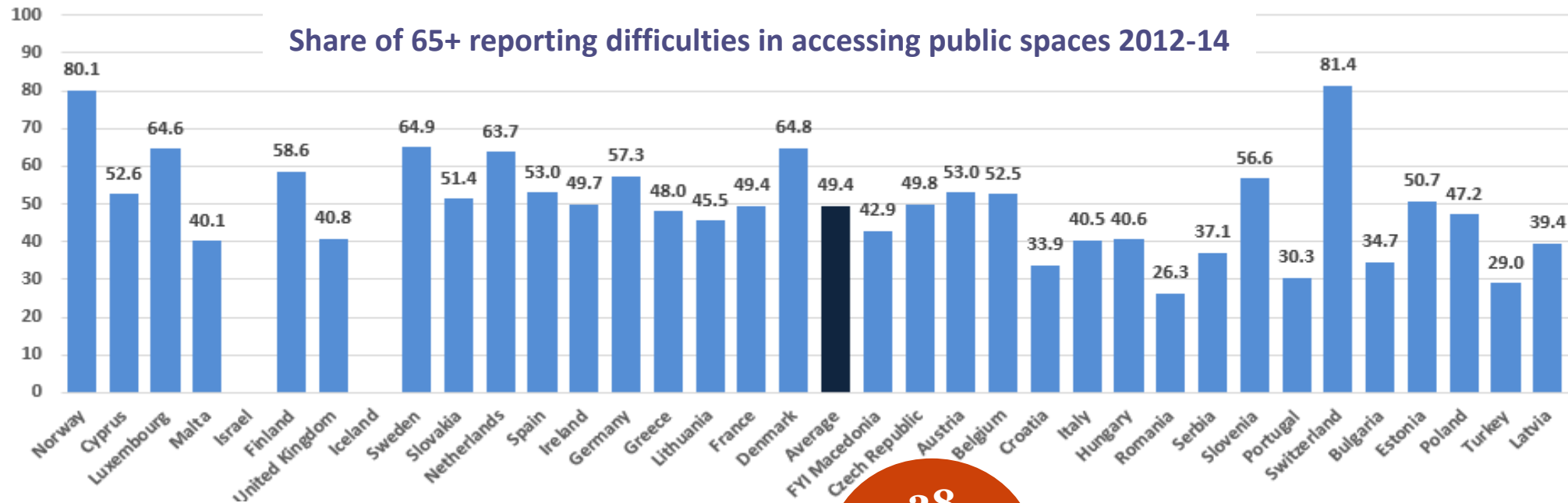
na

2

2

2

Score: 100-75 74-50 49-25 24-0



Source: Own calculations based on ESS 2012-14.

Note: Defined as answering „easy“ to all categories: a) Bank b) Transportation c) Cinema, theater d) Recreational and green spaces e) Grocery shop, supermarket

# Right to preventive health care

## EU Charter of Fundamental Rights

Art. 35: Health care

Everyone has the right of access to **preventive health care** and the right to benefit from **medical treatment** under the conditions established by national laws and practices.

# Access to preventive health care

## VIII. Highest standard of health

Austria\*

20.7

Sweden

100.0

Slovakia

64.5

Poland

54.0

1.1 Legislation provides for equal access to preventive, mental health care, dental care, and medication

na

3

3

3

1.2 National legislation or strategy on the integration of health and long-term care and support

1

3

2

1

2.1 National policies or guidelines on implementing measures for older persons to access preventive, mental health care, dental care, and medication

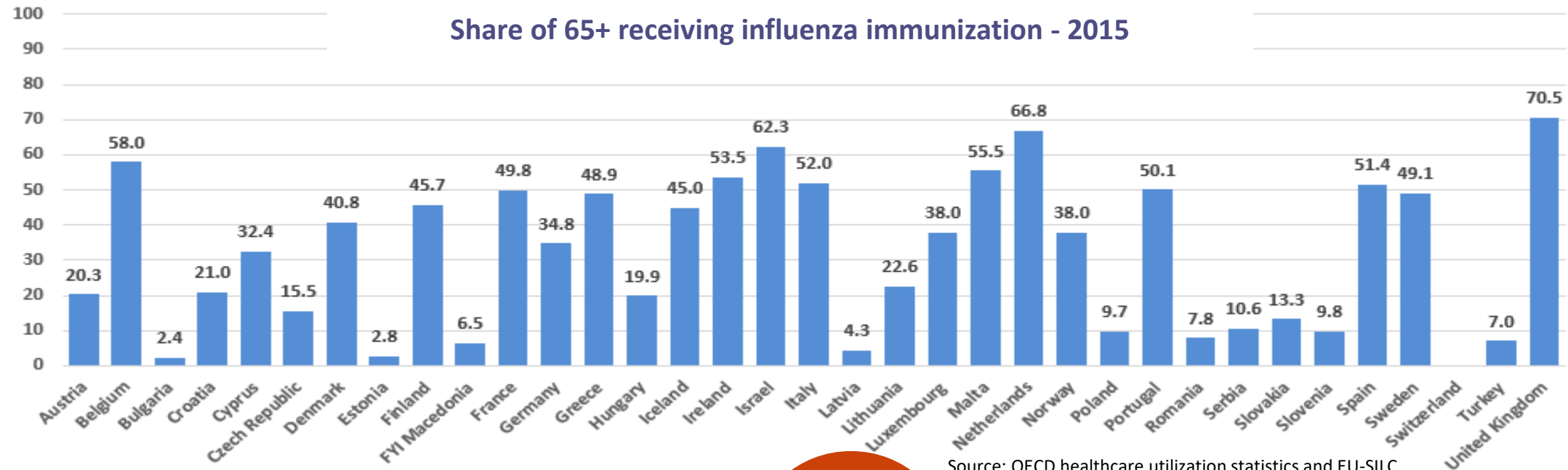
2

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2

3

Score: 100-75 74-50 49-25 24-0



Source: OECD healthcare utilization statistics and EU-SILC

# Why we need a life-course approach to the rights of older people

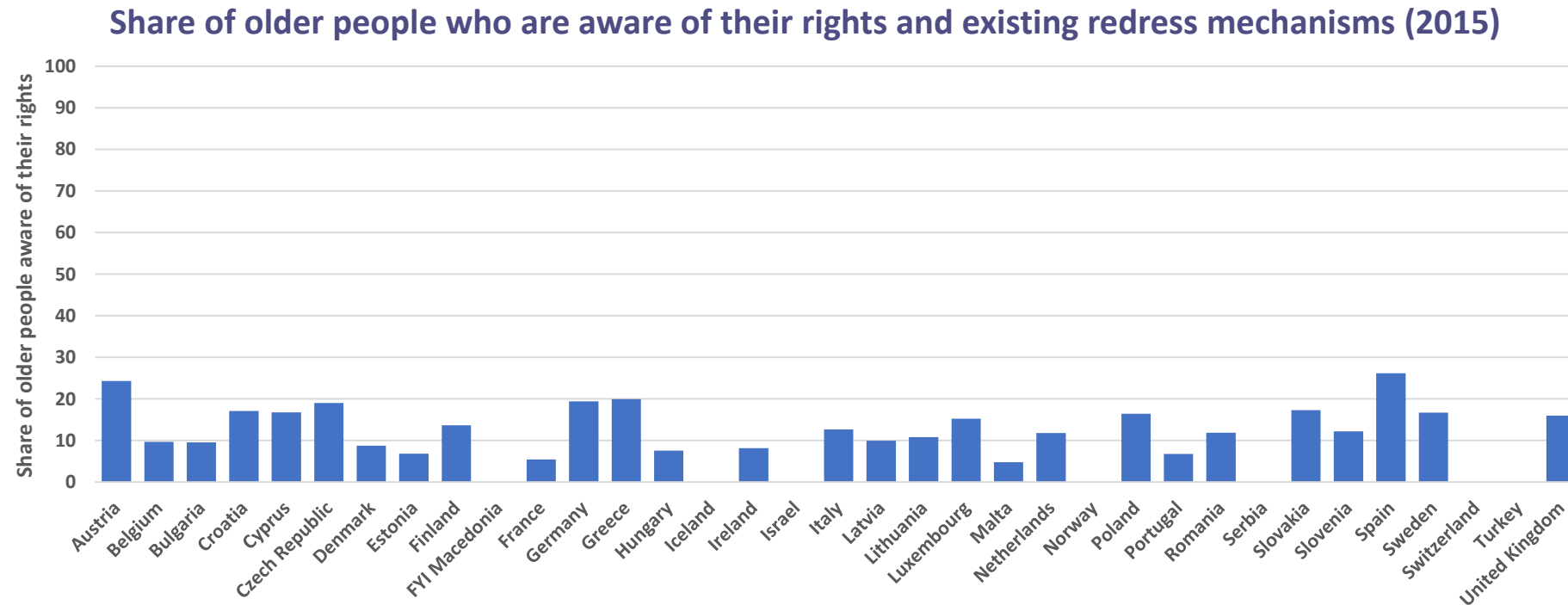
- Situation of older people determined by previous life-course choices and circumstances→“ontological precarity” (Lain et al, 2018):
  - Health: social determinants of health (WHO, 2018)
  - Material situation: pension, assets, demand for labour/job supply
  - Social capital: social networks, living arrangements
- Limits to workfare: when gainful employment is no longer an option
- Pensions & life-course: widowhood & gender, retirement age & social class
- A rights-based approach vs active ageing approach

# Conclusions, discussions, provocations...

- Changing world: right to basic income but no longer right to work?
- All life course events/transitions need housing policy intervention?
- Housing as an essential need (assistance to vulnerable, low-income groups) vs housing as a choice (mortgage interest tax reliefs, subsidized loans for home-buyers)
- Rights along the life-course
- An intergenerational life-course perspective: informal care, monetary transfers, living arrangements



# „Know your rights Oh, know your rights“ (The Clash)



Source: Eurobarometer 416 on Awareness of the EU  
Charter of Human Rights

# Thank you!

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DG Employment, Social Affairs & Inclusion,  
European Commission



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Katrin Gasior	Veronica Sandu
Katarina Hollan	Katharine Schulmann



# **Employment over the life-course in Europe**

Results of current research activities

Anette Scoppetta, Gudrun Bauer and Sonila Danaj

EUROPEAN CENTRE FOR SOCIAL WELFARE POLICY AND RESEARCH



# Employment trajectories ...

... are **central** for the design and implementation of policy measures

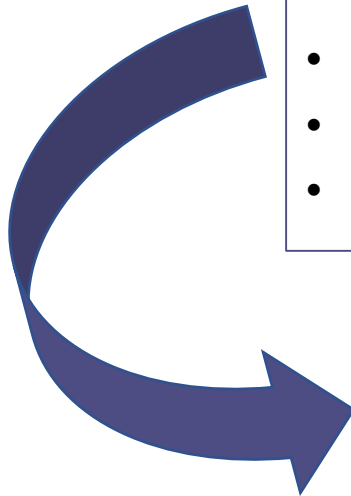
European Centre's response to the need for taking individual's employment trajectories into account when designing and implementing measures in this presentation derive from **three distinct cases**:

- ✓ Risk profiling of LTU (Long-Term Unemployed)
- ✓ Long-term Care
- ✓ Working across borders

# Employment research including the life-course perspective

## Principles in life-course theory

- Lifelong development: early experiences affect later life
- Agency: individuals take decisions (opportunities and constraints)
- Context: time and place
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- Linked lives (family and kinship, friendships ...)
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- Addressing cumulative inequalities
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- **How to design policies to positively impact on specific trajectories**
- The end of the traditional 'old-age dependency ratio'?
- ...

# Potentials and caveats of risk profiling of LTU (Long-term unemployed)

- ✓ (LTU) Jobseekers are **profiled** in most EU countries by PES (Public Employment Services)
- ✓ EU countries use **statistical profiling** to facilitate **qualitative assessment**
- ✓ There is **no clear trend** observed in the EU-MS but rather diverging developments in relation to the intensity of using profiling and early intervention strategies

- ❖ **Pros:** Early intervention options, adapting approaches targeted to the needs of the unemployed, overall decrease of periods of unemployment, cost savings, reduction of the caseload of counsellors
- ❖ **Cons:** missing evidence, concerns about the accuracy of profiling tools, ethical and data security issues.

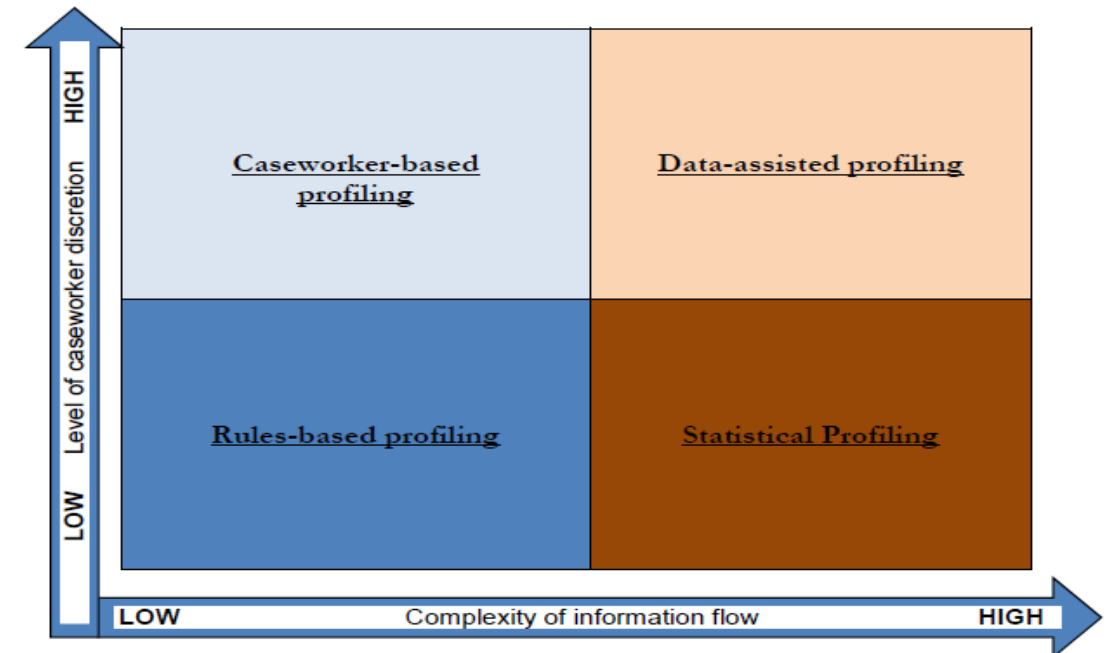
# What is Risk Profiling?

Definition: “Identifying those at most risk of becoming LTU: It compares the characteristics of individuals newly unemployed to those of the LTU to estimate their chances of getting a job, so that appropriate preventative measures through ALMP can be initiated to reduce the ‘flow’ of individuals into LTU” (Employment Thematic Network, 2017).

→ Profiling thus can be regarded as a **systematic (qualitative and/or quantitative) assessment of the individual employment potential** to identify and implement the most appropriate services that help the client through the whole integration chain.

**Study and Discussion paper** in the framework of the **Thematic Network Employment** (ESF Transnational cooperation; 2017/11 – 2019/07); AEIDL by order of the DG Employment, Social Affairs and Inclusion, European Commission.

Analytical framework: *Classification of Jobseeker Profiling Systems*



Source: Loxha and Morgandi, 2014, p. 13

# The four types ...

- ❖ **Caseworker-based profiling**: Caseworkers are *solely responsible*; qualitative methods (interviews); jobseekers' specific needs are addressed; may not be so efficient and susceptible to discrimination (Konle-Seidl, 2011). Example: **Denmark**.
- ❖ **Rules-based profiling**: either applied with a *time-based* (with e.g. length of unemployment) or with a *demographic segmentation* (e.g. age, gender); not cost-intensive. Example: **UK, NL** (time-based segmentation).
- ❖ **Statistical profiling**: analysis of *demographic and socioeconomic data* on jobseekers; segmentation based on risks of remaining unemployed; objective standardized assessments; early identification of high-risk jobseekers; highly dependent on (good quality of) available data; high setup costs. Examples: **USA, AUS**.
- ❖ **Data-assisted profiling**: *caseworkers plus quantitative data analysis*; the most differentiated approach; can enhance objectivity. Examples: **SE, IE (with its PEX model), DE**.



# Data-assisted profiling – some cases ...

<b>Title</b>	<b>PEX (Probability of Exit tool)</b>
<b>Country</b>	Ireland
<b>Type</b>	<i>Data-assisted profiling system</i>
<b>Rationale</b>	Ireland introduced the PEX system in 2012 as a reaction to the post 2008 increase in unemployment to reduce the number of individuals incorrectly identified for intervention by the rules-based approach used before and to save government resources. The profiling with the PEX model provides the possibility to identify jobseekers with a high likelihood of remaining LTU who can thus immediately be allocated to re-employment services (O'Connell et al., 2012).
<b>Time</b>	The PEX-model is in place since 2012.

<b>Title</b>	<b>Profiling as step within the 4 Phases Model</b>
<b>Country</b>	Germany
<b>Type</b>	<i>Data-assisted profiling system</i>
<b>Rationale</b>	As part of the so called <i>Hartz Reforms</i> (2003-2005), which were a reaction to high rates of unemployment, a profiling system was introduced in Germany. The results are used to diagnose a jobseeker's distance from the labour market and to identify individual support needs by segmenting customers into different support profiles that determine the allocation of resources and serve as an input for the computer assisted matching of job-seekers to job vacancies (Arnkil et al., 2007; Barnes et al., 2015; Eichhorst et al. 2006).
<b>Time</b>	Profiling in Germany is in place since 2005.

# Risk profiling takes place at a specific moment in time and life of an individual

- ❖ **Socio-economic history of the individuals** are included in the all types of risk profiling
- ❖ Problems are observed regarding the **low usage** of the tools by counsellors (Training for PES staff thus is urgently needed)
- ❖ Research suggests that the **role of the caseworker** is a key success factor (Barnes et al. 2015)
- ❖ **Evidence-based policy?**
  - ✓ **Missing proof on efficiency gains:** only few studies are available that have tried to quantify the possible efficiency gains of profiling and early intervention
  - ✓ An evidence gap exists also with respect to the **impact of different service delivery systems** on on/off-flow rates from unemployment or benefit receipt (Konle-Seidl, 2011)

Statistical profiling of those at risk can only be recommended as a complementary practice to support caseworker assessment



Profiling activities are only the starting points. What needs to follow are comprehensive activation measures to best serve the most vulnerable with all available resources of both the labour market and social assistance/ social services/social security



# Potentials and challenges of working in the LTC sector

## NORDCARE Austria: Working conditions of the LTC workforce in Austria

Project team: Ricardo Rodrigues, Gudrun Bauer, Kai Leichsenring

EUROPEAN CENTRE FOR SOCIAL WELFARE POLICY AND RESEARCH



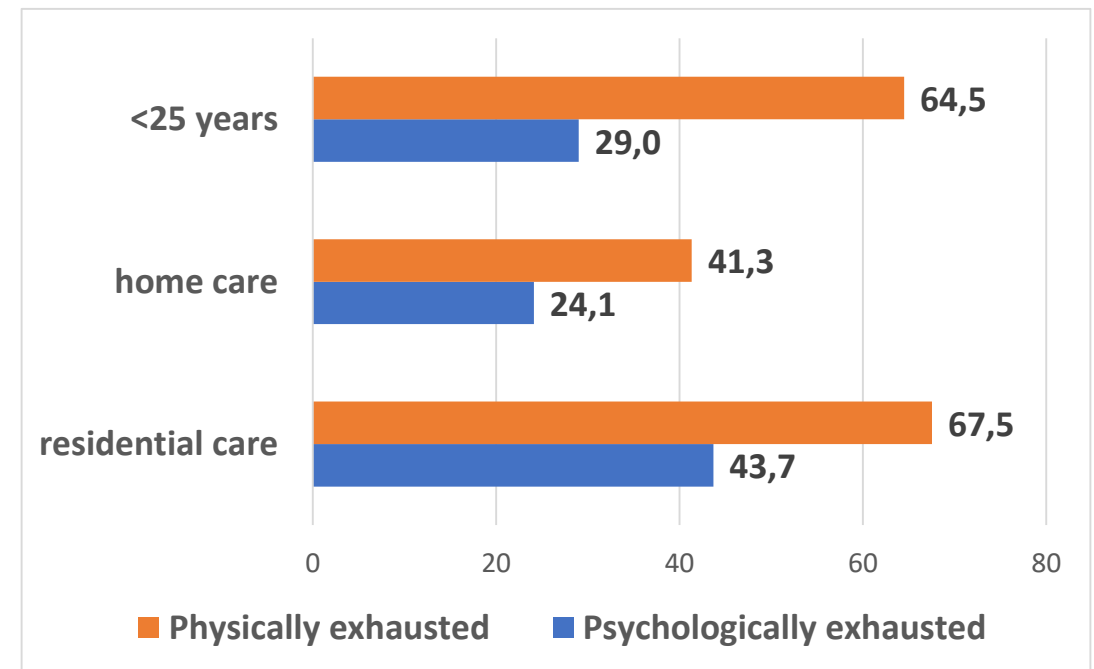
## Potentials and challenges of working in the LTC sector

### Key Challenge – to meet the demand and to secure a sustainable LTC workforce

#### Early working experiences affect employment in LTC

- High levels of strain among young LTC workers
- Younger care workers <25 years see no future perspectives in LTC work

#### Regularly experienced exhaustion levels in LTC



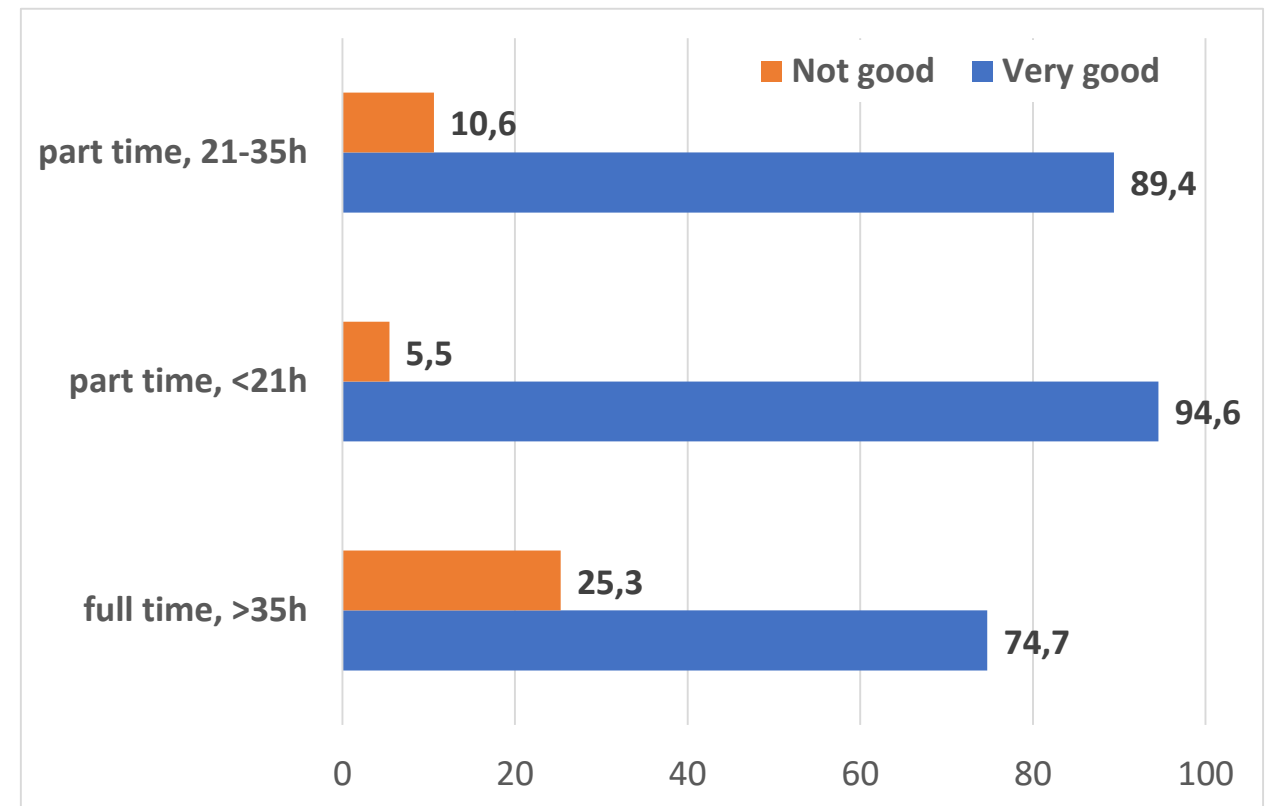
Source: Bauer et al., 2018

## Potentials and challenges of working in the LTC sector

### Juggling employment and informal obligations

- Middle-aged, female workforce, children under 20 years (42%), informal care obligations (30%), multiple informal obligations (12%)
- Part-time work and/or changing within the LTC sector as individual strategies

#### Reconciliation of work and family obligations



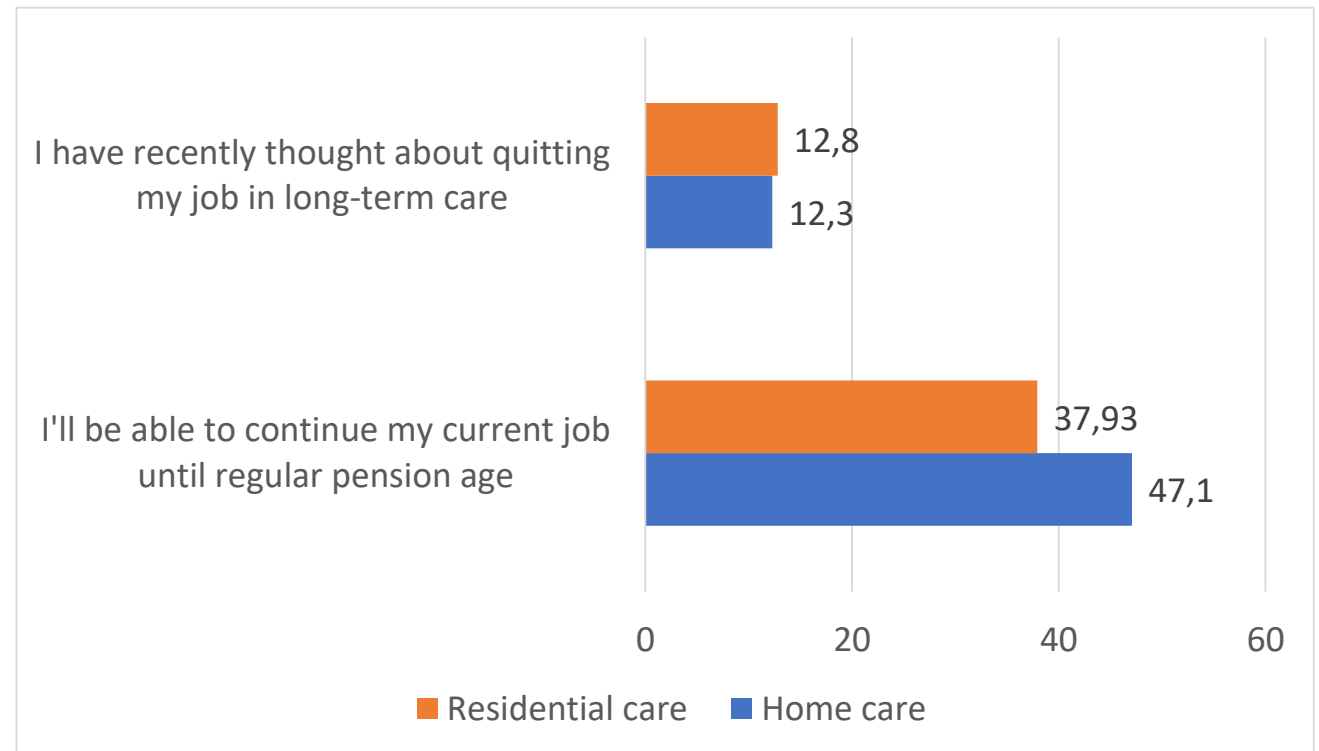
Source: Bauer et al., 2018

## Potentials and challenges of working in the LTC sector

### Health status determines retention in LTC work

- Long-term employment in LTC is shaped by high levels of burdens and experiences in deteriorating working conditions
- Organizational characteristics and the subjective health status influence future employment considerations

#### Continuity of career prospects in LTC



Source: Bauer et al., 2018

# Potentials and challenges for securing a sustainable LTC workforce, such as...

- **High levels of demands and strain, health impairments** and the **prevalent readiness to quit** are major challenges:
  - Early interventions concerning prevention and health-promotion are necessary in order to secure human resources for the long-term
- **Part-time employment** serves as a **strategy to reconcile work and family** but also to **cope with high demands** in LTC work
  - Adverse effects of part-time employment for a female-dominated sector:  
Reconsidering the definition of “full-time” employment specific to working sectors?

# Potentials and challenges of working across borders in Europe

Researchers involved: Sonila Danaj, Katarina Hollan, Eszter Zolyomi, Anette Scoppeta



- POOSH: Occupational safety and health of posted workers



**EEPOW**

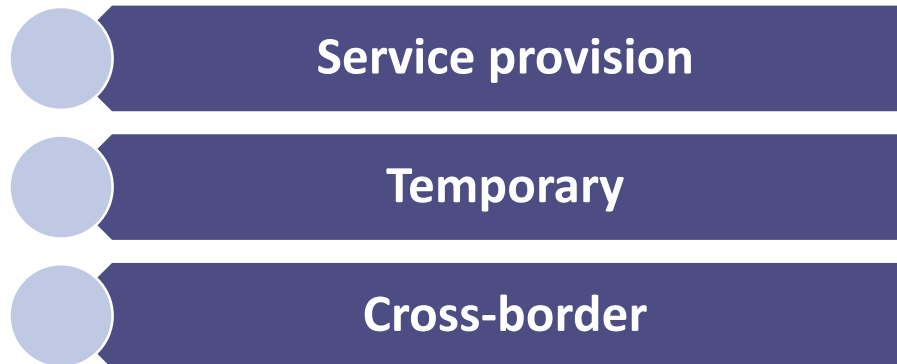
Posting Of Workers In Eastern Europe

- EEPOW:  
Posting of Workers in Eastern Europe

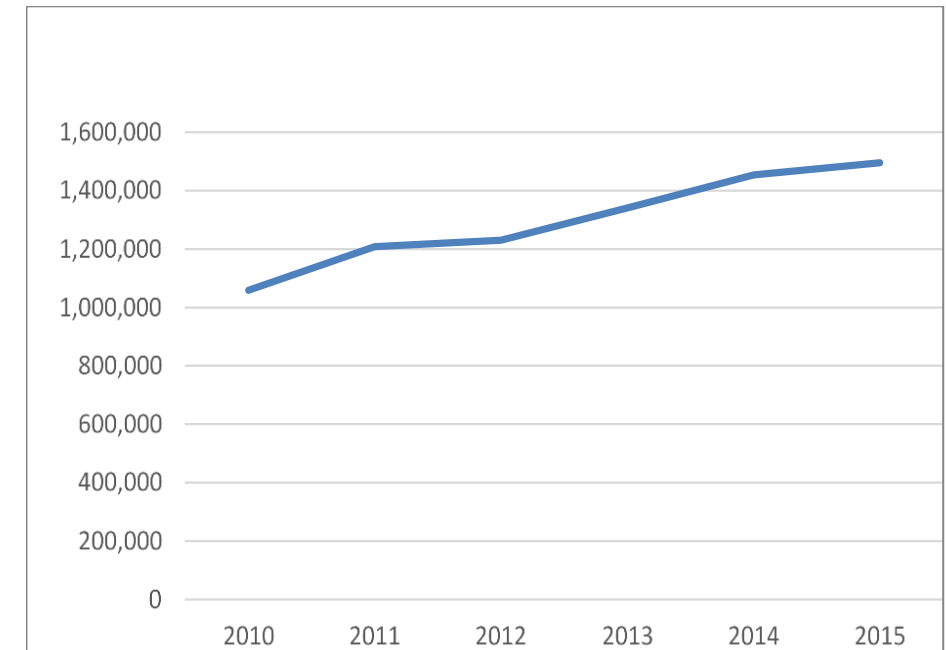


## Working Across Borders in Europe

Posting of workers:  
sending workers from one EU MS to another  
for a period of time to complete a task  
(Posting of Workers Directive (96/71/EC))



Total PD A1 for posted workers issued in EU+, 2010-2015



Source: Own representation with data from Pacolet & De Wispelaere, 2016

## Working Across Borders in Europe: Reported Vulnerabilities 1

	BE	DE	ES	HR	IT	AT	RO	SI	SK
<b>Employment and contractual conditions</b>									
Lack of information about terms and conditions	•	•	•	•	•	•	•	•	•
Limited or no access to collective representation	•	•	•		•	•	•		
Limited or no access to regulatory protection	•	•			•		•	•	
Limited or no access to training (incl. on OSH)				•			•	•	
Irregular documentation		•		•	•			•	•
<b>Wages and social security</b>									
Wage dumping (i.e. below national minimum or provided by collective agreements)	•	•	•		•	•	•	•	•
No or irregular payment of overtime	•				•				
No or irregular payment of taxes/social contributions in country of origin	•		•		•	•	•	•	
<b>Working conditions</b>									
Working time issues (i.e. extended work hours, frequent overtime, weekend work)	•			•	•	•	•	•	•
Lack of or inadequate protective equipment/material	•				•		•	•	•

## Working Across Borders in Europe: Reported Vulnerabilities 2


	BE	DE	ES	HR	IT	AT	RO	SI	SK
<b>Health care</b>									
Access to healthcare		•				•	•	•	•
Lack of information on health care system in receiving country	•	•			•	•		•	
No or insufficient health insurance coverage		•					•	•	•
<b>Housing/Accommodation</b>									
Access to accomodation	•	•			•		•		
Poor quality of accommodation (i.e. overcrowding, lack of amenities)	•	•	•	•	•		•		
Problems related to costs of accommodation	•	•	•		•		•		•
<b>Language barriers</b>	•	•	•	•	•	•	•	•	•
Social isolation/Disconnectedness		•	•		•	•	•	•	•

## Working Across Borders in Europe

### Factors Influencing Posted Workers' OSH Vulnerabilities

The interplay of

- temporariness and cross-border mobility
- dependence on the employer (including irregular employment/posting)
- Extended work time and intensity
- complex national systems (regulations, institutions, mechanisms of protection, and grievance procedures)
- growing but still insufficient exchange and communication between public authorities within and across borders
- language barriers



often leads  
to ...

- Turning a blind eye to OSH-related risks, and
- Not reporting irregularities and violations


Ultimately resulting in

- ❑ **High Risk of Accidents and Illness**
- ❑ **Insufficient or no health protection and care in case of accidents and occupational illness**

## Working Across Borders in Europe

### Cross-Border Labour Mobility and Life-Course Perspective

The transition from one national labour market to another within the EU, albeit temporary and because it is temporary, creates a disruption in the OSH protection of (posted) workers, thus exposing them to multiple vulnerabilities with negative consequences to their OSH.



Life-course perspective could fit very well in studying working life trajectories, in particular transitions from one national labour market to another (and simultaneously from one national OSH, health, or social protection system to another).



When designing policy interventions, policy-makers should take into account both the cross-border and temporary mobility of posted workers as well as the legal implications of posting as movement of services rather than people.

# Employment research including the life-course perspective

## The Theory: Principles in life-course theory

- Lifelong development: early experiences affect later life
- Agency: individuals take decisions (opportunities and constraints)
- Context: time and place
- Timing of various life-events
- Linked lives (family and kinship, friendships ...)
- Multidimensional: transitions and trajectories

## The Practice

- **Interventions yet often are taking place in a specific moment in time and life of an individual and do not fully address the life course of the individual**
- **The LTC work is not yet made sustainable throughout the life-course**
- **Cross-border and temporary mobility of posted workers are to be regarded as movement of services rather than of people**

# Thank you very much for your attention!

If you want to further discuss the projects we described, please do not hesitate to contact us:

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[bauer@euro.centre.org](mailto:bauer@euro.centre.org)

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# **Social and health services over the life-course**

Needs, preventive approaches and technological solutions

Rahel Kahlert, Sonila Danaj, Günter Stummvoll, Cees Goos, Christian Boehler

EUROPEAN CENTRE FOR SOCIAL WELFARE POLICY AND RESEARCH







# The need for social services over the life-course

The case of Kosovo

Rahel Kahlert – Sonila Danaj

EUROPEAN CENTRE FOR SOCIAL WELFARE POLICY AND RESEARCH



An EU funded project managed by  
the European Union Office in Kosovo

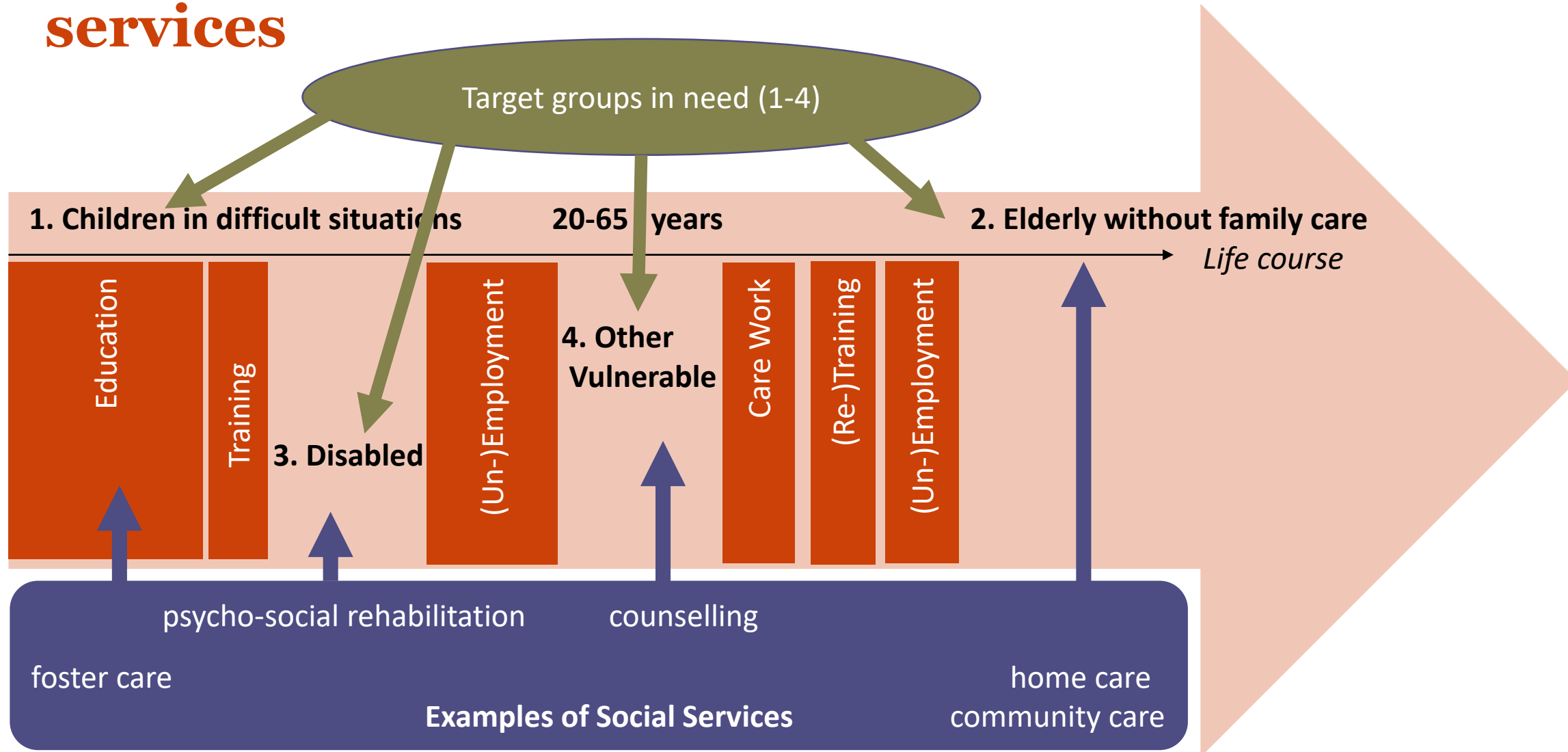


Sweden  
Sverige

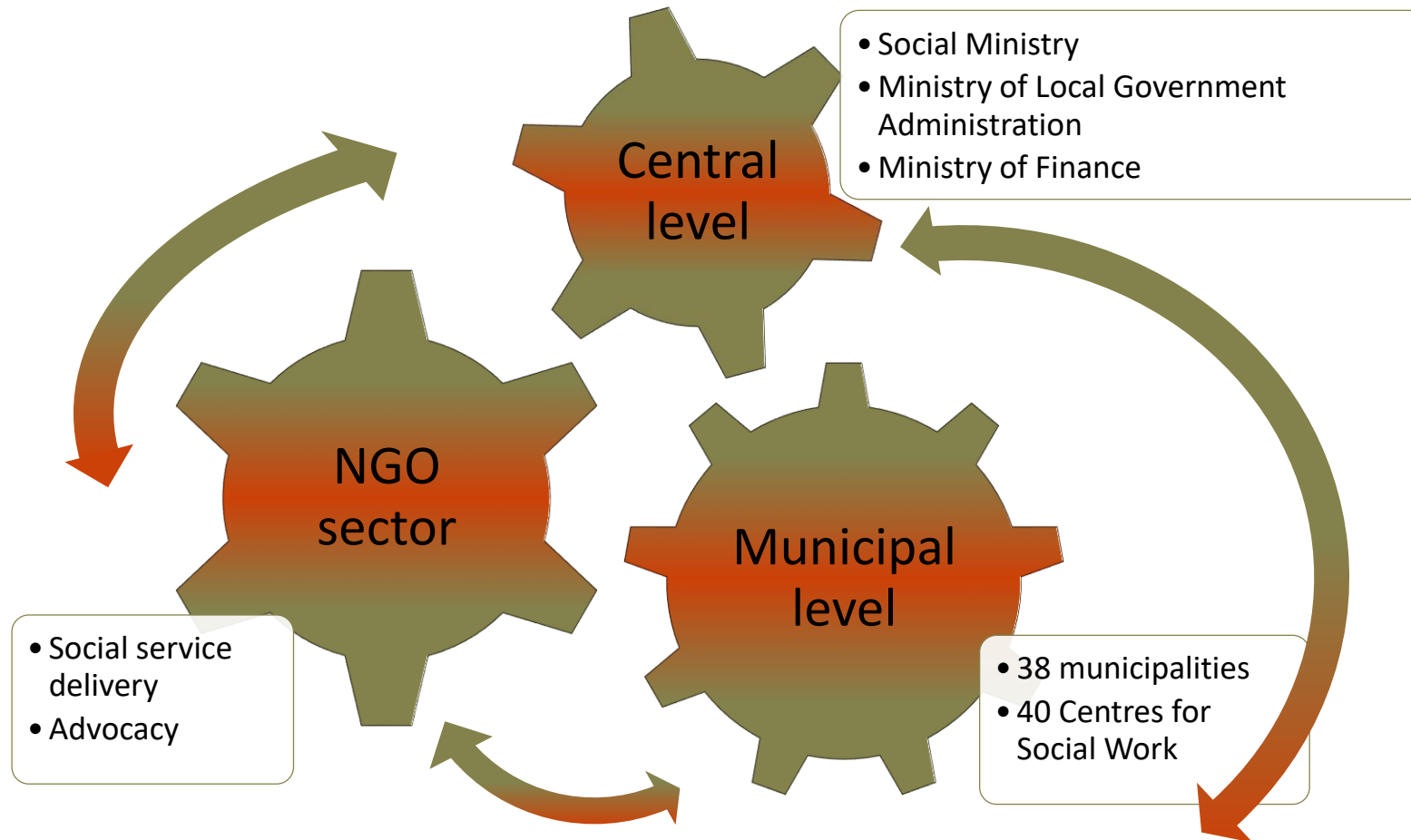


**Save the Children**

# Life course approach applied to social services



# Institutional setting requires close-knit collaboration



# Transfer of competencies regarding social services: From the central to the municipal level

Situation: Municipalities pay for social services from a general fund

Challenge: Social services are not a priority and thus remain underfunded

Solution: Specific formula for social services for 2019/2020

Allocation criteria: population size, geographic size plus vulnerabilities (e.g., children, elderly)

Municipal Action Plans: to be developed and monitored (local-level competence)



# Preventive approaches in social service provision

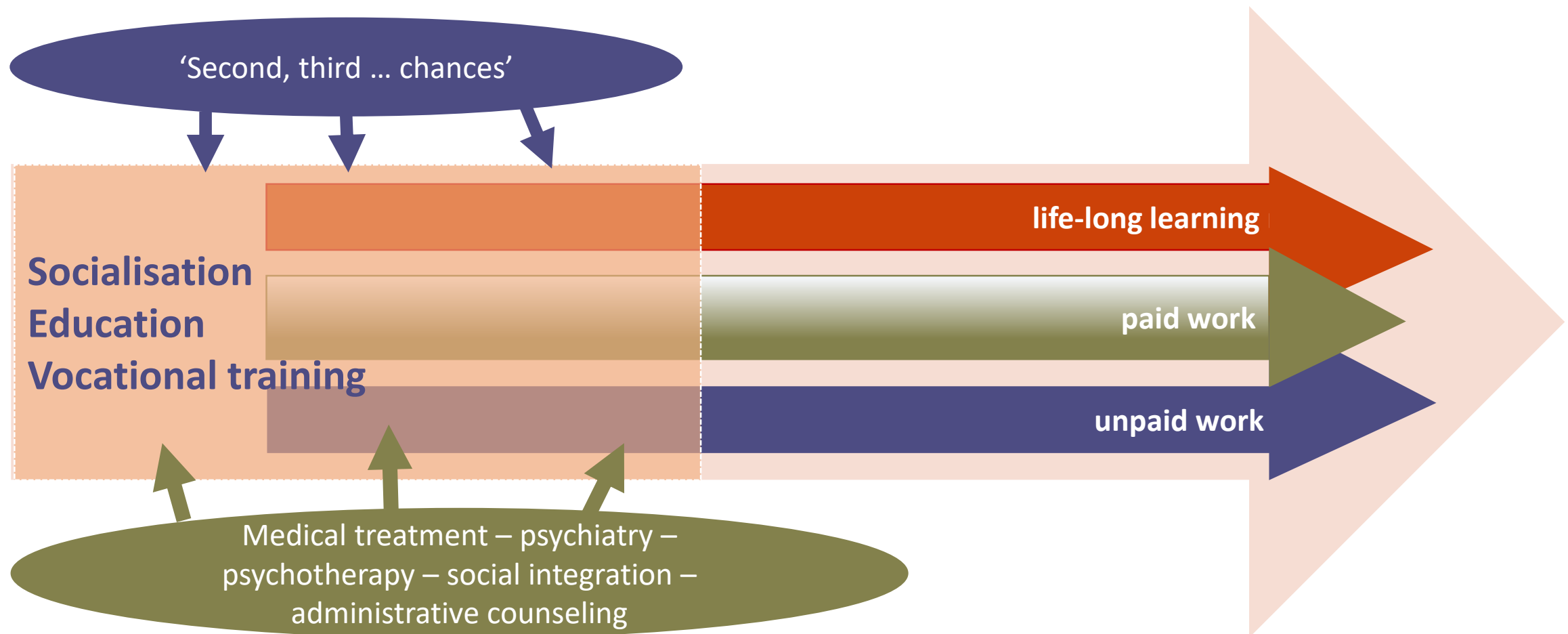
The case of young drug users

Günter Stummvoll – Rahel Kahlert  
Cees Goos

EUROPEAN CENTRE FOR SOCIAL WELFARE POLICY AND RESEARCH

GENERAL  
ASSEMBLY  
**2018**

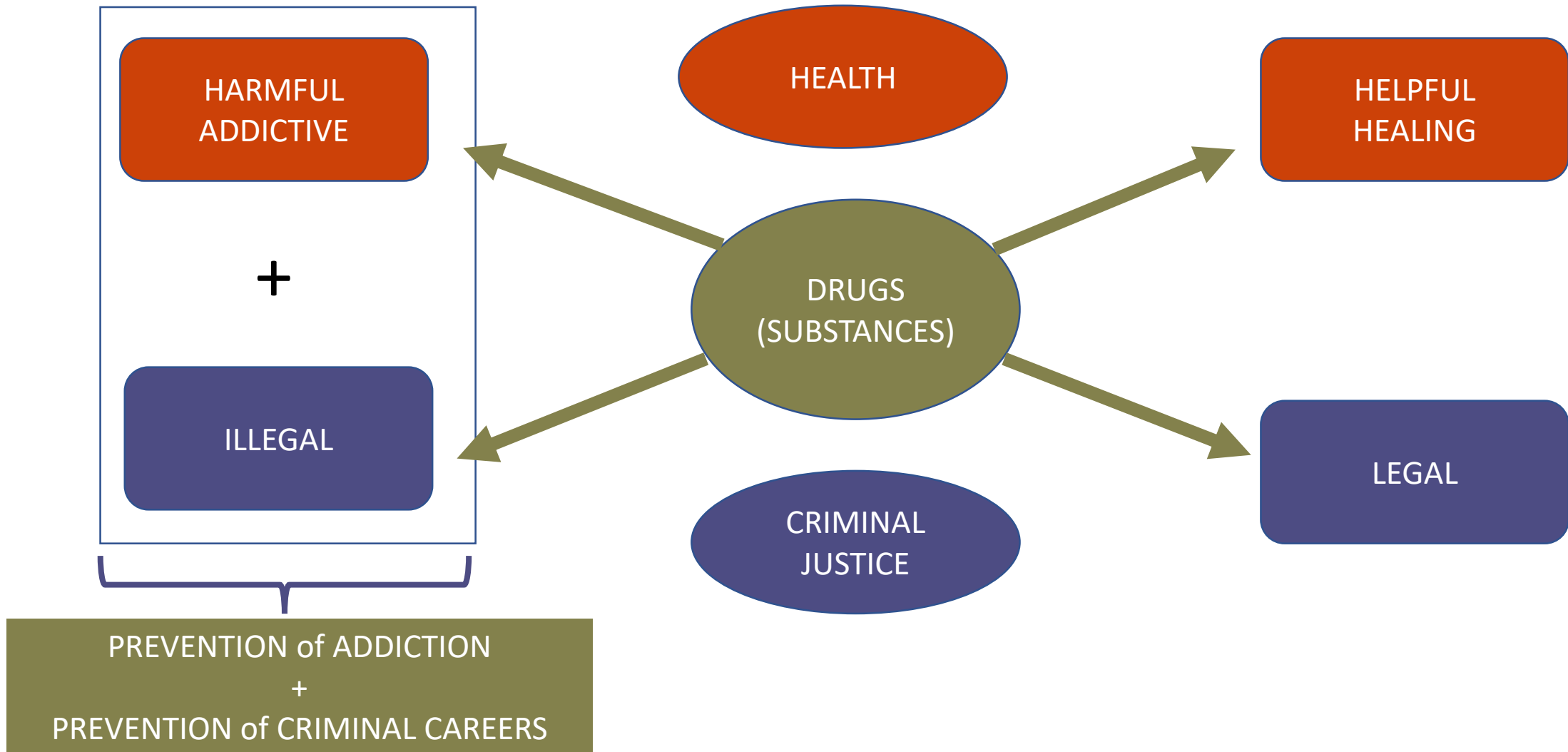
# The life-course approach: Juveniles and young adults



## Social and health services over the life-course:

- Age segment in the life cycle: Children, juveniles and young adults
- Health and criminal justice: Drug abuse is unhealthy **and** a crime
- Risk factors of developing drug careers: Onset – persistence – desistance  
Life course trajectories and transitions
- Institutional framework:
  - Exit points in restorative justice
  - Service provision for young drug offenders: Medical – psychiatric – psychological – social – administrative support
- Narratives and consideration of clients
  - Problem awareness: “I have it under control”
  - “Edgeworkers”: Voluntary risk taking; excitement; curiosity
  - Coercion to take treatment

# Drug abuse is unhealthy and a crime

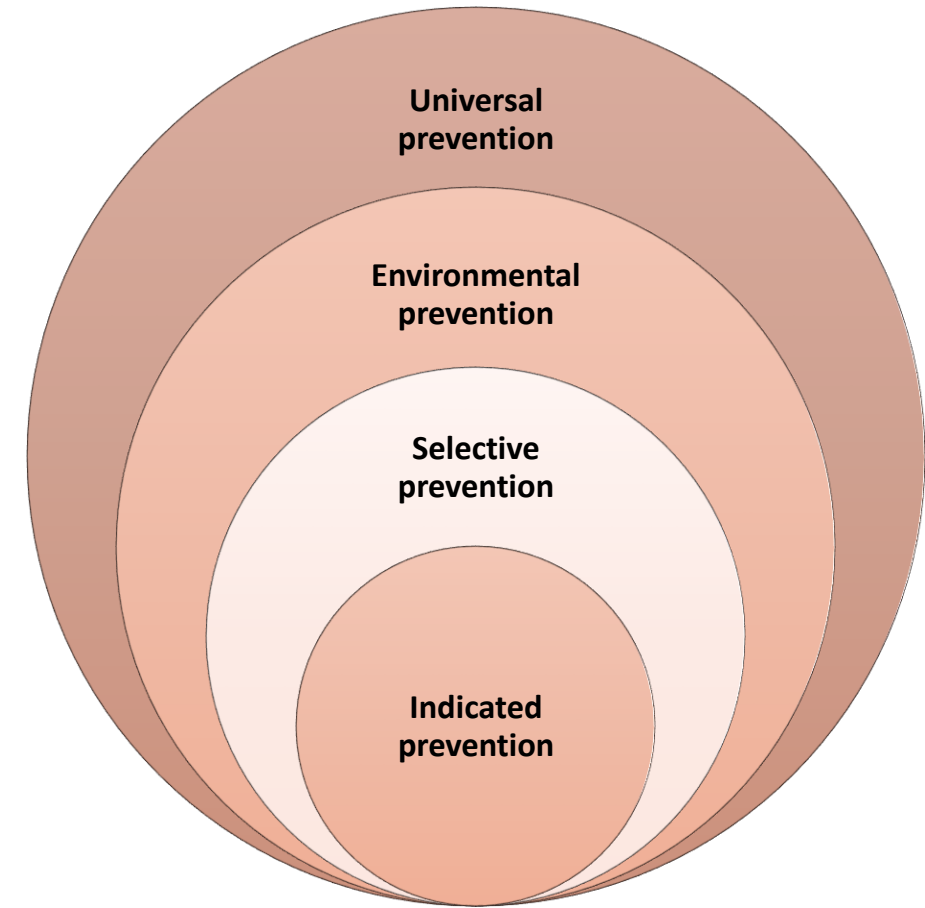




# Classification of „Prevention“:

EMCDDA - European Monitoring Centre for Drugs and Drug-Addiction

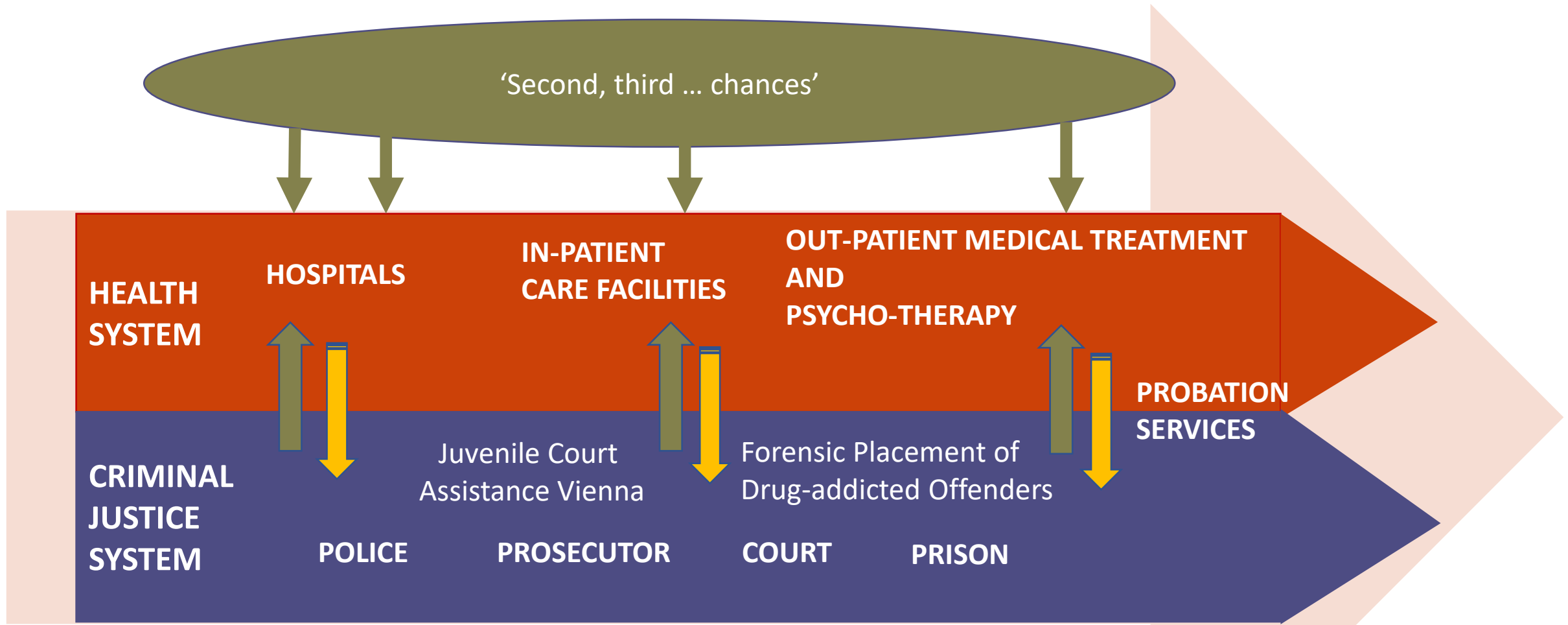
1. **Indicated prevention** addresses *vulnerable individuals* and helps them in dealing and coping with their individual *personality traits* that make them more vulnerable for escalating drug use.
2. **Selective prevention** addresses *vulnerable groups* where substance use is often concentrated and focuses on improving their opportunities in *difficult living and social conditions*;
3. **Environmental prevention** addresses *societies or social environments* and targets social norms including *market regulations*
4. **Universal prevention** addresses a *population at large* and targets the development of skills and values, norm perception and interaction with peers and social life.



# Risk factors for addiction and criminal careers

- Biological
- Psychological
- Family risk factors
- Peers factors
- School factors
- Neighbourhood and community factors
- Gender and risk factors

## Institutional Framework: Exit points in restorative justice



# **Austria: Interventions in health promotion**

## **(Gesundheitsbezogene Maßnahmen, §11/2 SMG - drug law)**

1. Medical surveillance of health status
2. Medical treatment including substitutional therapy
3. Clinical-psychiatric counselling and care
4. Psychotherapy
5. Psycho-social counselling and care

# Forms of Intervention

- Cognitive therapy
- Motivational interviewing
- Group therapy
- Systemic psycho-therapy
- Changing circumstances: job, education, structure of everyday life
- Holistic interventions: “global care for the person” or “multi-disciplinary integrated intervention”; “partnership approach”

# Narratives and consideration of clients

- Problem awareness: “I have it under control”
- “Edgeworkers”: Voluntary risk taking; excitement; curiosity
- Coercion to accept treatment



# Technological solutions as a panacea?

The case of assessing eHealth applications

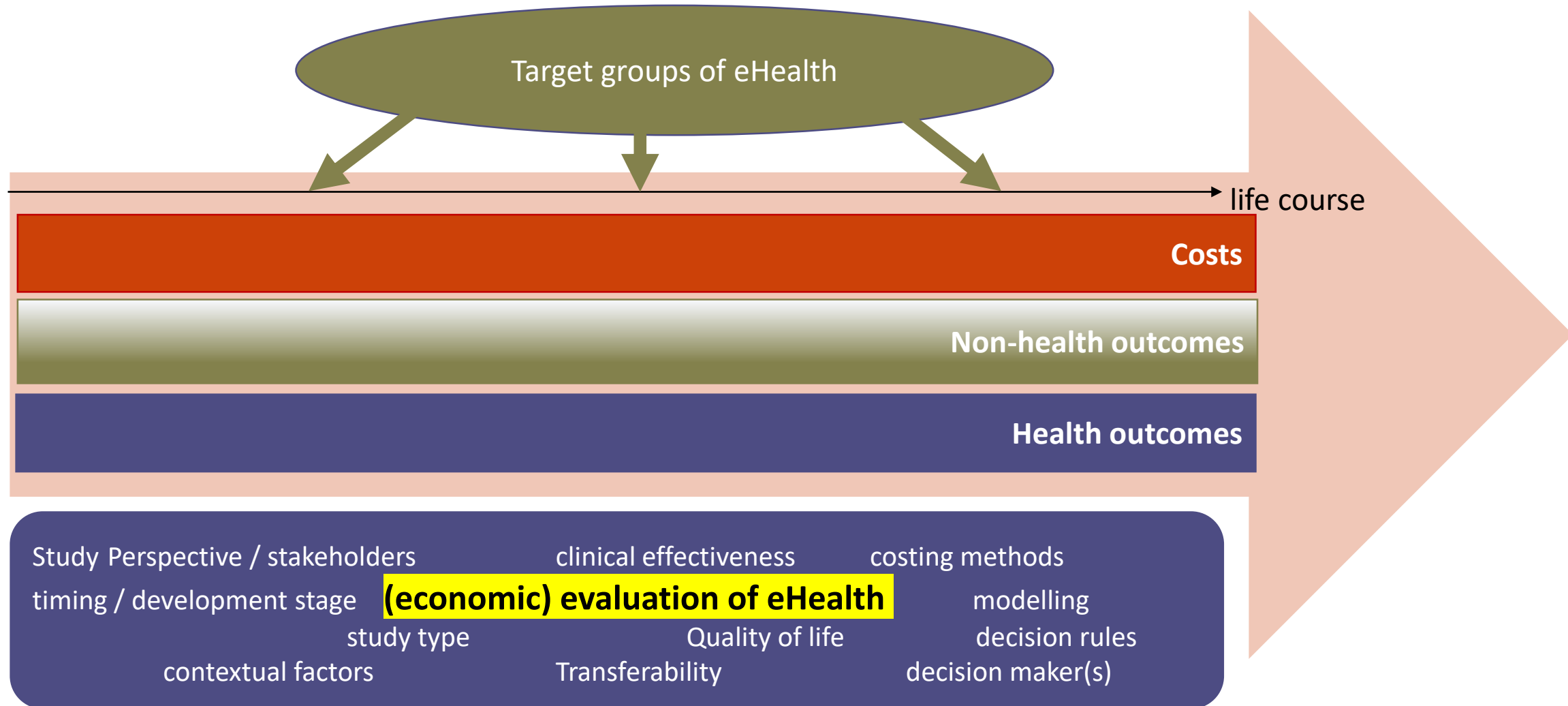
Christian Ernst Heinrich Boehler

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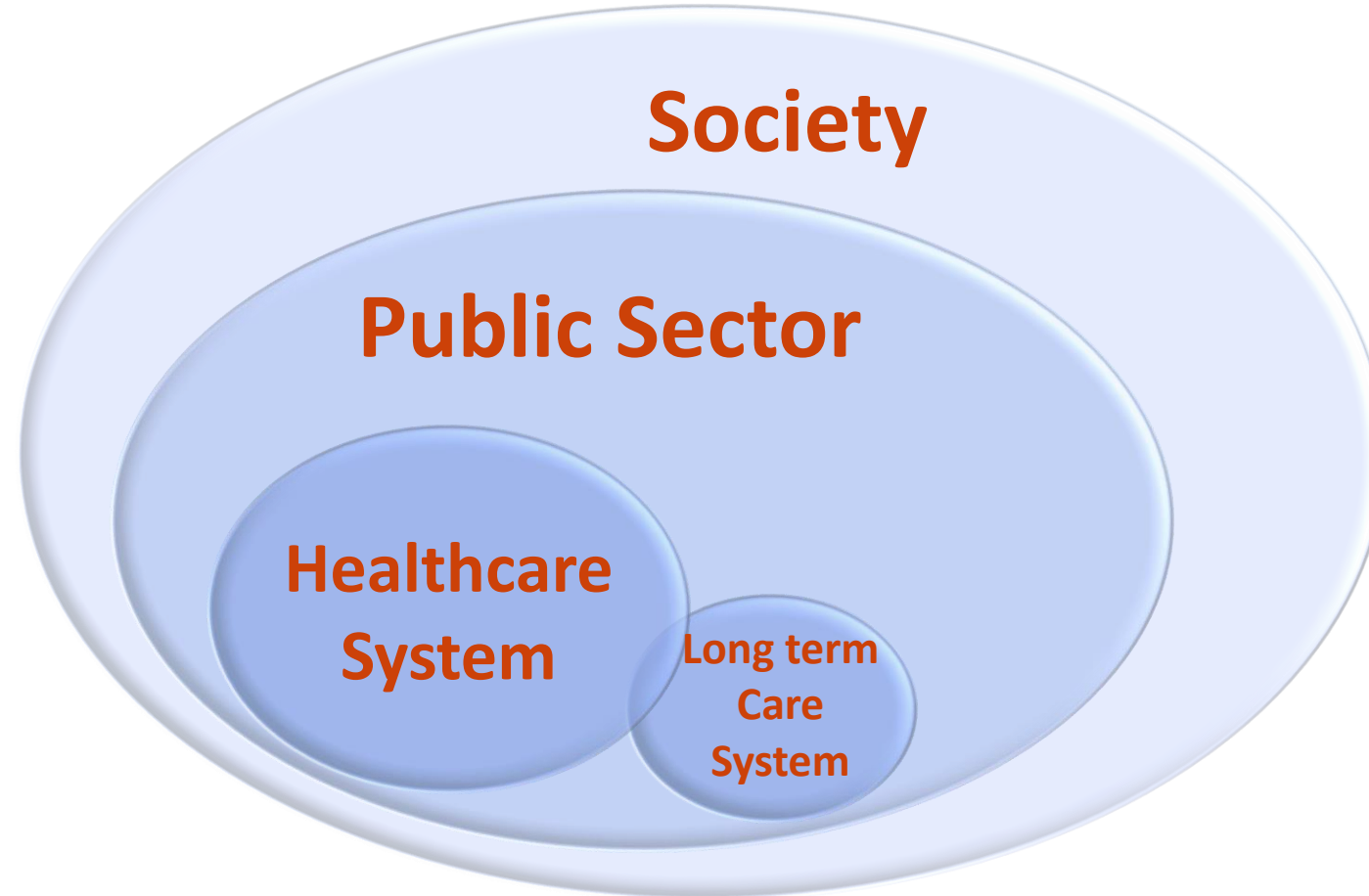
# eHealth over the life course

Technological solutions as a panacea?  
The case of assessing eHealth applications

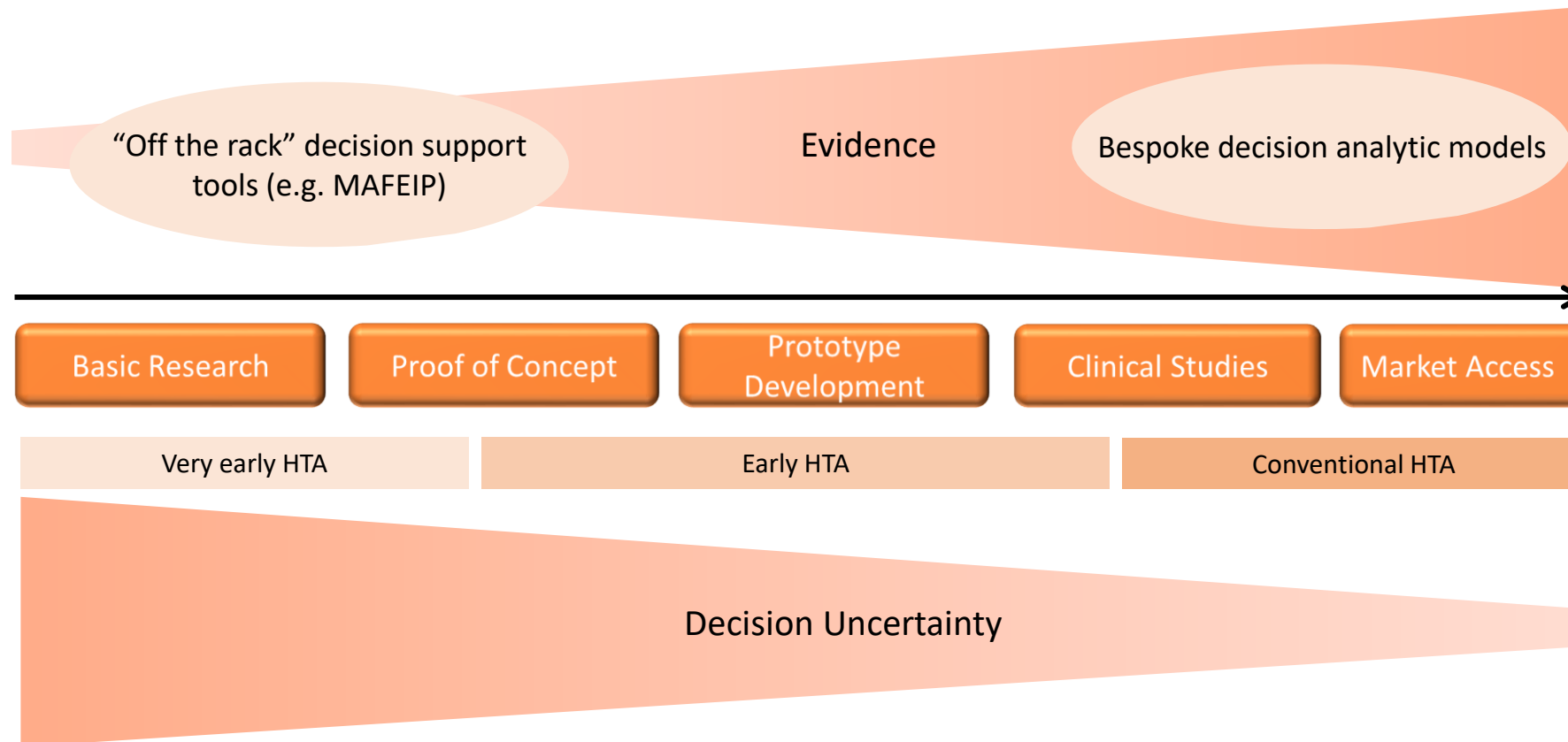




## Choice of Perspective

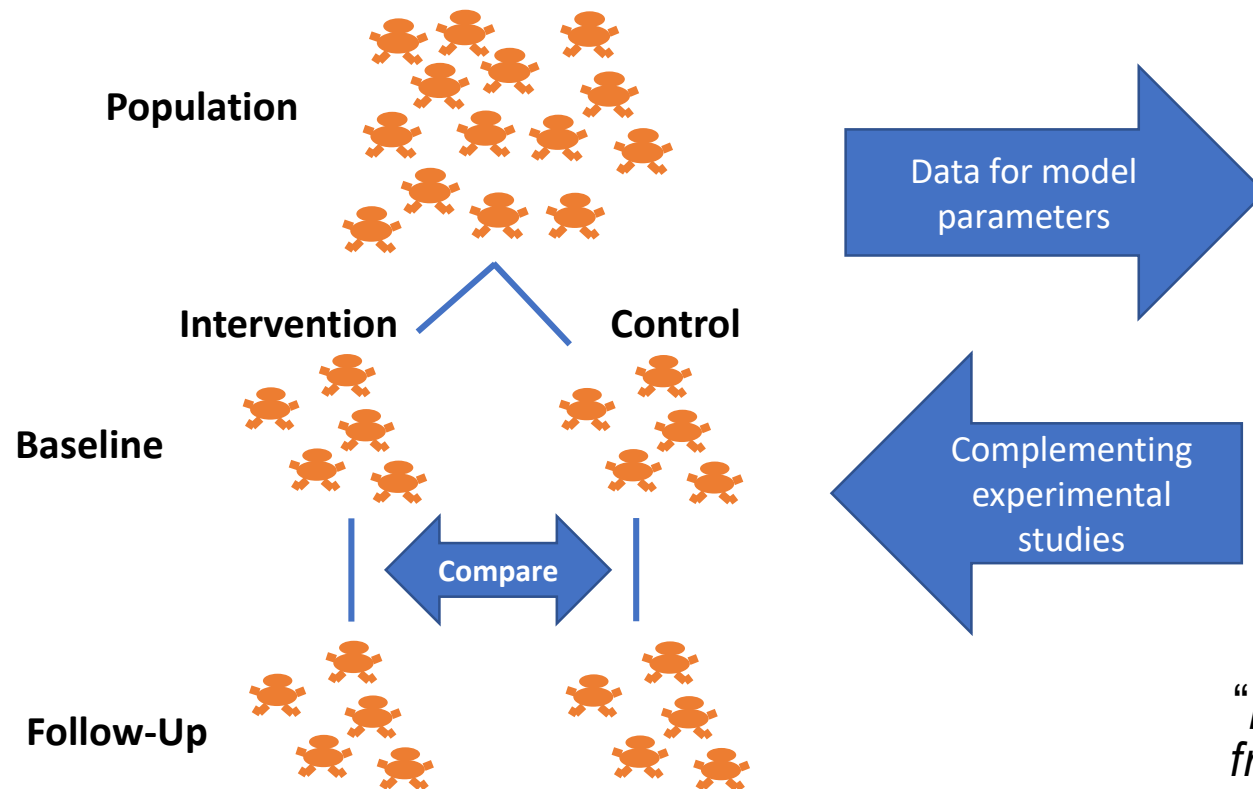


## Early and iterative technology assessment

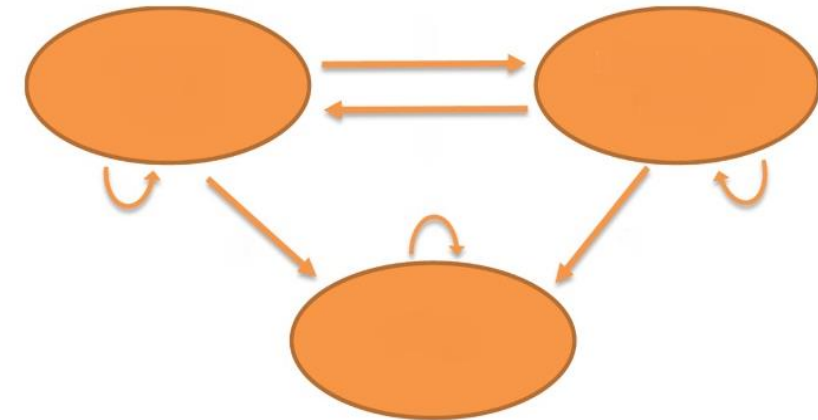


# Experimental studies vs. modelling

## Experimental studies

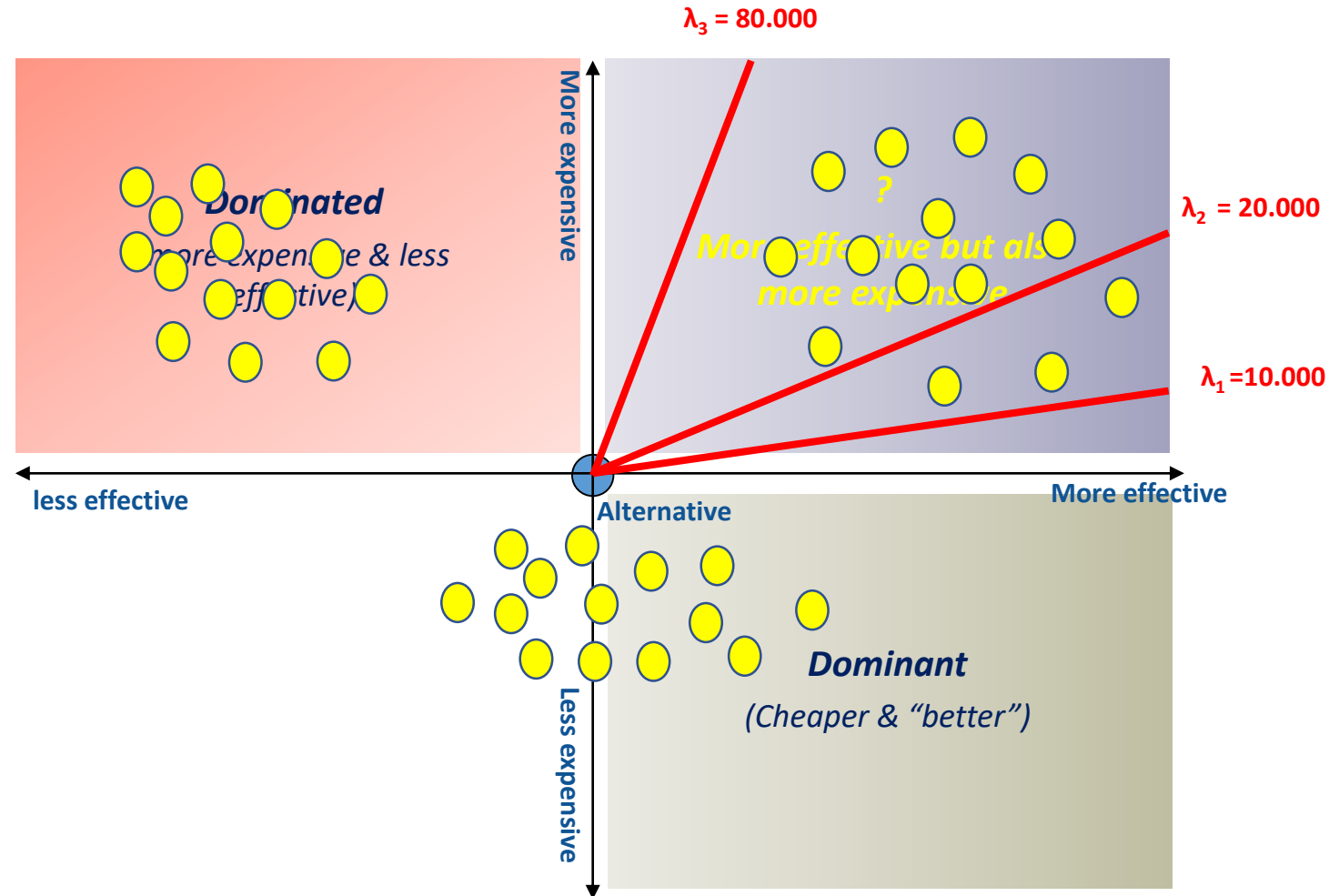


## Decision Analytic Modelling



*“pulls together the many needed pieces of information from multiple sources and then stitches them together into a (hopefully) cohesive whole” (O’Brien, 1996)*

## Decision rules & transferability





# **Social and health services over the life-course**

Policy and practice solutions of integrated services, user  
enablement and prevention

Anette Scoppetta and Ricardo Rodrigues

EUROPEAN CENTRE FOR SOCIAL WELFARE POLICY AND RESEARCH

GENERAL  
ASSEMBLY



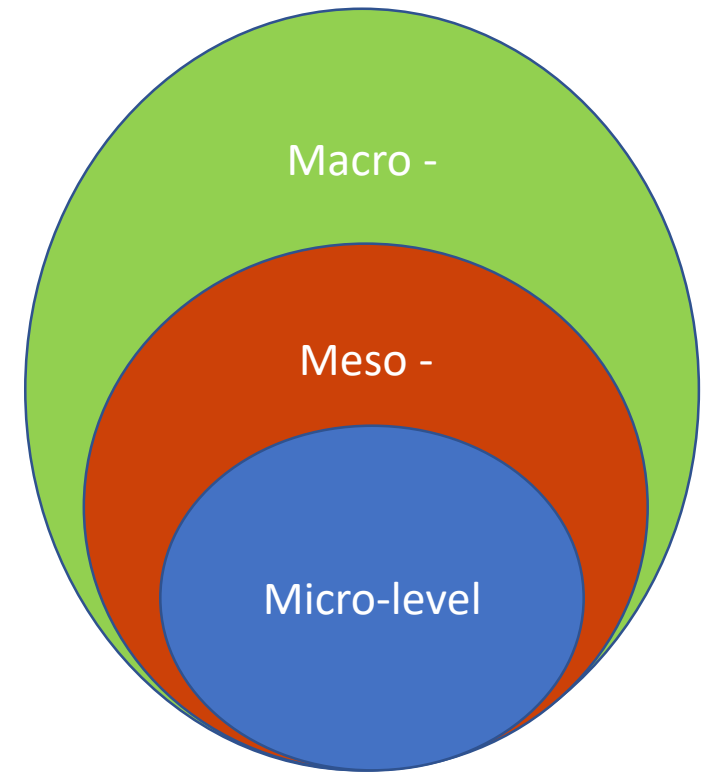
**2018**

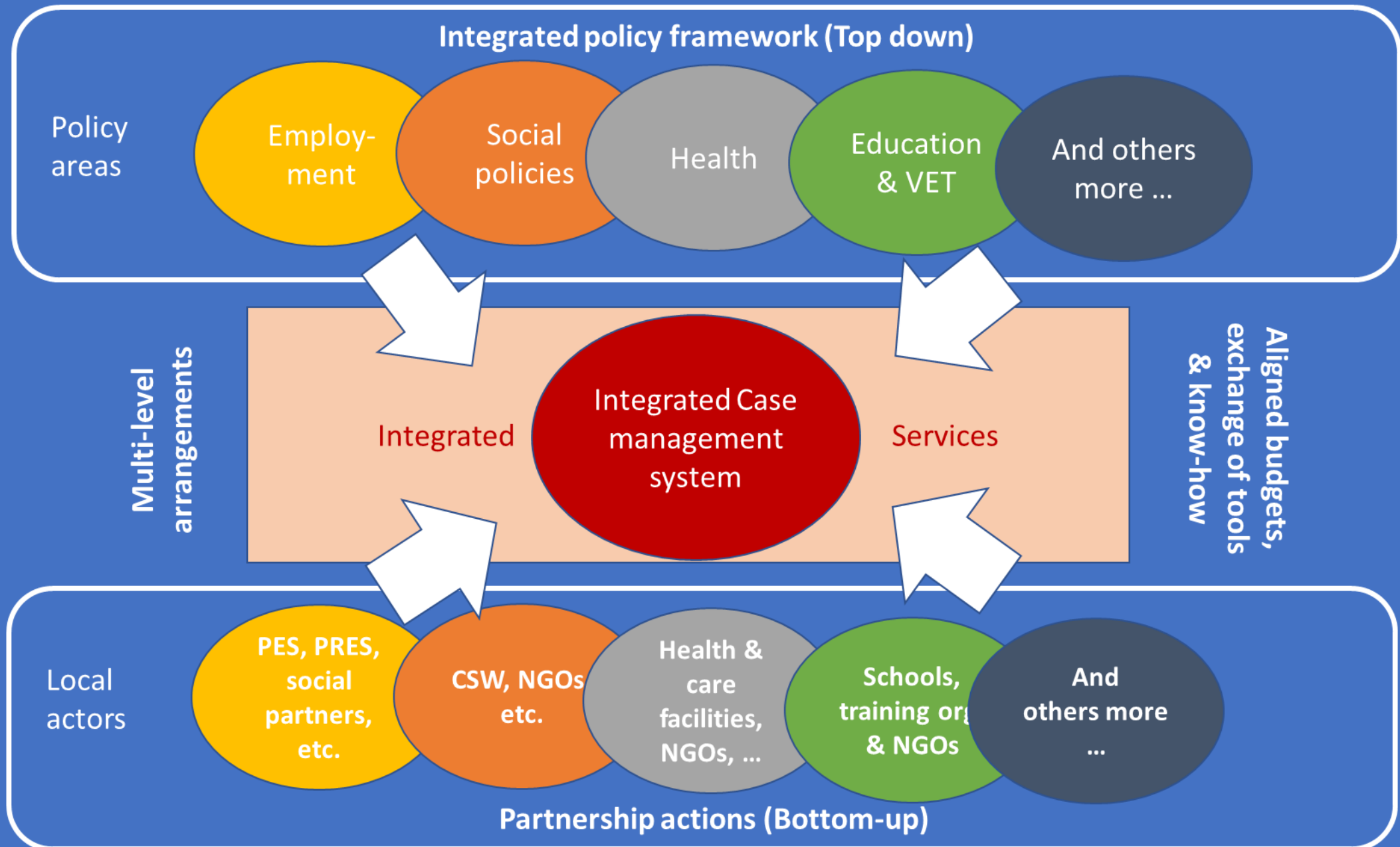
# Target groups & period of interventions

- ❖ Needs of vulnerable groups are **multi-faceted**. Thus, services must reflect/be **flexible & tailored to the various needs & life stages** of individuals
- ❖ Policy and practice solutions of health and social services that take the life-course perspective into account should:
  - ✓ Target at **inclusion into society** (not primarily economic/labour market inclusion)
  - ✓ Include **long-term perspectives** (over various phases of life, intergenerational)
  - ✓ Follow a **preventive approach** (from indicated to universal – see above)
  - ✓ Be embedded in **cooperative settings ...**

# Institutional frame & freedom of choice

- ❖ **No single institution** can address the various needs of vulnerable groups alone: there is a strong need for **collaborative approaches** taken between **locally embedded services**
- ❖ **Policy interventions** should reflect the macro-, meso- and micro level:
  - ✓ **Macro**: systemic links between policies (e.g. active labour market policy and social assistance)
  - ✓ **Meso**: the organisational level, at which stakeholders experience (institutionalised) ways of collaborative work
  - ✓ **Micro**: the beneficiary level at which users receive support via services and measures
- ❖ While **participation is voluntarily**, services must be offered on a broad scale to serve the varying needs







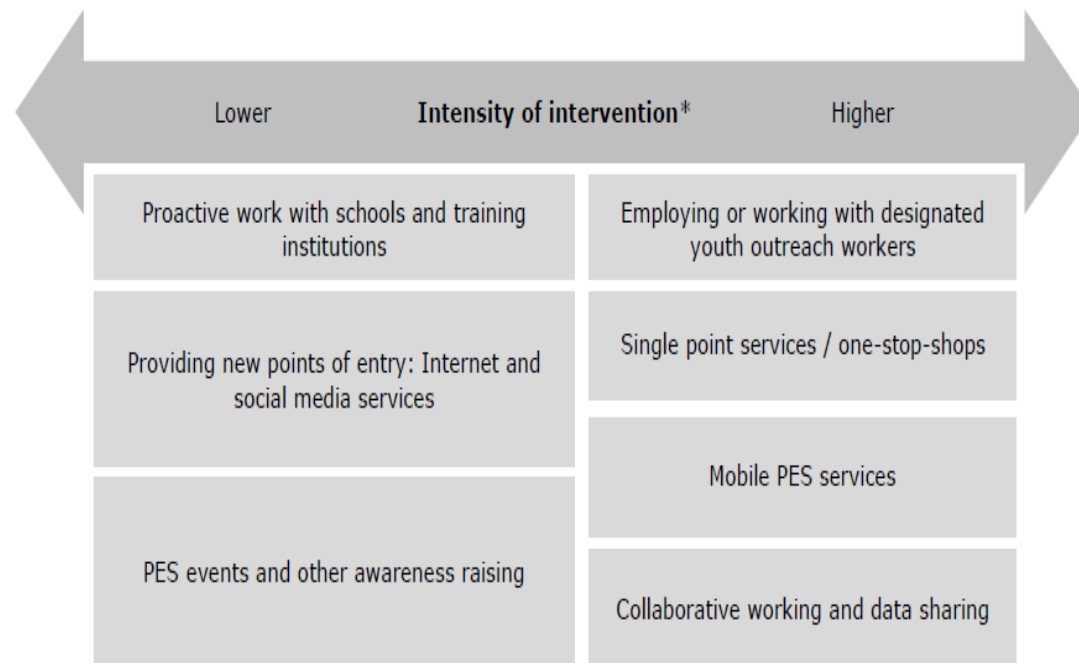
			Cooperation	Coordination	Collaboration
			Loose Relationship		Close Relationship
			Characteristics: information is shared, informal or formal	Characteristics: some joint planning, intensified communication and closer working relationship	Characteristics: joint objectives and decision making, shared commitment, developed partnership
<div>Multi-stakeholder arrangements</div> <div>↑</div> <div>↓</div> <div>Arrangements between &gt;2 partners</div>	Strategic Orientation	Aims	<ul style="list-style-type: none"> <li>❖ To share information</li> <li>❖ To discuss topics</li> <li>❖ To network</li> </ul>	<ul style="list-style-type: none"> <li>❖ To jointly develop policy areas</li> <li>❖ To solve (cross-policy) problems</li> <li>❖ To elaborate future partnerships</li> </ul>	<ul style="list-style-type: none"> <li>❖ To improve strategic planning and policy delivery</li> <li>❖ To contribute to systemic change by sharing responsibility</li> </ul>
		Forms of agreement	Informal: Mutual agreements	Informal/formal: Memorandum of Understanding, Codes of Conduct, Guidelines	Formal (legally binding): Partnership agreements, pacts, multi-lateral contracts
		Examples	Policy Forums, Strategic Platforms, Networks, Consultations, etc.	Involvement in Social Dialogue, Councils, Committees, Boards, etc.	Strategic partnerships such as Structural Fund Partnerships in Sweden and the Territorial Employment Pacts in Austria
	Operative Orientation	Aims	<ul style="list-style-type: none"> <li>❖ To exchange information about particular services</li> <li>❖ To update knowledge</li> <li>❖ To integrate skills into PES</li> </ul>	<ul style="list-style-type: none"> <li>❖ To coordinate services</li> <li>❖ To explore possibilities</li> <li>❖ To balance options</li> </ul>	<ul style="list-style-type: none"> <li>❖ To jointly improve specific (employment) services</li> <li>❖ To enhance employment options</li> <li>❖ To boost social inclusion</li> </ul>
		Forms of agreement	Informal/Formal: Mutual agreements, Contracts in case of contracting out of services	Informal/formal: Agreements between parties	Formal (legally binding): Partnership agreements, pacts, multi-lateral contracts
		Examples	Meetings between parties, Contracting out, Outsourcing of government employment services, etc.	Coordination of skill supply and demand in a territory, etc.	Service partnerships such as the Local Employment Partnerships in the UK and Public-Private Partnerships of various kinds

# Integration of vulnerable groups & local know-how in policy design & implementation

- ❖ The **needs of vulnerable groups** are to be placed at the heart of any policy intervention
- ❖ **Outreaching** to the beneficiaries:
  - ✓ A proactive approach is required at all times
  - ✓ Visiting the beneficiaries at places they are (local meeting points, football games, supermarkets)
  - ✓ Counselling services include various areas (depts, health, crime, education, ...)
- ✓ **Case management** for individual assistance proved to be successful (UNDP, ESF-Transnationality, etc.)



# Outreach methods & typology



Note \*) Intensity of intervention' refers to the depth and breadth of immediate services available for the young people identified through this method.

Source: European Commission, 2015b, p. 3

- ❖ **Satellite model:** establishing stand alone, separate outreach centres for delivering services in community locations;
- ❖ **Peripatetic model:** delivering services in other organisational settings such as hostels, community centres, GP surgeries, housing offices, etc.;
- ❖ **Detached outreach model:** contacting people outside of agency or organisational settings, for example, in streets, shopping centres, pubs, at school gates, etc.; and
- ❖ **Domiciliary outreach model:** visiting people in their own homes (In: Dewson et al. 2006, p. 22).

# In search of the Holy Grail: integration of health and social care for older people



- ❖ **Impact: strong evidence** positive results for **QoL, user/carer satisfaction, adherence to treatment, control of symptoms** (Siouta et al 2016, Cameron et al 2014, Martinez-Gonzalez et al 2014, Nolte and Pitchford 2014, Mason et al 2015, Damery et al 2016)
- ❖ **Use:** limited evidence on emergency care/acute care/residential care use; good results on **length of stay** (Brattstrom 2018)
- ❖ **Costs and cost-effectiveness: Limited potential for reducing costs** (Weatherly et al 2010, Damery et al 2016, Mason et al 2015, Cameron et al 2014)
- ❖ **Conditions:** congestive heart failure, palliative care stroke and COPD (e.g. Martinez-Gonzalez et al 2014)
- ✓ **Woodwork effect:** tapping unmet needs
- ✓ **Societal costs: informal care,** potential for cost-shunting to social care sector

# Integration remains high on policy agenda

**Strategy planning** (Action Plan for Implementation of Deinstitutionalisation)

**Local/regional initiatives** (Joint Commissioning)

**Strategy planning** (National health strategy 2018-2022 and Strategy for transforming the health care system 2018 )

**Legislative reform** (Law on adapting society to an ageing population)

**Local/regional initiatives**

**Legislative reform** (Joint individual care plan)

**Legislative reform** (Law on integration of health and social care)

**Local initiatives** (coordination of plans at municipal level)

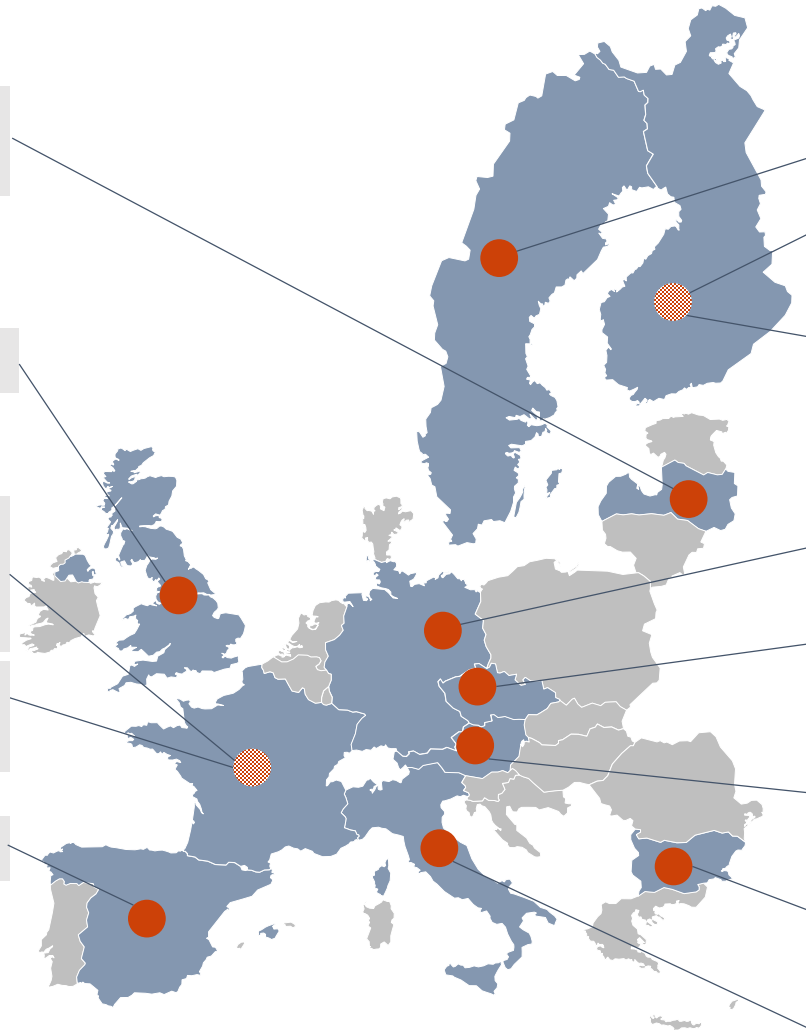
**Legislative reform** (Needs assessment)

**Strategy planning** (Action Plan for the Strategy of Development of Social Services 2017-2018)

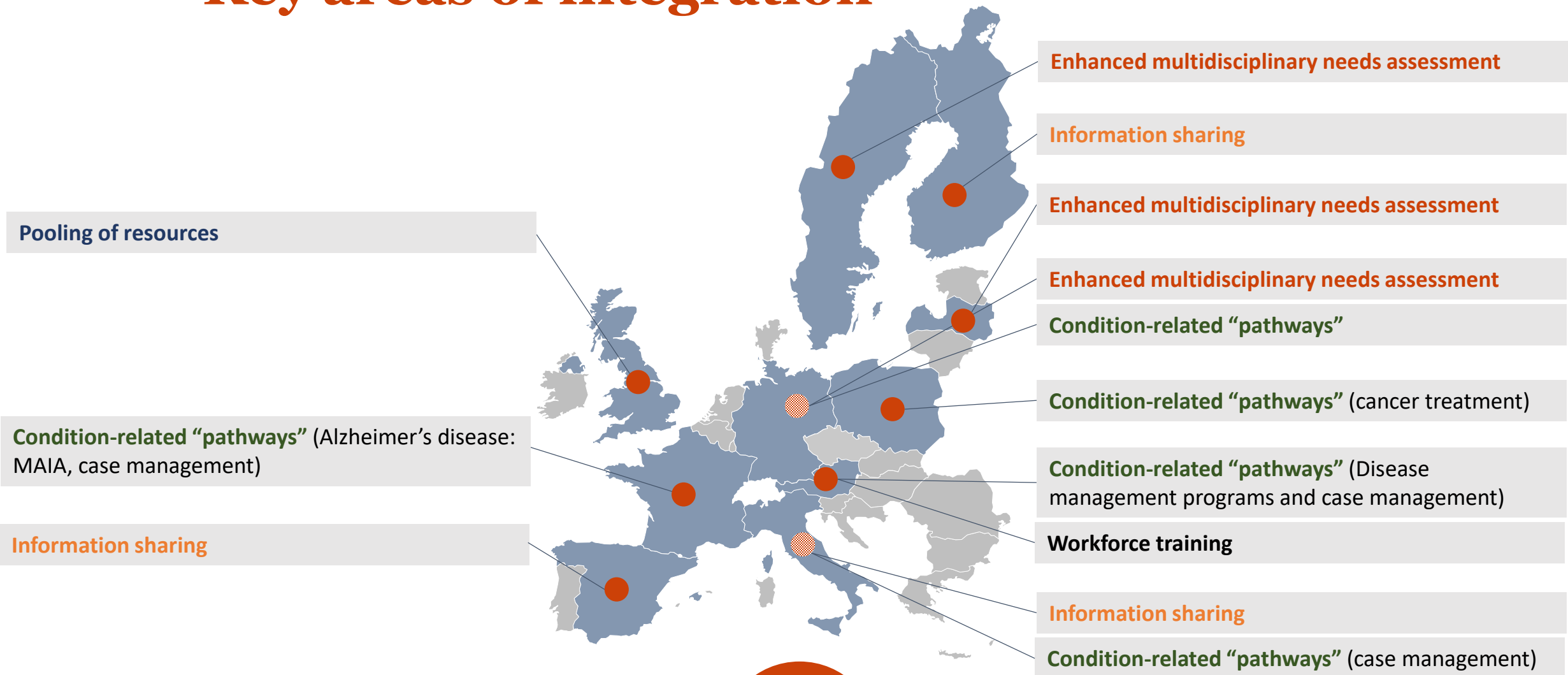
**Local/regional initiatives** (Health Platforms)

**Local/regional initiatives**

**Local/regional initiatives**



# Key areas of integration

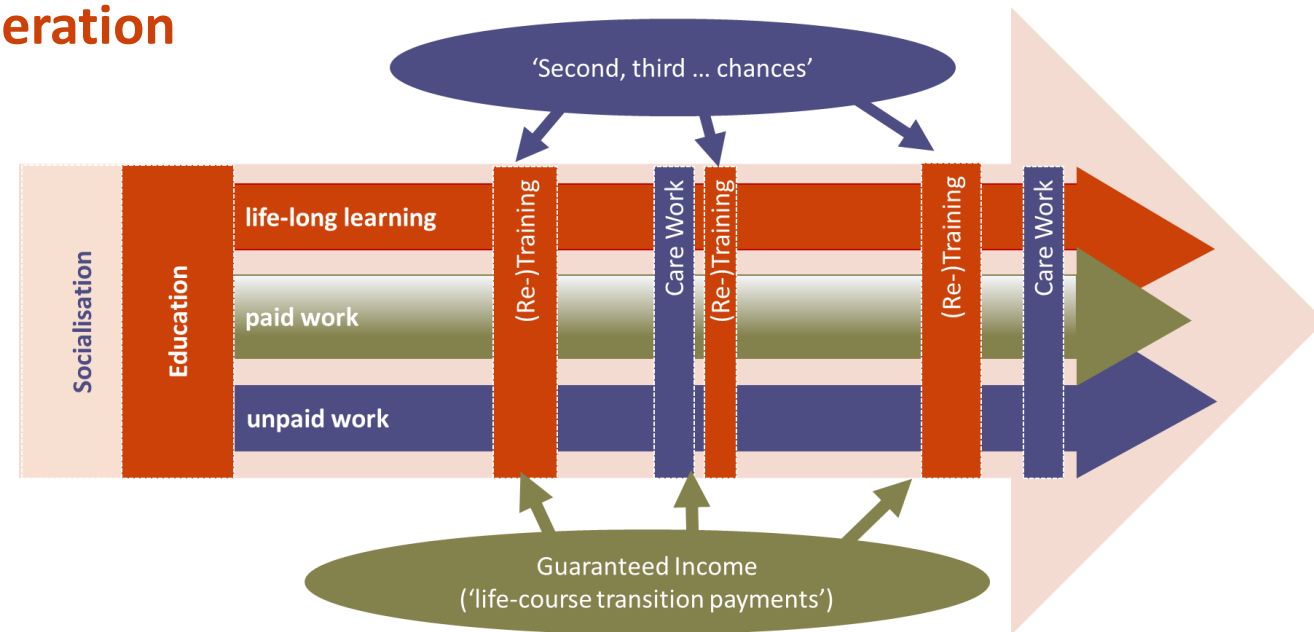


# Integrating a life-course approach into integrated health and social care

- ❖ **Transitions:** at the interfaces of services, transforming life events
- ❖ **Timing of various life-events:** when the need arises? Ageing into need (e.g. people with disabilities)
- ❖ **Linked lives (family and kinship, friendships ...):** informal carers and family members → intergenerational “life courses”?
- ❖ **The life course of institutions:** path dependency and idiosyncrasies

# To sum up

- ❖ Consider **individual target groups needs & the period of time of intervention of the individual** while taking a life-course approach
- ❖ Support the **establishment of cooperation** between institutions and leave freedom of choice
- ❖ Integrate vulnerable groups & local know-how from start and ensure **engagement of beneficiaries during the entire policy cycle**





Thank you!



## Further reading

[www.euro.centre.org](http://www.euro.centre.org)