

Is the Government Keeping
its promises to Children?



REPORT CARD 2010



The Children's Rights Alliance is a coalition of over 90 non-governmental organisations (NGOs) working to secure the rights and needs of children in Ireland, by campaigning for the full implementation of the UN Convention on the Rights of the Child. It aims to improve the lives of all children under 18, through securing the necessary changes in Ireland's laws, policies and services.

Membership

The Alliance was formally established in March 1995. Many of its member organisations are prominent in the children's sector – working directly with children on a daily basis across the country. The Alliance's policies, projects and activities are developed through ongoing collaboration and consultation with its member organisations.

Vision

Ireland will be one of the best places in the world to be a child

Mission

To realise the rights of children in Ireland through securing the full implementation of the UN Convention on the Rights of the Child

25 January 2010

©2010 Children's Rights Alliance – Republic of Ireland Limited
The Children's Rights Alliance is a registered charity – CHY No. 11541

ISBN 0-9553005-3-3
978-0-9553005-3-0

For any enquiries or to obtain additional copies of Report Card 2010, please contact:

Children's Rights Alliance
4 Upper Mount Street
Dublin 2
Ireland

Tel: +353.1.662 9400
Email: info@childrensrights.ie
Web: www.childrensrights.ie

The Alliance grants permission for the reproduction of quotations from this text, provided due acknowledgement of the source is made and provided such citations do not exceed 400 words in length. This publication may be reproduced in full or in part if accompanied by the following citation: Children's Rights Alliance Report Card 2010.

Contents

FOREWORD	2
INTRODUCTION	4
ACKNOWLEDGEMENTS	5
GRADING FOR ALLIANCE REPORT CARD 2010	6
EDUCATION	8
1.1. EARLY CHILDHOOD CARE AND EDUCATION	10
1.2. CHILD LITERACY AND LANGUAGE SUPPORT	13
1.3. EARLY SCHOOL-LEAVING	16
1.4. CHILDREN WITH SPECIAL EDUCATIONAL NEEDS	19
HEALTH	22
2.1. PRIMARY CARE	24
2.2. MENTAL HEALTH	26
2.3. CHILDHOOD OBESITY	29
MATERIAL WELLBEING	32
3.1. FINANCIAL SUPPORT FOR FAMILIES	34
3.2. ACCESS TO EDUCATION	37
3.3. ACCESS TO HEALTHCARE	39
3.4. ACCESS TO HOUSING	41
SAFEGUARDING CHILDHOOD	44
4.1. PROTECTING CHILDREN	46
Ryan Report Implementation Plan	46
Social Work Provision	48
Separated Children	50
Children First Guidelines	52
4.2. CHILDREN AND THEIR ENVIRONMENTS	53
Play and Recreation	53
School Buildings	56
4.3. ALCOHOL	58
4.4. SEXUAL HEALTH AND RELATIONSHIPS	61
SUMMARY OF RECOMMENDED IMMEDIATE ACTIONS	64

foreword



Welcome to *Report Card 2010*, the second edition of the Children's Rights Alliance's annual report card series, which provides a concise picture of how the Government is delivering on its commitments to children in the areas of education; health; material wellbeing; and

safeguarding childhood. Last year, we awarded Government an overall 'D' average grade. This year, I'm afraid to say that matters are worse, with Government slipping to the bottom of that grade: to a 'D-'. We have found the Government's overall performance on its promises to children to be barely acceptable, with limited positive impact on children's lives.

Typically, when we think of a 'report card' it is as a measure of academic performance, informing children and their parents as to whether they are exceeding expectations; if they are on the right track; or falling behind with their grades. When I was at school, I know that, certainly for me and for my school-friends, the idea that your parents could possibly receive a bad report card helped focus the mind and made you think twice before misbehaving in class; not doing your homework; or turning up ill-prepared for your exams! Similarly, despite being only in its second year, the Alliance's annual report card series is already making headway and furnishing the Government with some much needed pressure to honour its promises to children. And, yes, I can say that, even though the overall grade has slipped.

For example, in preparing for *Report Card 2009*, we found some government departments to be almost impenetrable, with our requests for information being passed from pillar to post. This year, there has been a definite shift in mindset, with the same departments now engaging with the process: going the extra mile to provide us with timely information and to verify facts. This makes for a better Report Card that can be held up as a reliable source of information for the year ahead. And in 2010, with the Government currently completing its next Report to the UN Committee on the Rights of the Child and developing a new National Children's Strategy, it is absolutely vital that all of us know the state of play so that we can scrutinise progress effectively.

That said, there is no getting away from the fact that we are dealing with a 'D-' grade. This is a matter of grave concern to me. True, with the economic climate

as it stands, and the fallout from Budget 2010, it is not unexpected. And let us not forget that 2009 was the year in which we saw two budgets, the reports from An Bord Snip Nua and the Commission on Taxation, and the birth of NAMA. But having said that, in times of crisis and emergency, it is only natural to expect children to come first. As Ireland sinks further into economic crisis, all of our children should either be at the front of the queue or already on the lifeboats. But in reality, particularly in relation to some issues, the Government is putting its head in the sand. The fact that we felt compelled to introduce a new 'F' grade – a fail – in order to elucidate the steps taken by Government that have been of detriment to children's wellbeing in Ireland, illustrates that children have not come first. The Government has simply forced our hand, particularly when some of its policy decisions fly in the face of common sense, good practice and countless reports.

Areas awarded an 'F' grade were: Financial Support for Families; Primary Care; and Alcohol. In choosing to cut Child Benefit in Budget 2010, rather than reform the system, the Government opted to reinforce the status quo despite the evidence that we need a more targeted and effective system. In 'Primary Care', the target is seriously behind schedule, and Budget 2010 did not provide the necessary funding, despite the under-developed nature of our primary care infrastructure. In 'Alcohol', the grave error of decreasing the price of alcohol will be keenly felt, as teenage children will find it easier to access cheap alcohol and children will suffer in families where alcohol is abused. Government has failed to take note of the endless reports that clearly show the damaging effects of alcohol on young minds. In each of these three areas shameful policies are being implemented that will be to the detriment of children – and to society.



Thankfully, among all of this, there is a standout, positive area of progressive policy-making. In Early Childhood Care and Education (ECCE), the Government has made great strides by introducing the free pre-school year. Demonstrating a progressive policy shift it has earned the Government a 'B-' grade. The introduction of the free pre-school year should not be underestimated and I truly believe that it is a hugely positive policy move for early years education in Ireland. Money invested early has consistently been shown to reap both economic and social benefits in the longer term. A NESF cost-benefit analysis in 2005 showed that for every €1 invested in ECCE in Ireland, a return of up to €7.10 could be expected. The Government has been duly congratulated for this foresight. And it is hard to believe that this would have been achieved without the Office of the Minister for Children and Youth Affairs (OMCYA), with its own budget and resources, functioning as a driver for change. Of course we are very critical of the OMCYA at times, and rightly so, but I am very much aware that it is the glue that binds government departments together to deliver child-centred, cross-departmental policies that uphold children's rights.

excellent plan. But in relation to separated children the Government has only been awarded an 'E' grade, as its action to date has been abysmal. Genuine commitment, by Government, is now vital to make a real difference to the lives of these vulnerable children.

If we want Ireland to be one of the best places in the world to be a child; a country where the implementation of the UN Convention on the Rights of the Child is a reality on the ground, then Government must be held to account. Let us use *Report Card 2010* to move closer to that vision. Children are our future. Investing now – in their education and health, and their personal development and wellbeing – will reap rewards for individual children during their childhood and as adult members of society.



Jillian van Turnhout
Chief Executive

As Ireland sinks further into economic crisis, all of our children should either be at the front of the queue or already on the lifeboats. But in reality, particularly in relation to some issues, the Government is putting its head in the sand.

This year, we have introduced a new area of policy work into *Report Card 2010*, namely 'Protecting Children', to capture the commitments found in the Ryan Report *Implementation Plan*. We have awarded the Government a 'C-' grade for its work in protecting children. There are, however, four key subsections – relating to the *Implementation Plan* itself, social workers, separated children and the *Children First* guidelines – all of which have been awarded their own grade, indicating the distinct challenges of each. For example, for the *Implementation Plan* itself, we have awarded Government a 'B' as we believe it to be an

Introduction

The Children's Rights Alliance works to secure the rights and needs of all children in Ireland by campaigning for the full implementation of the UN Convention on the Rights of the Child. On a practical level, this translates as the Alliance advocating for the necessary changes in Ireland's laws, policies and services. Holding the Government to account is a key part of this work.

This is the second edition of our annual report card series. *Report Card 2009* provided a snapshot of childhood in 2008 and examined whether the Government had honoured the promises it had made to the 1,036,034 children living in Ireland. The launch of *Report Card 2009* on 19 January 2009 was hugely successful, with many member organisations in attendance. In receiving an overall D average the Government's barely satisfactory performance attracted good media attention, which culminated in the Alliance struggling to keep up with demand for copies of the report throughout the year.

In *Report Card 2010* the Alliance continues its analysis of key Government commitments in the specific areas of education, health, material wellbeing, and safeguarding childhood. The Alliance feels that the commitments selected in these four broad areas are clear and measurable and have the potential to improve the lives and life chances of all children in Ireland. A new policy area has been added to the 'Safeguarding Childhood' section focusing on four aspects of the response to the Ryan Report; these have been awarded their own grade, indicating the distinct challenges of each. The Report Card's chosen commitments come from key Government documents, namely: the *National Children's Strategy 2000–2010*; *Towards 2016: Ten-Year Framework Social Partnership Agreement 2006–2015*; the *National Action Plan for Social Inclusion 2007–2016*; the *Programme for Government 2007–2012* and the *Renewed Programme for Government*; and the *Ryan Report Implementation Plan*.

This year, the Alliance has added a new dimension to *Report Card 2010* by including a 'Local Eye' to each broad section. Its purpose is to highlight the ways in which the Government's commitments have a direct effect on the daily lives of children. Other local or regional news stories, collated from a range of national and local papers, are listed as footnotes throughout the report.

As a coalition of over 90 member organisations, most of which work directly with children in Ireland, the Alliance is well placed to develop this analysis, as it is able to draw on a wealth of experience. The research process was rigorous and the grading subject to independent scrutiny.

Subsequent editions will revisit the same issues until the commitments are honoured, as well as addressing some new issues and commitments.

In Report Card 2010 the Alliance continues its analysis of key Government commitments in the specific areas of education, health, material wellbeing, and safeguarding childhood.



Acknowledgements

The Children's Rights Alliance wishes to thank all those who contributed to researching and compiling this report. The contribution of individual Alliance member organisations is gratefully acknowledged, as is the generosity of staff in the variety of statutory and non-statutory bodies and independent experts who willingly gave their time and expertise. Particular thanks are due to the Board of the Alliance for their oversight and guidance. The Alliance would like to acknowledge the work of the non-governmental organisation, Children Now based in California, whose annual report card provided inspiration for this publication.

Finally, we extend our thanks to the members of the external assessment panel, who, by assessing the grades in each section and adding their considerable experience, validate this report. The grades allocated represent the collective views of the panel rather than the views of any individual. The external assessment panel comprised Tom Collins, Vice President of External Affairs and Dean of Teaching and Learning, National University of Ireland, Maynooth; John FitzGerald, Research Professor, Economic and Social Research Institute; Sheila Greene, Director, Children's Research Centre, Trinity College Dublin; Sally Anne Kinahan, Assistant Secretary General, Irish Congress of Trade Unions; Danny McCoy, Director General, Irish Business and Employers Confederation represented by Alan O'Kelly; Justice Catherine McGuinness, President, Law Reform Commission; and Fintan O'Toole, Columnist, The Irish Times.



Grading

Grading for Alliance Report Card 2010

AREA	SUBSECTIONS	GRADES	AVERAGE GRADE	
Education	Early Childhood Education and Care Child Literacy and Language Support Early School-Leaving Children with Special Educational Needs	B- C C C	C+	Satisfactory attempt, but children still left wanting.
Health	Primary Care Mental Health Childhood Obesity	F D- D-	E	Unacceptable. Taking steps in the wrong direction, no positive impact on children.
Material wellbeing	Financial Support to Families Access to Education Access to Healthcare Access to Housing	F D- E E	E	Unacceptable. Taking steps in the wrong direction, no positive impact on children.
Safeguarding Childhood	Protecting Children > Ryan Report Implementation Plan - B > Social Work Provision - B > Separated Children - E > Children First Guidelines - D Children and their Environments > Play and Recreation - D > School Buildings - C Alcohol Sexual Health and Relationships	C- D+ F C	D	Barely acceptable performance. Little or no positive impact on children's lives.

EXPLANATION OF GRADES

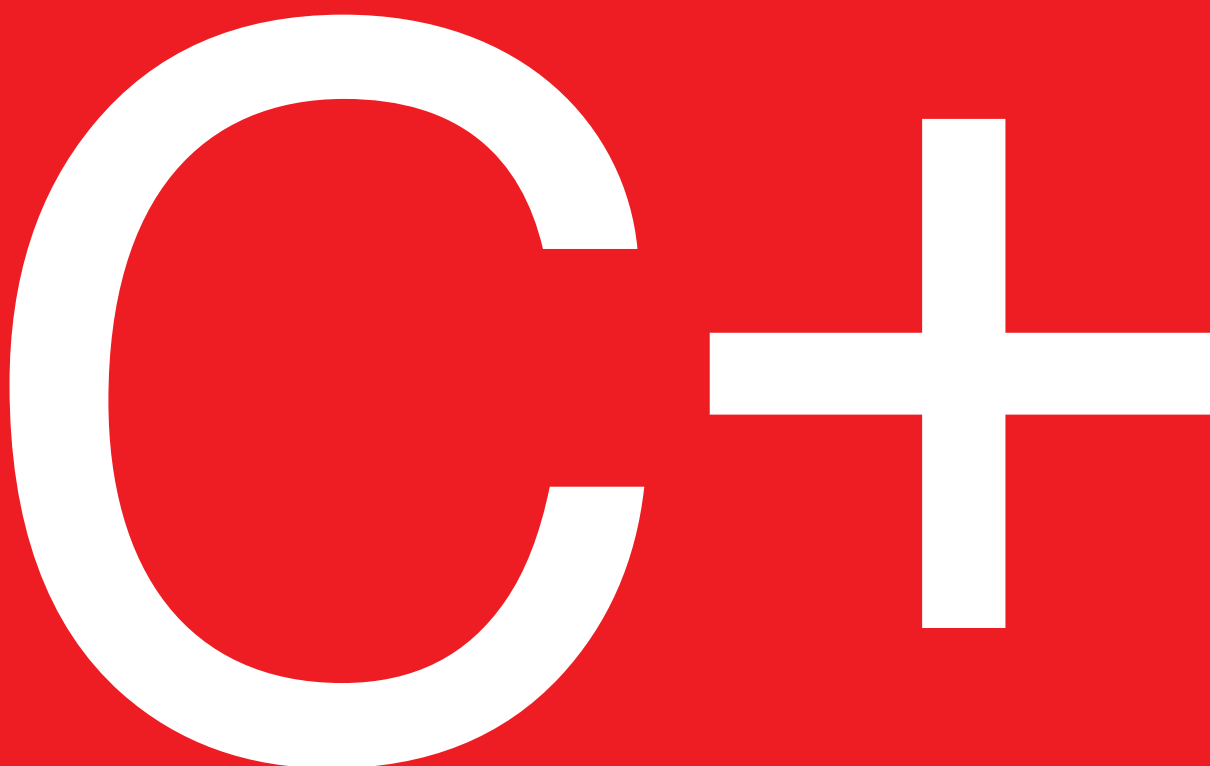
A	Excellent, making a real difference to children's lives
B	Good effort, positive results for children
C	Satisfactory attempt, but children still left wanting
D	Barely acceptable performance, limited positive impact on children's lives
E	Unacceptable, taking steps in the wrong direction, no positive impact on children
F	Fail, taking steps that undermine children's wellbeing

A plus or minus sign after a grade means that it is at the top or bottom of the grade respectively.



Comparison between 2009 and 2010 Grades

AREA	SUBSECTIONS	2009 GRADES	2009 AVERAGE	2010 GRADES	2010 AVERAGE
Education	Early Childhood Education and Care	E	D	B-	C+
	Child Literacy and Language Support	C		C	
	Early School-Leaving	C-		C	
	Children with Special Educational Needs	D		C	
Health	Primary Care	D-	D-	F	E
	Mental Health	E		D-	
	Childhood Obesity	D		D-	
Material wellbeing	Financial Support for Families	B-	C-	F	E
	Access to Education	D		D-	
	Access to Healthcare	D		E	
	Access to Housing	D		E	
Safeguarding Childhood	Protecting Children	N/A	C	C-	D
	Play and Recreation	B		D	
	School Buildings	C		C	
	Alcohol	D		F	
	Sexual Health and Relationships	C		C	



Education

LOCAL EYE



KILKENNY FAMILY RESOURCE CENTRE UNDER THREAT: KILKENNY PEOPLE

The Family Resource Centre in Kilkenny City, the Fr McGrath Centre, risked falling victim to Government budget cuts in 2009. The McCarthy Report suggested closing the Family Support Agency, which funds the 107 family resource centres (FRCs) across Ireland.

Kilkenny People reported that, in the 10 years it had been operating, the number of early school leavers in the area had been reduced significantly and that more and more children from the area were going on to further education. Director Stephen Murphy told *Kilkenny People*: "By admission of the HSE itself, there are eight or 10 children in this community (the Butts) alone who would be in care if it wasn't for the Fr McGrath Centre. On top of that, 12 years ago, the Butts had the highest rate of early school leaving in the country and last year, every student in our community who was entitled to sit the Junior Cert sat it and passed it. That's a remarkable turnaround in 12 years".

Local TD and Trade Minister John McGuinness is reported to have told Minister for Children and Youth Affairs, Barry Andrews TD, on a visit to the Centre that "if there is any organisation that gives bang for its buck it is FRCs".

Taken from Laura Keys, 'No straight answer from Gormley on Family Resource Centre funds', *Kilkenny People*, 13 November 2009; and Sean Keane, 'Please, Minister, let Fr. McGrath Centre carry on the good work', *Kilkenny People*, 20 February 2009.

Overview

The Alliance has awarded the Government an overall 'C+' grade in Education – a step up from its 'D' grade in 2009 – to reflect its improved performance. In Early Childhood Care and Education in particular, the Government took a brave decision, which saw its grade leap from an 'E', unacceptable, to a 'B-' – a good effort, with positive results for children.

Budget 2009 dramatically changed the education landscape in Ireland.¹ Cuts – from teacher numbers to book grants for children in disadvantaged communities – demonstrated that the education system would not be protected from the measures to address the Government deficit. Instead, it would pay the price for the reversal of economic fortunes through larger class sizes and diminished supports.² The cuts led to teacher protests and widespread public anger.³ In response, the *Renewed Programme for Government*, agreed between Fianna Fáil and the Green Party in October 2009, revised (but did not fully reverse) some of Budget 2009's more damaging measures, including halting the implementation of the EPSEN Act, 2004 (for children with special educational needs), increasing the pupil-to-teacher ratio and abolishing the book grant.⁴

The revision of several cuts is welcome, and suggests that Government recognises the harm that these cuts would cause, however, the changes do not go far enough. Last year, *Report Card 2009* called for increased investment in education. It noted that decisions made in education were "driven by short-term gain, rather than long-term positive change for children".⁵ This year, some improvements have been made, but there is still a way to go. Investing in children's education is a smart decision that reaps rewards not only for each individual child on a daily basis, but also for society in the long-term; this holds true even in tough economic times. Indeed, the OECD recently concluded that education is *even more* important during a recession than it is in good times.⁶ Spending on education is an investment, not an indulgence, and Government policy should reflect that. The Irish education system has been historically

under-funded. A 2009 report shows that currently, Ireland invests 4.7% of its GDP in education, well below the average of 5.7% across the 30 OECD countries.⁷ This shortage of resources is demonstrated by our class sizes, which are the second largest in the EU, with 24.5 pupils per class: four more than in other European countries.⁸

This year, some improvements have been made, but there is still a way to go. Investing in children's education is a smart decision that reaps rewards not only for each individual child on a daily basis, but also for society in the long-term; this holds true even in tough economic times.



1 In addition to the two Budgets, further cuts to classes for children with mild general learning disabilities, were announced without warning in February 2009.

2 For further information on the Alliance analysis of Budget 2009 see: Children's Rights Alliance (2008) *Analysis of Budget 2009 and its Impact on Children*, http://www.childrensrightrights.ie/files/AllianceAnalysisBudget2010_101209.pdf

3 See for example, Sean Flynn and Carl O'Brien, 'Education Cuts Protest draws thousands to Dublin', *The Irish Times*, 29 October 2008. John Carr, 'Education Cuts will have children making sacrifices', *The Sunday Tribune*, 14 December 2008.

4 See Children's Rights Alliance, *Submission to Fianna Fáil on the Review of the Programme for Government* (October 2009) http://www.childrensrightrights.ie/files/ChildrensRightsAllianceFiannaFailReviewProgGovt_5Oct2009.pdf and *Submission to the Green Party on the Review of the Programme for Government* (October 2009) <http://www.childrensrightrights.ie/files/ChildrensRightsAllianceGreenPartyReview.pdf>

5 Children's Rights Alliance (2009) *Report Card 2009*, Dublin: Children's Rights Alliance.

6 OECD (2009) *Education at a Glance 2009: OECD Indicators*, Paris: OECD p. 13.

7 *Ibid.*, p. 208.

8 *Ibid.*, p. 383.

Local focus: *Evening Echo*, 'Teachers' fury as 20% of Cork kids are taught in classes of 30 or more', 4 September 2009. *Dundalk Democrat*, 'Class crisis: local school overcrowded', 9 September 2009. *Leinster Leader*, 'Kildare has biggest class sizes', 10 September 2009.

1.1. EARLY CHILDHOOD CARE AND EDUCATION

“Every family should be able to access childcare services which are appropriate to the circumstances and needs of their children.” (*Towards 2016* p.41).

COMMITMENT	PROGRESS
<i>Towards 2016</i> commits to targeting the early education needs of children from areas of acute economic and social disadvantage through the Delivering Equality of Education in Schools Programme (DEIS). ⁹	Exceeding commitment. Significant improvement on <i>Report Card 2009</i> .

What's happening?

Brave and progressive policy move taken; initiative to be commended.

In the Supplementary Budget of April 2009, the Government announced that it would provide one year free pre-school to every child, in the year prior to commencing primary school. This does not apply only to children that will attend DEIS schools, but to all children, starting from January 2010. Existing childcare providers apply to the Office of the Minister for Children and Youth Affairs (OMCYA) to take part in the scheme. Participating providers will be paid a capitation grant (either €48.50 or €64.50 per week, depending on the service provided),¹⁰ and in return they must implement an appropriate educational programme for children in their pre-school year, in line with *Síolta* quality standards;¹¹ and ensure that staff hold (or are working towards) a minimum qualification of Level Five on the National Framework of Qualifications (NFQ).¹²

Although it is universal in principle, the free pre-school year is not expected to be available to every eligible child in its first year, as access is dependent upon local participating providers and not all childcare

providers nationally are expected to participate in 2010. Latest figures show that in excess of 4,200 providers (85%) have applied to take part, with capacity to provide some 98,000 pre-school places. It is anticipated that 65,000 children will avail of the pre-school year scheme in its first year.¹³

The Community Childcare Subvention Scheme (CCSS) is the traditional mechanism through which the early education needs of children in disadvantaged communities are addressed. Budget 2010 made changes to this Scheme; they are outlined in more detail below.

IMMEDIATE ACTION

> **Dedicate resources to ensuring that the universal pre-school year is of high quality.**

Early Childhood Education and Care can bring a wide range of benefits for children's wellbeing and development, but these benefits result only when the service is of high quality. Therefore, all services delivering the pre-school year should be entitled to funding for staff training in *Síolta* quality standards. Unless it is of high quality, the pre-school year will fail to meet the early education needs of children, particularly those from areas of acute economic and social disadvantage.

9 Government of Ireland (2006) *Towards 2016: Ten-Year Framework Social Partnership Agreement 2006-2015*, Dublin: Stationery Office p. 42.

10 The capitation grant of €48.50 per week applies where a full or part time daycare service provides a pre-school service for 2 hours 15 minutes per day, five days a week, for 50 weeks of the year. The €64.50 capitation grant applies where the pre-school service provides three hours a day, 5 days per week for 38 weeks. A higher capitation grant of €75 per week is available to those services where staff are 'highly trained', defined as Level Seven (degree level) for a leader, and Level Five for an assistant. See OMCYA (2009) 'Outline of the General Terms and Conditions governing participation in the free Pre-School Year in Early Childhood Care and Education (ECCE) Scheme', http://www.omc.gov.ie/viewdoc.asp?fn=/documents/childcare/ECCE_Scheme_Pack/ECCE_Terms_and_Conditions_30june.doc, [accessed 21 October 2009].

11 *Síolta: The National Quality Framework for Early Childhood Education*, www.siolta.ie

12 See OMCYA (2009) 'Outline of the General Terms and Conditions governing participation in the free Pre-School Year in Early Childhood Care and Education (ECCE) Scheme'.

13 Information received by the Children's Rights Alliance from the OMCYA, December 2009. The exact number of children taking part on the Scheme will not be known until providers make their returns in January 2010.
Local focus: *Roscommon Herald*, 'Significant uptake by services in free pre-school scheme', 9 September 2009.

COMMITMENT	PROGRESS
<i>Towards 2016</i> outlines the agreement between Government and the Social Partners to continue to work together over a ten-year period to develop an infrastructure to provide quality, affordable childcare and to work towards increasing the supply of childcare places (of all types) by 100,000 by 2016. ¹⁴	Policy change. Too early to see impact of recent changes.

IMMEDIATE ACTION

- > **Develop a comprehensive ten-year national plan for Early Childhood Care and Education.**
A plan is required for early childhood care and education in Ireland after 2010. It is not enough to simply continue the NCIP without a strategic review and mapping out a vision for the next ten years. The new plan should be rights-based, and provide a roadmap towards achieving quality early childhood education for each of the child's first six years (building on learning from the implementation of the pre-school year).¹⁹

What's happening?

Change in approach but impact unclear as yet.

Investment in Early Childhood Care and Education should have a focus on quality as its starting point. Implementation of *Síolta* – the National Quality Framework for Early Childhood Care and Education¹⁵ – should be linked to all childcare related funding.

The Childcare Capital Investment Programme was closed to new applicants following the Supplementary Budget in April 2009. In addition, Budget 2010 cut the funding allocation to the National Childcare Investment Programme (NCIP) by €2.5 million. Allocation of funding to the NCIP for 2008–2010 is now €239 million, of which approximately €165 million is allocated to the Community Childcare Subvention Scheme. Up to the beginning of 2010, it is estimated that capital funding under the NCIP led to the creation of approximately 25,000 new childcare places.¹⁶

The National Childcare Investment Programme ends in 2010, and a follow on programme has not been outlined. Instead, the OMCYA intends to implement the NCIP on an ongoing basis, and will continue capital and current funding supports for childcare services, particularly for community services with a focus on disadvantage.¹⁷ Budget 2010 announced changes in the eligibility rules for the Community Childcare Subvention Scheme, which focuses on providing community childcare services in disadvantaged areas.¹⁸

Comment

The Government made its biggest leap in Early Childhood Education and Care, from an 'E' grade in 2009, to a 'B-' this year. The free pre-school year for all children, one year before they attend primary school, is warmly welcomed. This decision – to abolish the Early Childcare Supplement and channel €170 million of the €480 million in savings made into a free pre-school year for all children – demonstrated a progressive policy shift.²⁰ However, our welcome comes with a note of caution: early years' education is not just about one year in a child's life; it is about every year of the child's first six years. The pre-school year must be seen as the first in a series of steps to develop early childhood education and care services for all children in Ireland.

High quality Early Childhood Care and Education (ECCE) delivers long-term dividends to children, families and society.²¹ And so investing in ECCE is one of the most sensible things a government can do. Money invested early has consistently been shown to reap both economic and social benefits in the longer term. A National Economic and Social Forum (NESF) cost-benefit analysis in 2005 showed that for every €1 invested in ECCE in Ireland, a return of up to €7.10 could be expected.²² International research demonstrates that early intervention programmes are

14 Government of Ireland (2006) *Towards 2016: Ten-Year Framework Social Partnership Agreement 2006-2015*, Dublin: Stationery Office, p. 43.

15 See www.siolta.ie

16 Information received by the Children's Rights Alliance from the OMCYA, December 2009.

17 *Ibid.*

18 There is a perception that these changes shift the scheme from being child centred, to one that is concerned primarily with labour market activation. See Start Strong (2009) *Budget 2010 Analysis*, http://www.startstrong.ie/files/Budget_2010_Analysis.pdf [accessed 7 January 2009].

19 N. Hayes and S. Bradley (2009) *Right by Children: Rights-Based Approaches to Policy Making in Early Childhood Education and Care – The Case of Ireland*, Centre for Social and Educational Research: Dublin Institute of Technology.

20 The Early Childcare Supplement was introduced in Budget 2006. It was a payment to families on behalf of each child under six/five years of age. Its purpose was to assist families with the costs of raising children, such as childcare. The payment was paid monthly, and was worth €1,100 annually in 2008.

21 J. Heckman, and D. Masterov (2007) *The Productivity Argument for Investing in Young Children*, Discussion Paper Number 2725,

Germany: Institute for the Study of Labor. See also, Start Strong (2009) *Why Early Care and Education?* Available at www.startstrong.ie

22 National Economic and Social Forum (2005) *Report no. 31: Early Childhood Care and Education*, Dublin: National Economic and Social Forum Annex 5.1, p. 143.

effective in reducing criminal activity, promoting social skills, and integrating disadvantaged children into mainstream society.²³ Where educational attainment is traditionally low, and unemployment and poverty levels are high, investment in ECCE can be the key to changing the life chances of a generation.²⁴

Investment: Ireland has a history of under-investment and weak policies in ECCE. The OECD heavily criticised Ireland's record on ECCE in 2001,²⁵ and repeated many of its criticisms in 2006.²⁶ In 2008, a UNICEF report once again exposed the State's under-investment, placing Ireland bottom of the OECD league of 25 countries in relation to the provision of quality ECCE.²⁷ National investment in ECCE is less than 0.2% of GDP compared to the European Union average of 0.5%.²⁸

Way Forward: The introduction of the free pre-school year for all children is a vital step in improving early years' education and care in Ireland. Now it must be effectively implemented, with a strong focus on quality. Quality early education and care plays a critical role in children's cognitive, social, emotional, physical and language development, each year from birth to age six. A comprehensive plan – outlining a vision for quality, accessible and affordable early years' education and care for children in each of the first six years – is required. In particular, the plan should outline how services for children from zero to three years will be improved.

Quality: Returns on public investment in ECCE are lost unless young children receive a quality service, but to date this focus on quality has been lacking in Ireland.²⁹ The free pre-school year introduces some welcome changes in this regard: it obliges participating providers to implement the *Síolta* Quality standards, and to ensure that staff are trained – or committed to training over an agreed period – to National Framework of Qualifications (NFQ) Level Five. It also provides an increased capitation grant to services where staff are 'highly trained' to incentivise staff and providers to continue up-skilling. A further positive development in 2009 was the publication of *Aistear*,

the Early Childhood Curriculum Framework.³⁰ However, challenges to ensuring quality in the pre-school year remain. For example, compulsory implementation of *Síolta* quality standards is an excellent initiative in principle, but it is likely to have little impact if resources are insufficient to provide the required training in *Síolta* to providers. Like any new initiative, an evaluation process must be built into the pre-school year, so that its impact can be effectively assessed.

The introduction of the free pre-school year is a hugely positive policy move for early years' education in Ireland. Now, the aspiration must meet the reality: effective implementation is key.

The introduction of the free pre-school year is a hugely positive policy move for early years' education in Ireland.



23 Ibid., p. 12.

24 N. Hayes (2008) *The Role of Early Childhood Care and Education: An Anti-Poverty Perspective*, Dublin: Combat Poverty Agency.

25 OECD (2001) *Starting Strong: Early Childhood Education and Care*, Paris: OECD.

26 OECD (2006) *Starting Strong II: Early Childhood Education and Care*, Paris: OECD.

27 UNICEF (2008) *Report Card 8: The Childcare Transition*, Pisa: Innocenti Research Centre, p. 2.

28 OECD (2008) *Education at a Glance Report: OECD indicators*, Paris: OECD, p. 229.

29 National Competitiveness Council (2009) *Statement on Education and Training*, Dublin: National Competitiveness Council & Forfás.

30 *Aistear* is available from the National Council for Curriculum and Assessment (NCCA) at www.ncca.ie/earlylearning

1.2. CHILD LITERACY AND LANGUAGE SUPPORT

“Every child should leave primary school literate and numerate.” (*Towards 2016* p. 41).

CHILD LITERACY

COMMITMENT	PROGRESS
<i>The National Action Plan for Social Inclusion 2007–2016 and the National Development Plan 2007–2013</i> aim to reduce the number of children leaving school with literacy problems in disadvantaged communities from 30% (present rate) to 15%. ³¹	Awaiting publication of data. Same as <i>Report Card 2009</i> .
<i>Towards 2016</i> commits to putting in place a number of additional supports under DEIS to tackle literacy (...) problems in primary schools in disadvantaged areas and additional literacy supports, under DEIS, will also be targeted at junior cycle students. ³²	Steady. Ongoing activity: Same as <i>Report Card 2009</i> .

The current national literacy target focuses specifically on improving literacy levels in disadvantaged communities.³³ But by doing so, it fails to recognise that improving literacy is a key issue for *all* children.

DEIS focuses on a selection of schools in areas of ‘concentrated’ disadvantage and is being implemented on a phased basis over five years (2005–2010). It will involve additional annual investment of €40 million (in each of the five years). In 2008/09 almost €15 million was spent on the implementation of DEIS in primary and post-primary schools.³⁴ In 2009, €7.3 million was allocated to literacy as part of DEIS;³⁵ this was channelled into two programmes: Reading Recovery and First Steps. The Reading Recovery programme has been extended to 228 of the 345 Urban Band DEIS primary schools and 95 schools are due to receive training on the programme in the 2009/10 school year.³⁶ The First Steps Programme is run in 332 Urban Band DEIS primary schools. Altogether, approximately 78,000 children are being supported with literacy and numeracy skills under DEIS, but this figure still does not include all children that need support. ESRI research in 2009 showed that DEIS’s focus on ‘concentrated’ disadvantage meant that 61% of students from disadvantaged backgrounds did not attend DEIS schools, due to a focus on ‘concentrated’ rather than ‘dispersed’ disadvantage.³⁷

In 2009, the National Economic and Social Forum (NESF) produced a detailed report on child literacy and social inclusion, with a series of recommendations to improve performance in this field.³⁸ The Alliance was a member of the NESF Project Team, and believe that, of its recommendations, the following two are of particular importance.³⁹

What’s happening?

Some progress has been made, but results will not be known until 2010.

Whether progress is being made towards reaching the literacy target is unclear. DEIS (Delivering Equality of Education in Schools) schools develop their own individual three-year action plans (together with unpublished targets) thus making it impossible to determine if local progress is aligned with national targets. An evaluation of DEIS is currently being undertaken by the Educational Research Centre. The evaluation will assess the impact of reading and writing programmes as part of DEIS, and will publish its findings in 2010. During their time at primary school, pupils undertake two standard literacy tests, but the results of these tests are not publicly accessible.

31 Government of Ireland (2007) *National Action Plan for Social Inclusion 2007–2016*, Dublin: Stationery Office, p. 32 and *National Development Plan 2007–2013*, Dublin: Stationery Office, p. 233.

32 Government of Ireland (2006) *Towards 2016: Ten-Year Framework Social Partnership Agreement 2006–2015*, Dublin: Stationery Office, p. 43.

33 The existing target is narrower than that outlined in the 1997 Anti-Poverty Strategy, which aimed to ensure that there were no students with serious literacy problems in early primary education by 2002. See Government of Ireland, *Sharing the Progress: National Anti-Poverty Strategy 1997*, Dublin: Stationery Office, p. 9.

34 Information received by the Children’s Rights Alliance from the Department of Education and Science, April 2009.

35 Information received by the Children’s Rights Alliance from the Department of Education and Science, December 2009.

36 *Ibid.* The Reading Recovery Programme is targeted at urban schools only. Evidence received by the Department of Education and Science suggests that socio-economic disadvantage in rural communities does not have the same impact on literacy levels as in urban communities.

37 E. Smyth and S. McCoy (2009) *Investing in Education, Combating Educational Disadvantage*, Dublin: Economic and Social Research Institute.

38 National Economic and Social Forum (2009) *Child Literacy and Social Inclusion: Implementation Issues*, Dublin: NESF.

39 *Ibid.*, The NESF project team was made up of representatives from the four pillars of Social Partnership (agriculture and farming, business and employers, Irish Congress of Trade Unions, community and voluntary); the project team also included members of the Oireachtas and experts in child literacy and social inclusion.

IMMEDIATE ACTIONS

- > **Increase the time spent on literacy skills in schools in disadvantaged areas to 90 minutes per day.** Current curriculum guidelines on time allocation are not appropriate for very disadvantaged schools. Such schools should allocate at least 90 minutes a day to classroom activities for reading and writing. This should be supported by a school-wide focus on language and literacy. Intensive literacy teaching is a critical element in reducing the number of children in disadvantaged areas leaving school with literacy difficulties.
- > **Develop a National Literacy Policy with the child at the centre.** There is no single document bringing together Government policy on literacy for all children. A National Literacy Policy should provide a shared vision for future action with greater policy coherence and integration and should include a revised target for improving literacy among all children. This target should be supplemented by short-term system and school-level targets.

Comment

Reading and writing are fundamental life skills, enabling access to knowledge, work and culture. They facilitate daily life: reading the newspaper or the ingredients on a label, writing a shopping list or taking a bus. When compared internationally, Ireland performs well on literacy, and its grade 'C' – no change from last year – reflects a satisfactory attempt, but notes that some children, and particularly those in disadvantaged areas, are still 'left wanting'. Ireland was ranked fifth of the 29 OECD countries in reading literacy in 2006 (a standard that has remained relatively stable since 2000).⁴⁰ Yet despite these impressive results, national data shows that Ireland is failing to equip many of its children, and particularly

its most disadvantaged, with basic reading and writing skills. One child in ten in Ireland leaves school with literacy problems, rising to one child in three in disadvantaged communities.⁴¹ These children are more likely to experience educational failure, and to leave the education system without qualifications.⁴² This, in turn, affects the life chances of such children – it makes them more likely to be long-term unemployed, to experience poverty, and to enter the criminal justice system.⁴³

The success of Ireland's 'smart economy' will depend on the availability of an educated, literate and ambitious young population.⁴⁴ Indeed, the cost of not investing in literacy is likely to cost the State millions. A report by the KPMG foundation in the UK found that the cost to the exchequer of pupils leaving school with low literacy is between £44,797 and £53,098 per pupil over half a lifetime: an annual cost of £1.7-£2.5 billion.⁴⁵ It showed that a specific reading intervention at the age of six would lift 79% of children out of literacy failure, and that the return on investment on every pound from this measure would be between £14.81 and £17.56. Having invested in support for pupils at age six, the savings made by age 37 were estimated at over £1.4 billion. Clearly, money spent on improving child literacy is money well spent and an investment in the country's future, reaping rewards for individual children and for society as a whole.

The success of Ireland's 'smart economy' will depend on the availability of an educated, literate and ambitious young population.

40 E. Eivers, G. Shiel and R. Cunningham (2006) *Ready for Tomorrow's World? The Competencies of Irish 15 year olds in PISA 2006*, Dublin: Department of Education and Science and the Education Research Centre, p. 9.

41 E. Eivers, G. Shiel and F. Shortt (2005) *Literacy in Disadvantaged Primary Schools: Problems and Solutions*, Dublin: Education Research Centre, p. 6.

42 Department of Education and Science (2005) *DEIS Action Plan for Educational Inclusion*, Dublin: Department of Education and Science, p.3.

43 National Education Welfare Board (2005) Pre-Budget Submission 2006: Highlighting the Cost of School Absenteeism.

44 Government of Ireland (2008) *Building Ireland's Smart Economy: A framework for sustainable economic renewal*, see http://www.taoiseach.gov.ie/eng/Building_Ireland%27s_Smart_Economy/ [accessed 9 November 2009]. This report was published in 45 December 2008 as the Government's strategy for medium-term economic recovery.

45 KPMG Foundation (2006) *The Long Term Costs of Literacy Difficulties*, London: KPMG Foundation, p. 3

LANGUAGE SUPPORT

COMMITMENT	PROGRESS
To enhance support for the effective integration of international children at both primary and second-level, <i>Towards 2016</i> commits to providing an extra 550 language support teachers by 2009 and to reform the current limit of two additional teachers per school. ⁴⁶	Some progress. Clarity provided on eligibility since <i>Report Card 2009</i> .

What's happening?

Changes to this process during 2009. It was clarified that access to language support teachers will be based on pupil need.

There has been much progress in the provision of language support for children with English as a second language over the past seven years. In 2008, there were almost 2,000 language support teachers in primary and post-primary schools, compared with 260 in 2001/02.⁴⁷ For the 2009/10 school year, there are 1,150 language support teachers at primary level and about 360 at second-level.⁴⁸ Budget 2009 reduced the level of support for English as an additional language to a maximum of two teachers per school, as was the case before 2007.⁴⁹ However, this measure provides some alleviation for those schools where there is a significant concentration of non-English speaking pupils by providing for up to four language support teachers based on need.⁵⁰ Responding to concerns about the impact of measures in Budget 2009, the

Renewed Programme for Government guaranteed extra language support assistants to schools where more than 50% of pupils do not speak English as a first language.⁵¹ It also promised to 'maintain language support funding to schools', at 2009/10 levels.⁵²

Comment

The number of students with English as a second language has increased rapidly over the past decade, reflecting the changing demographic in Irish society.⁵³ A 2009 report shows that in 2007, 'newcomer' pupils made up an estimated 10% of the primary school population and 6% of the second-level school population.⁵⁴ It is estimated that at second-level about 70% of newcomer students are non-English speaking, while at primary this figure reaches 75%.⁵⁵ The majority of newcomer children are from non-English speaking countries, and over half of both primary and second-level principals reported language difficulties among 'nearly all' or 'more than half' of these students.⁵⁶

Principals also noted that language support teachers operate as an important social, as well as academic, support for newcomer children.⁵⁷ Providing language support to children for whom English is not their first language is a basic, and critical, part of the integration process. It enables these children to access and progress within the education system, and to make smooth transitions from primary to second level and beyond.

46 Government of Ireland (2006) *Towards 2016: Ten-Year Framework Social Partnership Agreement 2006-2015*, Dublin: Stationery Office, p. 43.

47 Government of Ireland (2008) *Towards 2016: Ten-Year Framework Social Partnership Agreement 2006-2015, Fourth Progress Report*, Dublin: Stationery Office, p. 117.

48 Information received by the Children's Rights Alliance from the Department of Education and Science, December 2009.

49 See Department of Education and Science Schools Division (2009) Circular 0015/2009 'Meeting the needs of pupils learning English as an additional language (EAL)'.

Local focus: *The Anglo Celt*, 'Cavan will lose teachers due to budget cuts', 5 November 2008; *Limerick Leader*, 'Language of cutbacks translates to teacher loss in St. Conaire's', 24 April 2009; *Longford Leader*, 'Schools see language support teacher numbers dwindle', 2 October 2009.

50 There are now 48 schools with three English as an Additional Language (EAL) posts, 26 with four posts, 13 schools with five posts and 8 with six posts in the Primary sector. Information received by the Children's Rights Alliance from the Department of Education and Science, December 2009.

51 These measures were already outlined in Circular 0015/2009 'Meeting the needs of pupils learning English as an additional language (EAL)' and therefore are not considered 'new' measures by the Department of Education and Science. On that basis the *Renewed Programme for Government* commitment does not add any new posts to the system. Ultimately the level of demand for English as an additional language provision will dictate spending levels and this could be higher or lower than existing spending levels.

52 *Renewed Programme for Government* (October 2009) http://www.taoiseach.ie/eng/Publications/Publications_2009/Renewed_Programme_for_Government_October_2009.pdf, p. 31

53 Analysis of newcomer students to Ireland is still in the early stages. However, Ireland is one of the countries involved in the forthcoming OECD report on Migrant Education at pre-school, primary and post-primary, which will provide further insight into experiences of migrant children in Irish schools.

54 E. Smyth et al (June 2009) *Adapting to Diversity: Irish Schools and Newcomer Children*, Dublin: ESRI, p. xiv. Four in ten primary schools have no newcomer pupils, while newcomers are heavily represented (making up more than one fifth of the student body) in one in every ten primary schools. The experience of second-level schools is different: most have at least one newcomer pupil, but newcomer students make up a smaller proportion of the overall school population.

55 *Ibid.*, p. 45.

56 *Ibid.*

57 *Ibid.*, p. 181.

1.3. EARLY SCHOOL-LEAVING

“Every child should complete a senior cycle or equivalent programme (including ICT) appropriate to their capacity and interests.” (*Towards 2016* p. 41).

COMMITMENT	PROGRESS
To help further address absenteeism, early school-leaving, behavioural problems and special needs, both <i>Towards 2016</i> and the <i>National Action Plan for Social Inclusion</i> commit to delivering an additional 100 posts in total for the National Educational Welfare Board (NEWB) and the National Educational Psychological Service (NEPS) by 2009 (40 NEWB and 60 NEPS posts). ⁵⁸	Changed context. Difficult to compare with <i>Report Card 2009</i> .

National Educational Psychological Service
Budget 2009 increased funding to the National Educational Psychological Service (NEPS) by 33% and gave a guarantee that every school will have access to a NEPS psychologist by 2009. The *Renewed Programme for Government* provided immediate funding for 28 additional NEPS posts, to bring the total number of NEPS psychologists to 210, and to ensure that every school in the country has access to NEPS.⁶¹ Budget 2010 repeated this commitment. This should, finally, reduce the number of private psychological assessments being paid for by the State, in the absence of adequate public provision.⁶²

What's happening?

The context has changed. Streamlining of supports through the National Education Welfare Board (NEWB) and full complement of staff at National Educational Psychological Service (NEPS) are welcome developments.

National Education Welfare Board

The remit of the National Education Welfare Board (NEWB) was extended in May 2009 to include three Department of Education programmes – the Home School Community Liaison Scheme, the School Completion Programme, and the Visiting Teacher for Traveller Service.⁵⁹ The NEWB will now be responsible for an additional 750 staff. This was reaffirmed in the *Renewed Programme for Government*. The change is intended to facilitate closer integration of these services at local, regional and national levels and to increase their effectiveness for children who may not be achieving at (or even regularly attending) school.⁶⁰

The Alliance welcomes the bringing together of three related services under the remit of the NEWB: it is an example of joined-up Government in action.

58 Government of Ireland (2007) *National Action Plan for Social Inclusion 2007–2016*, Dublin: Stationery Office, p. 35 and (2006) *Towards 2016: Ten-Year Framework Social Partnership Agreement 2006–2015*, Dublin: Stationery Office, p. 43.

59 National Education Welfare Board (NEWB) ‘Minister Haughey Announces Plan for Integration of Education Services’ [Press Release] 18 May 2009. Also *Renewed Programme for Government* (October 2009). http://www.taoiseach.ie/eng/Publications/Publications_2009/Renewed_Programme_for_Government_October_2009.pdf, p. 31.

60 National Education Welfare Board (NEWB) ‘Minister Haughey Announces Plan for Integration of Education Services’ [Press Release] 18 May 2009.

61 *Renewed Programme for Government* (October 2009), p. 30.

62 Between 2001 and 2009, the State spent €10 million on private psychologist services for schools. A total of 30,000 private assessments were carried out during that period, at a cost of €300 each. These are in addition to the services provided by NEPS. See Martha Kearns, ‘State spent €10 million on private psychologist services for schools’, *Sunday Business Post*, 18 October 2009.

COMMITMENT	PROGRESS
<i>Towards 2016</i> also commits to ensuring progress towards the Lisbon target, which aims to reduce early school-leaving to 10% by 2010.	Signs of improvement. Figures better than those reported in <i>Report Card 2009</i> .

IMMEDIATE ACTION

- > **Build in a process for ongoing evaluation of the work of the National Education Welfare Board (NEWB) and delivery of its wider remit.** With its increased remit and staffing levels, the NEWB has assumed much greater responsibility for addressing the persistent problem of early school leaving in Ireland. In theory this is an excellent move. However, it is a huge administrative shift and results for children have yet to be proven in practice. A clear, timely, evaluation process is required to ensure that the NEWB is delivering on its new, wider remit.

What's happening?

Signs of improvement, but too early to declare a positive trend.

Early school-leaving has been a persistent problem in Ireland since the 1990s, with the number of students completing second-level remaining relatively stable at 79%–82% since 1991.⁶³ This is despite much policy focus and considerable resources allocated to combating early school leaving. The 2007 School Leavers' Survey indicates possible improvement, with a drop of 4% in those leaving school before completing the Leaving Certificate (from 18% in the 2006 survey to 14% in 2007).⁶⁴ However, researchers warn that, due to the nature of the data used, conclusions cannot be drawn based on findings in a single year: we must await next year's survey, and the one following that, before declaring a trend.⁶⁵

Among the 27 EU countries, seven have reached or exceeded the Lisbon 10% target. Ireland is not among that group.⁶⁶

The Supplementary Budget, April 2009, halved the rate of jobseekers allowance paid to those under 20 years not in education or training from €200 to €100 per week. Budget 2010 extended this measure to those aged 20 and 21.⁶⁷ This is intended to encourage young people to remain in education or training.

Comment

The 'C' grade here – a marginal improvement on last year's 'C-' – reflects the small decrease in the numbers leaving school early and the welcome change to the structure of the NEWB, but acknowledges that, for now, some children are still 'left wanting'.

The Alliance welcomes the bringing together of three related services under the remit of the NEWB: it is an example of joined-up Government in action, and demonstrates commitment to early intervention and prevention as a way to reduce the number of children leaving school early. Increased coordination should result in a more streamlined and effective service for children and families that will avoid duplication and overlap of services and facilitate improved communication among professionals. Now, however, the NEWB must prove that it can deliver on this new, wider remit.

Early school-leaving has considerable long-term economic and social effects for both individuals and the State. Unemployment levels and social welfare expenditure, poverty and poor mental health are just some of the problems linked to early school-leaving.⁶⁸

63 S. McCoy, E. Kelly and D. Watson (2007) *School Leavers' Survey Report 2006*, Dublin: ESRI, p. 6.

64 D. Byrne, S. McCoy and D. Watson (2008) *School Leavers' Survey Report 2007*, Dublin: ESRI, p. 8.

65 Information received by the Children's Rights Alliance from the Economic and Social Research Institute (ESRI) October 2009.

66 The countries to have reached or exceeded graduation rates of 90% are: Czech Republic, Austria, Poland, Croatia, Slovakia, Finland and Slovenia. (European Commission (2008) *Progress towards the Lisbon Objectives in Education and Training: indicators and Benchmarks 2008*, Brussels: European Commission Staff Working Document, p. 15).

67 A more limited measure was extended to those aged 22–24 years in Budget 2010; they will be entitled to €150 per week, unless they are involved in, or take up, education or training.

68 National Education Welfare Board (2005) *Pre-Budget Submission 2006: Highlighting the Cost of School Absenteeism*. See www.newb.ie

When compared internationally, Ireland's performance is average – it ranks ninth out of 28 OECD countries (and partner countries) for secondary graduation rates⁶⁹ – but this figure masks the high levels of early school leaving concentrated in low-income communities. Gender and class heavily influence trends in school completion, with boys much more likely to drop out of secondary school than girls.⁷⁰ As stated by the UN Committee on the Rights of the Child in its *Concluding Observations* to Ireland, for certain groups, like Traveller children, early school leaving is a considerable problem.⁷¹

The Cost of Early School Leaving: A 2009 ESRI report assessed the costs associated with early school leaving in the Irish context.⁷² They estimate that the cost to the State in jobseekers allowance over a lifetime per male early leaver is €12,300. Add €17,000 in lost tax revenue and the total cost comes to €29,300, before health or crime costs are considered.⁷³ The ESRI also notes that health expenditure on early school-leavers is higher than that on those that completed the Leaving Certificate; and they estimated €280 million in crime costs could be saved by keeping children in school.⁷⁴ A 1999 study estimated that the savings of staying on in education over the initial post school period (6 years) amount to €14 million.⁷⁵ These costs relate to reduced state expenditure resulting from lower unemployment, lone parenthood and crime rates, but do not include health and housing costs, which would add to the potential savings.

Early Intervention: Every year, 800-1,000 children do not transfer from primary to secondary school.⁷⁶ Absenteeism is one of the strongest factors associated with early school-leaving.⁷⁷ High levels of absenteeism at school can lead to low achievement, poor educational outcomes, and alienation from other students and from school staff. There is overwhelming evidence to suggest that early intervention, with a view to preventing chronic absenteeism and early school-leaving, is more effective than responding once problem patterns are established.⁷⁸

Targets: Ireland failed to reach the European target to reduce early school-leaving to 10% by 2010. Steps must be taken to ensure that Ireland makes sufficient progress to bring it in line with its European neighbours. Services to tackle early school leaving must be evidence based. In the Irish context, learning about what works in policy to address deep-set problems, like early school-leaving is urgently needed.



69 OECD (2009) *Education at a Glance*, Paris: OECD, p. 44.

70 Using OECD figures from 2005, the graduation rate from upper secondary school in Ireland was 86%. When looked at by gender, this was 81% males and 93% females. In Ireland, females are ten percentage points more likely to graduate from second-level than males [OECD (2009) *Education at a Glance*, Paris: OECD]. See also Children's Rights Alliance (2009) *Submission to the Joint Oireachtas Committee on Education and Science Study: Underachievement at Second Level – the Way Forward*, <http://childrensrights-ie.access.secure-ssl-servers.biz/files/SubJtCommESUnderachieveSecondLevel130809.pdf>

71 UN Committee on the Rights of the Child (CRC/C/IRL/CO/2, p. 12 para. 58, (29 September 2006)).

72 S. McCoy and E. Smyth (2009) *Investing in Education: Combating Educational Disadvantage*, Dublin: Economic and Social Research Institute.

73 *Ibid.*, p.55-56. The ESRI also gives a figure of €33,000 per female early leaver which takes into account payment of the One Parent Family Payment.

74 *Ibid.*

75 €14 million converted from 1999 figure of £11 million. E. Morgenroth (1999) *Estimated Social Rates of Return to Educational Interventions to Prevent Early Educational Failure*, Dublin: Report to the Department of Education.

76 National Economic and Social Forum (2001) *Early School Leavers (Forum Report 24*, Dublin: NESF, p. 31. Many of these children are Traveller children, beyond that little is known about the group; see Department of Education and Science (2006) *Report and Recommendations for a Traveller Education Strategy*, Dublin: Stationery Office, p. 16.

77 M. Morgan (1998) *Early School Leaving Interventions: International Comparisons*, Dublin: Combat Poverty Agency.

1.4. CHILDREN WITH SPECIAL EDUCATIONAL NEEDS

“An Act to [...] assist children with Special Educational Needs to leave school with the skills necessary to participate [...] in an inclusive way in the social and economic activities of society and to live independent and fulfilled lives.” (*Education for Persons with Special Educational Needs Act 2004*).

COMMITMENT	PROGRESS
<p><i>Towards 2016</i> commits to the development of special educational needs services in the framework of the Education for Persons with Special Educational Needs Act 2004, which provides a legislative basis for assessment for individual educational plans and for the delivery of services.⁷⁹</p> <p><i>The Programme for Government</i> pledges that each child with special needs will have the right to an Individual Education Plan. This will ensure that each child has a tailored programme to meet their unique individual needs.⁸⁰</p>	<p>Re-started. Improvement on <i>Report Card 2009</i>.</p>

In October 2006, the *Implementation Report: Plan for the Phased Implementation of the EPSEN Act 2004* was submitted to the Minister for Education and Science, but ministerial sign-off has yet to be given.⁸⁴ It is now six years since the publication of the Act, and four years since the publication of the *Implementation Report*, but we still await action.

There were backward steps taken last year: Budget 2009 announced the deferral of the Act's implementation. This was partially reversed in October 2009 by the *Renewed Programme for Government*, which committed to implementing “some priority aspects of EPSEN” focusing on measurable, practical progress in health and education services for children with special needs.⁸⁵ However, it is as yet unclear how this will be taken forward in practice. Budget 2010 cut the Budget of the National Council for Special Education (NCSE) by €2.3 million (21%).

What's happening?

Stopping and starting. Some progress expected in 2010. The commitments listed above cannot be honoured until the Education for Persons with Special Educational Needs Act 2004 (EPSEN) is fully commenced.⁸¹ To date, only certain sections of the Act have been commenced, primarily those concerned with the establishment of the National Council for Special Education (NCSE).⁸² The key sections that would make a real difference to the daily lives of children with Special Educational Needs (SEN)⁸³ remain outstanding.

Data on children with Special Educational Needs (SEN) is scarce, and patchily collected.

A child with special care needs, attending a mainstream school, can be allocated a Special Needs Assistant (SNA). There are over 10,000 SNAs in Irish schools⁸⁶ supporting

78 National Economic and Social Forum (2001) *Early School Leavers (Forum Report 24)*, Dublin: NESF p. 26.

79 Government of Ireland (2006) *Towards 2016: Ten-Year Framework Social Partnership Agreement 2006-2015*, Dublin: Stationery Office, p. 44.

80 Government of Ireland (2007) *Programme for Government 2007-2012*, Dublin: Stationery Office, p. 45.

81 The United Nations Committee on the Rights of the Child in its *Concluding Observations* to the Irish Government, September 2006, recommended that continued measures be taken to create an educational environment where the special needs of the child are taken into consideration, see (CRC/C/IRL/CO/2, p. 12 paragraph 59.a).

82 The following sections of the Education for Persons with Special Educational Needs Act, 2004 [no. 30 of 2004] have been commenced — 1, 2, 14(1)(a), 14(1)(c), 14(2) to 14(4), 19 to 37, 40 to 53.

83 A child is deemed to have a special educational need if he or she requires substantial additional educational provision in comparison with his/her peers (definition in S. Griffin and M. Shevlin (2007) *Responding to Special Educational Needs: An Irish Perspective*, Dublin: Gill and Macmillan).

84 National Council for Special Education (2006) *Implementation Report: Plan for the Phased Implementation of the EPSEN Act 2004*, Meath: National Council for Special Education.

85 *Renewed Programme for Government* (October 2009) p. 30.

86 Figures received by the Children's Rights Alliance from the Department of Education and Science for 2008: 8,266 SNAs in primary schools and 1,966 SNAs in second-level schools.

11,737 individual children.⁸⁷ This is an increase from 6,000 SNAs in 2005.⁸⁸ Two statutory reviews of SNAs are currently taking place: one focussing on value for money, and the other reviewing existing provision to ensure that it is in line with criteria governing the allocation of SNAs.⁸⁹ These reviews should go some way towards examining the impact of special needs support, as currently designed, for school children.

IMMEDIATE ACTION

> Fully implement the Education for Persons with Special Educational Needs Act 2004.

The Department of Education and Science, the Department of Health and Children and the Health Service Executive (HSE) must work together to agree a process to ensure the full implementation of the EPSEN Act, in line with the Implementation Plan, 2006. To do this, clarity is required as to what the decision taken in the *Renewed Programme for Government* means and which 'priority' aspects of EPSEN will be implemented in 2010.

Comment

The Education for Persons with Special Educational Needs Act 2004 provides the legislative framework for the assessment of need, the preparation and implementation of individual education plans and the delivery of services for children with special educational needs.⁹⁰ When implemented, it will provide children with special educational needs with additional rights, and benefit a larger cohort of children than those deemed to have had entitlements under previous statutory provisions.⁹¹ The 'C' grade here – an improvement on last year's 'D' – reflects Government's decision to implement some 'priority aspects' of the EPSEN Act. But, until the Act is fully implemented, some children with special educational needs will still be 'left wanting'.

Budgetary Impact: Budget 2009 put a halt to further steps in the implementation of the EPSEN Act. It did, however, provide an additional €10 million for educational supports for children with special needs to be spent on the expansion of the National Education Psychological Service (NEPS), support for the National Council for Special Education (NCSE), and investment in teacher training.⁹² Special classes for children with mild general learning disabilities, with less than nine pupils, were abolished at the end of the 2008/09 school year.⁹³ Pupils that were in these classes are now catered for in mainstream classes, with access to additional teaching support. This measure affects 534 children in total, within 128 classes, in 119 schools.⁹⁴

87 The NCSE Special Education Administration System (SEAS) database, September 2009. This figure represents the numbers of children with special educational needs in mainstream primary and post-primary schools who were in receipt of Special Needs Assistant (SNA) support allocated through the NCSE as of September 2009. It does not represent the number of SNAs deployed in mainstream primary and post-primary schools, as individual SNAs may be providing support to more than one pupil.

88 Figures received by the Children's Rights Alliance from the Department of Education and Science, April 2009. There were 5,414 SNAs in primary schools and 443 in second-level schools.

89 Information received by the Children's Rights Alliance from the Department of Education and Science, April 2009. The Value for Money Review will be published in 2010. The review of criteria for allocation of SNAs is ongoing. It is being undertaken on a school-by-school basis and the NCSE is notifying outcomes directly to schools.

90 In the absence of full commencement of the EPSEN Act some steps have been taken: in 2006 the NCSE published guidelines on the individual education plan process and issued them to all schools. The Special Education Support Service (SESS) has commenced a series of training programmes for teachers on the individual education planning process.

91 National Council for Special Education, *Request for tender to conduct a 'Study to estimate the prevalence of special educational needs (SEN) and to examine data issues in relation to SEN and disability in Ireland more generally'*, February 2009.

92 Information received by the Children's Rights Alliance from the Department of Education and Science, April 2009.

93 Killian Doyle, 'Support for pupils with special needs to be cut', *The Irish Times*, 11 February 2009.

Local focus: *Limerick Leader*, 'Special needs cuts hit four Limerick Schools', 13 February 2009; *The Kerryman*, 'Teachers last 'unnecessary' cutbacks', 18 February 2009.

94 80 of the 119 schools have reduced class sizes either as part of DEIS or previous disadvantaged schemes and 17 schools will be entitled to an extra teaching post when the pupils in question are divided among mainstream classes. (Information received by the Children's Rights Alliance from the Department of Education and Science, April 2009).

Data on children with Special Educational Needs (SEN) is scarce, and patchily collected. The National Council for Special Education (NCSE) is going some way towards addressing this with its Special Education Administration System (SEAS) database, (an administrative and information tool, which will provide a clearer picture of the number of children with SEN being supported by the NCSE); and through current research to estimate the prevalence of SEN.⁹⁵

There are an estimated 190,303 children in Ireland with Special Educational Needs – nearly one child in every five.⁹⁶ Historically, many of these children were isolated from mainstream education, as they were not expected to achieve at school either academically or socially. Now, it is recognised that children with SEN can thrive in a mainstream education environment, once they are properly supported; and their presence has been shown to have a positive impact on classmates and the rest of the school.⁹⁷

Supports: Various supports are in place for children with SEN, including 86 SENOs (Special Educational Needs Organisers) across the country, employed by the NCSE.⁹⁸ SENOs are responsible for allocating teaching or additional resources to children with SEN at a local level; 30,104 children countrywide receive additional resource teaching hours from the NCSE.⁹⁹

Now, it is recognised that children with SEN can thrive in a mainstream education environment, once they are properly supported; and their presence has been shown to have a positive impact on classmates and the rest of the school.



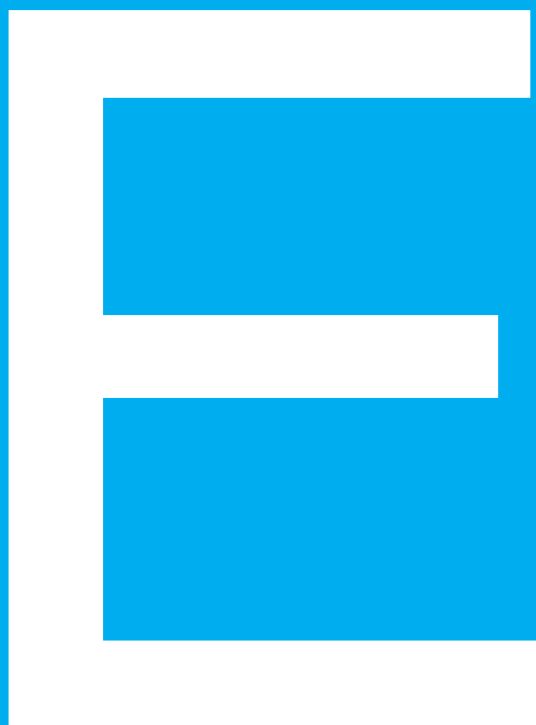
⁹⁵ In 2009, the NCSE commissioned a SEN Prevalence Study to update and further develop the prevalence estimate exercise undertaken in the context of the 2006 NCSE *Implementation Plan*, which estimated prevalence of SEN at 18%, the study has two aims: to quantify the potential cohort of the population on whom the EPSEN Act, 2004, will confer rights when fully implemented, and secondly, to scope and assess data sources and data issues relating to disability, SEN and educational provision for children with SEN more generally. This work is being undertaken by the ESRI and will be completed in Spring 2010.

⁹⁶ National Council for Special Education (2006) *Implementation Report: Plan for the Phased Implementation of the EPSEN Act 2004*, Meath: National Council for Special Education, p. 72.

⁹⁷ S. Griffin and M. Shevlin (2007) *Responding to Special Educational Needs: an Irish Perspective*, Dublin: Gill and MacMillan p. 76.

⁹⁸ A full list of Special Educational Needs Organisers (SENOs) is available from the National Council for Special Education, http://www.ncse.ie/contact_us/SENO_List.asp [accessed 5 January 2010].

⁹⁹ The NCSE Special Education Administration System (SEAS) database, September 2009. This figure represents the numbers of children with SEN in mainstream primary and post primary schools who were in receipt of additional resource teaching hours allocated through the NCSE. It does not represent the total number of children with special care needs in primary schools.



Health

LOCAL EYE



THERAPEUTIC SERVICES UNDER THREAT: *THE IRISH EXAMINER*

In March 2009, it was reported that more than 3,000 children with multiple disabilities are waiting up to two years for essential therapies. Many of these treatments, predominantly in physiotherapy, occupational therapy and speech and language therapy areas, are provided by Alliance member organisation, Enable Ireland, which has endured funding cuts to its budget from the HSE.

The Irish Examiner revealed that, in Clare, 250 children faced an average waiting time of 104 weeks for occupational therapy; in North Tipperary, 156 children were on a waiting list for some 78 weeks for access to services; 20 children in Wicklow also faced similar waiting times for a developmental co-ordination disorder; while in Dublin, 16 children with co-ordination and sensory motor difficulties were forced to wait two years to access a specialised therapy.

Ann McLaughlin, whose son Matthew O'Connor has learning difficulties and learned to walk and talk with the support of Enable Ireland, told the *Examiner* that his progress is down to early intervention. Sadly, receiving such intervention is now under serious threat as a result of HSE cuts.

The Irish Examiner, 'Children face 2-year wait for therapies', 16 March 2009.

Overview

Health is key to a child's wellbeing and, therefore, a drop from a 'D' – to an 'E' grade – an 'unacceptable performance' – is of serious concern. The 'F' grade in Primary Care shows how Government's actions have undermined children's wellbeing, and reflects the current threat to progress made due to a failure to invest in the most basic health services for children.

A child's health is about more than curing disease and patching up injuries: it is influenced by their social, economic and environmental conditions, all of which can support or damage a child's health.¹⁰⁰ Lack of income and inappropriate housing, for example, are social determinants of health which lead to inequality and, in turn, to poor health outcomes and lower life expectancy. It is important, therefore, that children's health is not considered in isolation.

Access to healthcare is a right for every child and cannot be set aside in recession. But this is a danger we face, as families struggle financially, and cutbacks hit health services that children rely on. Budget 2010 allocated €15.3 billion to health in Ireland, a reduction of over €1 billion on the 2009 figure.¹⁰¹ This reduction comes at a time when more families are solely reliant on the public health system.¹⁰² Physical health is only one aspect of general wellbeing; supporting mental health is critical too, and even more so in times of stress and recession. In 2009, the numbers seeking support in dealing with family breakdown increased.¹⁰³ These are not just 'adult' problems; calls to Childline increased too, with children noting that the economic crisis is 'exasperating' problems at home.¹⁰⁴

With funding curtailed, primary care and minor operations for children risk being neglected in favour of crisis and acute services.¹⁰⁵ Of course, critical services must be maintained; but this should not be at the expense of basic hospital services for children. Each health problem a child experiences has a knock-on effect in their life, the impact of waiting for a simple operation – like tonsils or grommets – could change

the course of a child's education. Even a short disruption to a child's schooling can leave them too far behind to catch up.

Hospital services for children suffered in 2009. A 25-bed ward and one operating theatre at Our Ladies' Hospital for Sick Children in Dublin closed in May, leading to longer waiting times and increased family anxiety.¹⁰⁶ Nearly 1,000 operations were cancelled at the hospital in the first part of 2009, including at least two heart operations every week.¹⁰⁷

In 2009, government focused attention on the new children's hospital to be built on the Mater Hospital site, in Dublin city centre at a cost of €750 million.¹⁰⁸ A 2011 start date for construction was set, with plans to open the hospital in 2014. The hospital will be a national Centre of Excellence, providing high quality care to sick children. It will not – and should not – provide primary care services or undertake minor operations where these can be done locally, with less stress, travel and expense for the child and family.¹⁰⁹



100 F. Farrell, H. McAvoy and J. Wilde (2008) *Tackling Health Inequalities: An all-Ireland Approach to Social Determinants*, Dublin: Combat Poverty Agency p. 7.

101 Of the €1 billion reduction €659 million was pay-related and capital spending was cut by €37 million.

102 This year alone, 21,000 people have opted to forego private health insurance, and the VHI estimates that this will reach 200,000 by the end of 2010. Tim O'Brien, 'Quinn Premiums to rise by 15%', *The Irish Times*, 26 November 2009.

103 Jennifer Hough, 'More seeking family breakdown help', *The Irish Examiner*, 17 November 2009.

104 Ronan McGreevy, 'Childline calls rise in recession', *The Irish Times*, 23 November 2009. Childline is a part of the charity ISPCC (The Irish Society for the Prevention of Cruelty to Children), it offers a listening service to all children under 18 years.

105 Local focus: *The Sligo Champion*, 'Hospital cuts leave teenager waiting for vital operation', 26 August 2009; *Kilkenny Advertiser*, 'Jamie gets second opinion in London hospital', 19 June 2009.

106 Eilish O'Regan, 'Children wait for surgery despite HSE vow', *The Irish Independent*, 27 August 2009.

107 Eithne Donnellan, '1,000 child operations cancelled in six months', *The Irish Times*, 19 October 2009.

108 Together, the existing three hospitals – Temple Street, Crumlin and Tallaght – provide 395 beds for children. It is reported that the new hospital on the Mater Site will provide 399 beds. The new hospital will accommodate children in single rooms rather than wards and will have space for parents to stay over.

109 For the Alliance submission on the design of the new hospital see: Children's Rights Alliance (2009) *Submission to the National Paediatric Hospital Development Board in relation to the new National Children's Hospital*, <http://www.childrensrights.ie/files/SubNPHDBreChildrensHospital270309.pdf>

2.1. PRIMARY CARE

“Every child should have access to world-class health, personal and social services.”
(*Towards 2016*, p. 41).

COMMITMENT	PROGRESS
<i>Towards 2016</i> commits to plan and implement a programme of re-organisation and re-alignment of existing resources in order to deliver a person-centred primary care service through multidisciplinary teams and networks, serving defined populations, as outlined in the <i>Primary Care Strategy</i> , 2001. ¹¹⁰ The target is to have 300 primary care teams ¹¹¹ in operation by 2008, 400 by 2009 and 500 by 2011. ¹¹²	Seriously behind target. Little improvement since <i>Report Card 2009</i> and no new funding commitment.

remain on track for its 2011 target. If achieved, this will be just over half the original target in *Towards 2016*.

Funding necessary for the development of Primary Care Teams was not provided in Budget 2010.

The pace of delivery of Primary Care Teams is deeply disappointing. The Primary Care Strategy was published in 2001,¹¹⁷ and nine years later the HSE is still battling the same issues it faced at the outset: an unwillingness to address work practice issues – as the ongoing difficulties engaging GPs demonstrate – or to commit investment where results are not immediately visible. The announcement of a €1.5 billion financing programme in Budget 2009 focusing on Primary Care Centre sites, though late, was welcome.¹¹⁸ However, this commitment was not built on in Budget 2010. The *Towards 2016* target for Primary Care Teams will not be met. Adequate resources, combined with strong leadership from the HSE and firm political will on the part of the Minister and Government, are urgently needed if progress is to be made.

What's happening?

Despite a long lead-in time, primary care infrastructure is still in its infancy. No commitment of additional funding in Budget 2010 means progress made to date risks being lost.

The Government failed to meet the target of 300 Primary Care Teams (PCTs) by the end of 2008, as promised in *Towards 2016*.¹¹³ Now, the focus is on reaching a target set in the *HSE Transformation Programme*, which aims to have 530 PCTs developed by 2011.¹¹⁴ At the end of July 2009, there were 125 PCTs operating.¹¹⁵ A further 24 PCTs were holding clinical team meetings among HSE staff, but GPs were not participating, while an additional 132 PCTs were at ‘various stages of development’.¹¹⁶ The HSE aimed to have 210 PCTs operating by the end of 2009, in order to

IMMEDIATE ACTION

> Ring-fence multi-annual funding for the delivery of the promised Primary Care Teams.

The HSE must ensure that money allocated to Primary Care Teams – with a full complement of therapeutic services – is not re-assigned. The HSE Service Plan for 2010 must outline clearly the allocation of funding to Primary Care Teams and for Primary Care Centres, this is critical for effective monitoring of progress.

110 Department of Health and Children (2001) *Primary Care Strategy: A New Direction*, Dublin: Stationery Office p. 15.

Government of Ireland (2006) *Towards 2016, Ten-Year Framework Social Partnership Agreement 2006-2015*, Dublin: Stationery Office p. 54.

111 A Primary Care Team (PCT) is a multi-disciplinary team of healthcare professionals who work together to meet the health and social care needs of defined population (7,000-10,000). A PCT is comprised of a core unit of practitioners who provide the most common service needs in the community, including General Practitioners (GPs) and Practice Nurses, Public Health Nurses, Community General Nurses, Physiotherapists, Occupational Therapists, Speech and Language Therapists and Home Help staff.

112 Government of Ireland (2006) *Towards 2016, Ten-Year Framework Social Partnership Agreement 2006-2015*, Dublin: Stationery Office p. 54.

113 Information received by the Children's Rights Alliance from the Health Service Executive, November 2008.

114 See Health Service Executive website http://www.hse.ie/eng/services/Find_a_Service/Primary/

115 ‘Operating’ is defined as teams that are holding clinical meetings, involving GPs and HSE staff. ‘Update on the development of Primary Care Teams (PCTs) for the structured consultation Process with the Community and Voluntary Pillar’. Information presented by the HSE at a meeting on 8 September 2009.

116 ‘Update on the development of Primary Care Teams (PCTs) for the structured consultation Process with the Community and Voluntary Pillar’. Information presented by the HSE at a Social Partnership meeting on 8 September 2009.

117 The United Nations Committee on the Rights of the Child welcomed the publication of the *Primary Care Strategy* in its *Concluding Observations* to the Irish Government, September 2006, see (CRC/C/IRL/CO/2, p.10 paragraph 45).

118 As part of this programme, approximately 200 new Primary Care Centres are under consideration, nine are planned to open by end 2009, 71 in 2010 and the remaining 120 in 2011. See: ‘Update on the development of Primary Care Teams (PCTs) for the structured consultation Process with the Community and Voluntary Pillar’.

Comment

Ireland's primary care infrastructure is still in its infancy, and must be nurtured and protected if it is to grow. Without adequate resources, progress made in recent years will be lost. A focus on secondary and acute care, at the expense of primary care, is tempting in a crisis, but is a step we urge Government not to take. For children, the kind of community-based, early intervention and preventive healthcare services provided within a primary care structure are critical. The decision not to provide necessary funding to Primary Care in Budget 2010 is deeply disappointing, risky; and the reason the Government was awarded an 'F' grade – a drop from last year's 'D-' – as it is 'taking steps that undermine children's wellbeing'.

Primary Care: Primary care is the most basic building block of a successful health service. It comprises a range of services designed to keep people well, from health promotion and screening for diseases to assessment, diagnosis, treatment and rehabilitation, as well as personal social services. Primary care is the first point of contact that people have with health and social services, and it is the appropriate setting for treating 90% to 95% of all health and social care needs.¹¹⁹ A well-resourced, responsive and effective primary care service has the potential to prevent the development of conditions that may later require more intensive treatment or hospitalisation, at greater cost to the individual and the State. Primary care services are accessible by self-referral and have a strong emphasis on working with communities and individuals to improve their health and social wellbeing.¹²⁰

For children, primary care is especially important. It is where early intervention happens. The joined-up approach envisaged within Primary Care Teams aims to provide timely and effective services to children and families when they need them and close to home. Through the Primary Care Teams, children will visit the

GP or see the public health nurse and, where necessary, be immediately referred to further services, such as a physiotherapist or psychologist.

Therapeutic Services: Integral to the Primary Care Teams is the provision of a range of therapeutic services, based in one centre, to meet the needs of the local population. These services – speech and language therapy, occupational therapy, counselling and social work – are critical for children, often providing the early intervention necessary to prevent minor problems becoming crises. But now, as money is scarce and the focus is increasingly shifting towards acute services, these posts are at risk. Yet still, children face long waiting lists to access basic services, like speech and language therapy and social work.¹²¹ In Dublin in 2008, children could wait up to two and a half years to see a speech and language therapist.¹²² In 2009, up to 6,500 children at risk did not have an allocated social worker.¹²³ These short-term delays can have life-long consequences affecting children's health, educational achievement and emotional wellbeing.¹²⁴

For children, primary care is especially important. It is where early intervention happens. The joined-up approach envisaged within Primary Care Teams aims to provide timely and effective services to children and families when they need them and close to home.

119 *Ibid.*, p.7.

120 Department of Health and Children (2001) *Primary Care: A New Direction*, Dublin: Stationery Office p. 15.

121 Ombudsman for Children (2009) *Annual Report 2008*, Dublin: Office of the Ombudsman for Children, p. 26.

Local focus: *The Westmeath Independent*, 'Monksland parent hits out at speech and language services withdrawal', 29 July 2009; *The Corkman*, 'Learning to live with Aspergers', 22 October 2009; *Galway Independent*, '905 children waiting on speech and language therapy in Galway', 13 February 2008; *Irish Examiner*, 'Children face two year wait for therapies', 16 March 2009 (this article includes waiting list breakdown by county).

122 Figures obtained from the HSE by Brian Hayes, T.D., referenced in: Deaglán de Bréadán, 'Dublin Children waiting 18 months for speech and language services', *The Irish Times*, 6 May 2008.

123 Carl O'Brien, 'Government failing to provide details on child deaths in care', *The Irish Times*, 12 June 2009.

124 Irish Association of Speech and Language Therapists (2007) Position Paper, *Specific Speech and Language Impairment in Children: Definition, Service Provision and Recommendations for Change*, p. 8.

2.2. MENTAL HEALTH

“Children will be supported to enjoy the optimum [...] mental and emotional wellbeing.” (*National Children’s Strategy*, p.46).

COMMITMENT	PROGRESS
<i>Towards 2016</i> commits to delivering – under the framework of <i>A Vision for Change</i> strategy – a significant number of child and adolescent community mental health teams (CMHTs) within the context of a 7- to 10-year target of one CMHT per 100,000 of the population by 2008, and two CMHTs per 100,000 of the population by 2013. ¹²⁵ These child and adolescent CMHTs will develop clear links with primary and community care services and identify and prioritise the mental health needs of children in each catchment area. ¹²⁶	Still far from realisation. ¹²⁷ Some improvement since <i>Report Card 2009</i> .

children aged 16 and 17.¹³⁰ In 2008, just 12.2% of young people attending CMHTs were aged 16 years or older.¹³¹

Waiting lists remain a problem; 40% of CMHTs, or 20 teams, have a waiting list of between 50 and 99 children. Waiting times vary countrywide, with the highest number of children waiting – 997 – in the HSE South region, and the lowest number – 634 – in Dublin North East.¹³² Overall however, the number of children waiting and the length of time spent waiting reduced between 2007 and 2008.¹³³

Budget 2010 provided some additional funding to mental health services. See commitment below for further details. Finally, in a welcome development, 2009 saw the publication of the first *Child Adolescent Mental Health Services Annual Report*, which will track and publish relevant data on a yearly basis.¹³⁴

What’s happening?

Some progress in 2009, but meeting this target will require sustained commitment and dedicated resources over a number of years. Not to be neglected. At the end of 2008, 47 Child and Adolescent Mental Health Teams (CMHTs) were in operation; by June 2009 this had increased to 54 teams.¹²⁸ However, this figure is disputed, in that many of these teams are not complete; team staffing levels average a third less staff than required.¹²⁹ In addition, further steps are required to ensure that the teams provide full mental health services to all children up to 18 years. Currently, the majority of teams support children up to age 15, but there are particular difficulties accessing services for

IMMEDIATE ACTION

- > **Urgently deliver the promised Child and Adolescent Community Mental Health Teams and establish a clear line of budgetary accountability.** Children’s mental health is a crucial part of their overall health and wellbeing, and Child and Adolescent Community Mental Health Teams (CMHTs) are the basic community level support for children with mental health problems. The HSE must honour the commitments made to develop CMHTs as a matter of urgency. The HSE must also establish a clear line of accountability for money spent on mental health services without delay.

¹²⁵ Government of Ireland (2006) *Towards 2016, Ten-Year Framework Social Partnership Agreement 2006-2015*, Dublin: Stationery Office, p. 44

¹²⁶ *Ibid.*, p. 44.

¹²⁷ Mental Health Commission (2009) *From Vision to Action: An Analysis of the Implementation for A Vision for Change*, Dublin: Mental Health Commission, p. 23.

¹²⁸ Health Service Executive (2009) *Corporate Performance Measurement: Report against the Corporate Plan 2008-2011, January-June 2009*, Dublin: HSE p.21. These services include community-based child and adolescent teams (49); day hospital services (2); and liaison services and inpatient services (3).

¹²⁹ CMHTs should have 13 staff members in total, 11 of whom clinical. They include one consultant psychiatrist, one doctor in training, two psychiatric nurses, two clinical psychologists, two social workers, one occupational therapist, one speech and language therapist, one childcare worker, and two administrative staff. In November 2008, the 49 teams were operating at 66.2% of the recommended complement. See Health Service Executive (2009) *Child and Adolescent Mental Health Services: First Annual Report 2008*, p. 9.

¹³⁰ Current child and adolescent mental health services were originally designed for the 0-15 age group, and run by the former regional health boards. The HSE estimates that extending the service to 16-18 year olds will double the cost of providing the service.

¹³¹ Health Service Executive (2009) *Child and Adolescent Mental Health Services: First Annual Report 2008*, p. 22. From 2006 the practice of teams keeping on existing cases beyond their 16th birthday was extended, but without the provision of additional resources. The arrangements for supporting 16- and 17-year-olds with mental health difficulties vary from team to team.

¹³² *Ibid.*, p.12.

¹³³ *Ibid.*

¹³⁴ *Ibid.*

COMMITMENT	PROGRESS
The <i>Programme for Government</i> commits to fully investing in, and fully implementing, the <i>A Vision for Change</i> strategy and providing further additional funding to support the recovery model of mental health provision. ¹³⁵	Deeply disappointing. Little evidence of progress since <i>Report Card 2009</i> .

it provides no detail on how this will be achieved.¹³⁸ On that basis, it will have taken four years to spend the funds allocated in 2006. The HSE acknowledges that funds allocated to mental health were used to cover gaps in other areas of the health service.¹³⁹ It is no surprise, therefore, that Government is no longer confident that funds allocated to mental health will be used appropriately by the HSE.¹⁴⁰

In 2008, 406 children were admitted to inpatient units.¹⁴¹ Due to the ongoing shortage of beds, 263 of these children were placed in adult psychiatric units.¹⁴²

What's happening?

Implementation 'gap': policy there but painfully slow pace of delivery. New funding committed in Budget 2010, but allocation for children is not yet clear.

Budget 2010 announced a new programme of multi-annual investment in mental health, based on the sale of HSE assets. In 2010, €43 million is committed to this 'mental health capital programme', which will fund mental health projects in line with the strategy set out in *A Vision for Change*, including the development of child and adolescent mental health units.¹³⁶

Effective implementation of *A Vision for Change* requires an accountable leader with a supporting team, and a clear plan along with the necessary resources and authority to ensure implementation. To date these elements have been missing. The appointment of an Assistant National Director for Mental Health Services in 2009 is welcome, though this appointment should have been made three years earlier when the strategy was commenced.

Implementation of *A Vision for Change* is seriously delayed, even though close to full funding was provided in 2006 and 2007 (€26.2 million in 2006 and €25 million in 2007). In mid-2009 the HSE reported that just €19 million of the 2006 allocation had been used and that only €10.5 million of the 2007 allocation had been committed by the end of 2007.¹³⁷ The HSE predicts that 94% of this total resource of €51.2 million will be committed by the end of 2009, though

IMMEDIATE ACTION

- > **Publish the HSE Implementation Plan for *A Vision for Change*.**
The Assistant National Director for Mental Health Services should publish the *Implementation Plan for A Vision for Change 2009-2013*, including timelines, costings and designated responsibility for each action.¹⁴³ Without effective target-setting, monitoring and evaluation, *A Vision for Change* risks ongoing delays to its implementation.
- > **Urgently end the practice of accommodating children in adult psychiatric units.**
The HSE must end, as a matter of urgency, the inappropriate practice of treating children with mental health difficulties in adult psychiatric facilities due to the absence of suitable beds for those under 18 years. This will require appropriate provision of in-patient beds and Child and Adolescent Community Mental Health Teams.

Comment

There were some green shoots in mental health in 2009, reflected in the small improvement from an 'E' grade to a 'D-'. While the Government has not yet met its targets in this area – and its performance is still considered 'barely acceptable' – there are welcome

¹³⁵ Government of Ireland (2007) *Programme for Government*, Dublin: Stationery Office, p. 39.

¹³⁶ Department of Health and Children, 'Minister John Moloney announces multi-annual capital programme for mental health' [Press Release], 9 December 2009.

¹³⁷ Health Service Executive (2009) *Implementation Plan for A Vision for Change 2009-2013*. Referenced in Mental Health Commission (2009) but not yet publicly available. See *From Vision to Action: An Analysis of the Implementation for A Vision for Change*, Dublin: Mental Health Commission.

¹³⁸ Mental Health Commission (2009) *From Vision to Action: An Analysis of the Implementation for A Vision for Change*, Dublin: Mental Health Commission, p. 23.

¹³⁹ *Ibid.*, p. 24.

¹⁴⁰ "Before any additional funding is provided it is essential that the HSE are in a position to demonstrate that money allocated to mental health services is efficiently used..." Minister for Health, January 2008, quoted in: *Ibid.*

¹⁴¹ This issue was raised by the United Nations Committee on the Rights of the Child in its *Concluding Observations* to the Irish Government, September 2006, see (CRC/C/IRL/CO/2, p. 10 paragraph 47).

¹⁴² This is the latest figure available. Health Service Executive (2009), *Child and Adolescent Mental Health Services: First Annual Report 2008*, p. 5.

¹⁴³ This document exists, but is not in the public domain.

signs of commitment and drive behind the scenes. But still, despite widespread acknowledgement that early intervention is essential, child and adolescent mental health services in Ireland operate in crisis mode.¹⁴⁴ This balance must shift. Developing mental health services at a local level – comprising health promotion, preventive and early intervention initiatives – to equip families and communities to support children’s mental health needs must be a Government priority.

During 2009, the Children’s Rights Alliance and Amnesty International Ireland came together to establish the Children’s Mental Health Coalition to shine a spot light on children’s mental health. The Coalition, comprising more than 35 groups, published a Manifesto to promote urgent change in four key areas – mental health services, the education system, the criminal justice system, and the care system – where gaps in the system are currently leaving children vulnerable.¹⁴⁵

Scale of the Problem: In 2008, there were 3,117 children waiting to be seen by a child and adolescent mental health team, of these, 897 children were waiting over a year.¹⁴⁶ This represented a decrease of 492 children, or 13.6% on 2007 figures.¹⁴⁷ While early intervention and community-based supports is best practice for mental health services, some children do, on occasion, need hospitalisation. In Ireland, in-patient hospital provision is often inadequate and inappropriate: only 30 of the 100 promised beds for children and adolescents with mental health difficulties were available in April 2009¹⁴⁸ (this should reach 55 by the end of 2010).¹⁴⁹ Due to the current shortage of in-patient beds, children with serious mental health problems are frequently admitted to inappropriate settings, such as adult psychiatric wards, where staff lack the necessary expertise to work with children.¹⁵⁰ Placing children in adult psychiatric wards is a basic violation of their human rights, and poses a child

protection risk, yet in 2008, the number of children being placed in these wards increased from 218 in 2007¹⁵¹ to 263 in 2008¹⁵² In a positive move, in 2009, the Mental Health Commission amended its code of practice to officially phase out the placement of children in inappropriate settings, including adult psychiatric units, starting in July 2009, because of the risks these placements pose for children.¹⁵³

Youth Justice and Care System: Children in the youth justice system and children in State care are among those at higher risk of experiencing mental health issues. A 2007 study found that over 82% of children in a sample group from a Children’s Detention School had at least one psychological disorder; and over 18% of these reported considering suicide.¹⁵⁴ Many children in care have experienced stressful life events, including abuse and neglect, leading to their placement in care. Others arrived in Ireland as separated children, some of whom have experienced war and trauma in their countries of origin. Particular attention must be paid to children from these groups, and, where problems are identified, mental health services and supports should be provided and tailored to meet each child’s individual needs. Accessing services should not be dependent on individual advocacy by foster families or others on behalf of the child.¹⁵⁵

Raising Awareness: In 2009, there were positive developments in raising awareness about mental health, and challenging stigma and taboos, with many initiatives coming from young people themselves. Dáil na nÓg, the children’s parliament, developed a national agenda on mental health nominating it as one of its key priority areas in 2008, 2009 and 2010. A variety of online resources for youth mental health were launched, including the HSE’s site www.letsomeoneknow.ie and the NGO site www.ReachOut.com.

144 The Headstrong Jigsaw project is an example of good practice in the area of prevention and early intervention. For further information see <http://www.headstrong.ie/jigsaw-galway.html>

145 See <http://www.childrensmentalhealth.ie/wp-content/uploads/2009/12/Manifesto.pdf>

146 Health Service Executive (2009) *Child and Adolescent Mental Health Services: First Annual Report 2008*, p. 12.

147 *Ibid.*

148 Fiach Kelly, ‘HSE fails to meet targets on child mental welfare’, *The Irish Independent*, 2 March 2009.

149 Construction has begun on two new 22-bed units in Galway and Cork; these are planned to open by end 2010. Information received by the Children’s Rights Alliance from the Department of Health and Children, January 2010.

150 *Local focus: Western People, Mayo: ‘Children treated in adult mental wards’*, 13 May 2009.

151 A. Daly, D. Walsh & R. Moran (2008) *Statistics Series 5, Activities of Irish Psychiatric Units and Hospitals 2007*, Dublin: Health Research Board, p. 66

152 A. Daly and D. Walsh (2008) *Statistics Series 7, Activities of Irish Psychiatric Units and Hospitals 2008*, Dublin: Health Research Board, p. 67. The figure of 263 differs from the figure of 247 provided by the *Mental Health Commission Annual Report 2008*, p.30. Different methodologies of data collection may account for this discrepancy.

153 The Commission pledges that no child under 16 years is to be admitted to an adult unit from July 2009. This will extend to children under 17 by December 2010 and to under-18s by the end of 2011. New guidance notes provided to psychiatric facilities say that if the admission of a child to an adult unit takes place in contravention of its code of practice, the centre must submit a detailed report to the Mental Health Commission outlining why the admission took place. The Mental Health Commission was notified of only one child admission under sixteen years old during the period 1 July 2009 to 31 December 2009 (information received by the Children’s Rights Alliance from the Department of Health and Children, January 2010).

154 Dr. J.M Hayes, Dr. G. O’Reilly (2007) *Emotional Intelligence Mental Health and Juvenile Delinquency*, Cork: Juvenile Mental Health Matters, p. 37 & 44.

155 This issue was raised by the United Nations Committee on the Rights of the Child in its *Concluding Observations* to the Irish Government, September 2006. In relation to separated children, the Committee recommended that the State ensure that the same standard of access to support services applies whether the child is in the care of authorities or of their parents; see (CRC/C/IRL/CO/2, p. 14 paragraph 65).

2.3. CHILDHOOD OBESITY

“Children will be supported to enjoy the optimum physical ... wellbeing.”

(*National Children's Strategy*, p. 46)

COMMITMENT	PROGRESS
<i>Towards 2016</i> commits to launching a National Nutrition Policy to address children's food poverty and obesity, and to developing a national database to monitor prevalence trends of growth, overweight and obesity.	Too slow. No visible progress since <i>Report Card 2009</i> .

continues to participate in national and international surveys relating to child health and nutrition.¹⁵⁸

IMMEDIATE ACTION

> **Deliver a National Nutrition Policy and provide political leadership and adequate resources for its implementation.**

The Department of Health and Children should be responsible for the delivery, resourcing and implementation of a National Nutrition Policy. The Policy should include clear actions to tackle childhood obesity, and bring together departments and agencies with responsibility for health, education, recreation and culture. Obesity is a multi-faceted problem, and therefore requires a joined-up solution.

What's happening?

The National Nutrition Policy is still not published. The national database is not yet up and running, but some progress is being made.

Report Card 2009 stated that a National Nutrition Policy would be published in 2009. This did not happen. A draft National Nutrition Policy is currently in its final stages; however, a date for publication has not been set.¹⁵⁶ The policy is intended to provide strategic direction on nutrition for the next ten years, and to specifically target children and young people. Without a national policy providing a framework to reach common targets, initiatives taken in this area, though worthy, are disconnected.¹⁵⁷

The national database is intended to bring together existing data on overweight and obesity and use this to monitor trends. The database is not yet in place, however the WHO European Childhood Obesity Surveillance Initiative has been selected as its key data. The *Growing Up In Ireland* survey and the Irish Universities Nutrition Alliance surveys on children and teens, and the planned pre-schooler survey will be important additional sources. Meanwhile, Ireland



¹⁵⁶ Information received by the Children's Rights Alliance from the Department of Health and Children, November 2009.

¹⁵⁷ Examples of positive initiatives include the healthy lunchbox policies introduced by several schools, see <http://www.sasns.ie/pdf/HealthyEatingActiveLiving.pdf>; and individual school policies see http://www.camolinns.ie/healthy_lunch_policy.html; the 'Little Steps' campaign see <http://www.littlesteps.eu/home/>.
Local focus: Locally, initiatives have been popular and successful; for example see *Kerry's Eye*, 'Currow kids are real food dudes', January 2008.

¹⁵⁸ The Department of Health and Children together with the HSE Population Health division participated in the World Health Organisation (WHO) European Childhood Obesity Surveillance Initiative and the WHO Health Behaviour in School Age Children (HBSC) survey.

Comment

Still, the Government fails to recognise just how serious the childhood obesity epidemic is. This year it scrapes a 'D-' – a fall from last year's 'D' grade – as we await the same policies and actions as we did this time last year. The Government's 'barely acceptable performance', with little or no positive impact on children's lives, is likely to be 'unacceptable' next year unless serious action is taken.

It is now four years since the National Taskforce on Obesity reported. Yet there is still no Government strategy outlining solutions and guiding actions, no clear targets or goals and no one taking responsibility for this ticking timebomb. The Government has failed to deliver the National Nutrition Policy, the development of which was announced in 2005. The purpose of the Policy is to provide strategic direction on nutrition for the next five to ten years and it was announced that it would be published in 2006.¹⁵⁹ Meanwhile, the obesity epidemic continues to grow, increasing the long term social and economic cost to society.

Research undertaken in 2009 by the Food Safety Authority of Ireland (FSAI) shows that it is up to ten times cheaper for low-income households to meet their calorie needs by eating snacks that are high in fat and sugar, rather than choosing healthy alternatives.¹⁶⁰ According to the FSAI research, a healthy diet costs €141 per week for a family with two children when bought in a 'multiple' supermarket,¹⁶¹ or 30% of combined weekly social welfare and child benefit payments.¹⁶² This rises to 58% if bought in a local convenience store.¹⁶³ The cost of healthy eating for a teenager is twice that for a younger child,¹⁶⁴ and for a male teenager, the cost of healthy food bought in a local convenience store is greater than his total child income support. With more and more families struggling financially, these figures illustrate that ensuring a healthy diet for children is a heavy financial burden on families.

This is the first generation of children growing up in Ireland whose life expectancy, due to levels of childhood obesity, may be shorter than that of their parents.¹⁶⁵ The numbers of overweight or obese children in Ireland trebled in the last decade to 300,000 – a figure that is rising at a rate of 10,000 per year;¹⁶⁶ and in 2009 alone, 19% of nine-year-olds were classified as overweight and 7% as obese.¹⁶⁷ Childhood obesity dramatically affects children's long-term health, and results in serious costs – physical, economic, and social – to society as a whole.¹⁶⁸ Children who are obese face far greater risk of developing health problems in later life including type-two diabetes, high blood pressure and heart disease. With obesity in childhood comes a risk of social and emotional vulnerability arising from low self-esteem, bullying, and risk of exclusion from the everyday childhood experiences of sport and adventure play.¹⁶⁹

Just as the causes of childhood obesity are multi-faceted and linked to factors in society that impact on home, school and community life, so too are the solutions. Solving this problem will involve an integrated approach and a variety of actors, from Government departments and agencies, to retailers and local planners. Measures, such as a ban on junk food advertising, must be combined with educational strategies to encourage healthy eating, lower cost healthy food, and planning and transport policies that encourage exercise.¹⁷⁰

It is now four years since the National Taskforce on Obesity reported. Yet there is still no Government strategy outlining solutions and guiding actions.

159 Department of Health and Children, 'Young People fail to react to obesity issue' [Press Release], 22 November 2005, see <http://www.dohc.ie/press/releases/2005/20051122.html> [accessed 19 November 2009].

160 Data from Central Statistics Office, EU Survey on Income and Living Conditions (SILC) cited in Healthy Food for All, *The affordability of healthy eating in low income households: policy briefing*, October 2009.

161 'Multiple supermarket' refers to a large chain supermarket, for example Tesco or Dunnes Stores.

162 The largest cost items are fruit and vegetables (33%-37% total food cost) followed by lean meat and fish (29%-34% total food cost). Healthy Food for All, *The affordability of healthy eating in low income households: policy briefing*, October 2009.

163 Ibid.

164 For a teenager, the cost of healthy eating for a week at a multiple supermarket is €35, compared to €18 for a younger child.

165 National Taskforce on Obesity (2005) *Obesity: the Policy Challenges*, Dublin: Department for Health and Children, p. 52.

166 Ibid., p. 6.

167 Equivalent of one in four nine-year-olds as either overweight or obese. Growing Up In Ireland: the National Longitudinal Study on Children (2009) *The Lives of Nine-Year Olds, Child Cohort, Report 1*, Dublin: Stationery Office, p. 58.

168 Irish Medical Organisation (2006) *Position Paper on Obesity*, p. 2.

169 Remarks by President of Ireland Mary McAleese at the 19th Annual Scientific Conference of the European Childhood Obesity Group, Faculty of Health Sciences, Trinity College, Dublin, 17 September 2009.

170 For more information on the Alliance position on junk food advertising, see Children's Rights Alliance (2009) *Briefing Note on Junk Food Advertising*, www.childrensrights.ie





Material Wellbeing

LOCAL EYE



THE COST OF EDUCATION: WESTERN PEOPLE

"I have so many sleepless nights worrying about how I'm going to afford it all. There's the cost of school jumpers €15 each and I have to buy two of them for the year. Then there's trousers for €10 each. I try and get the cheapest shoes I can but they would go through several pairs of them in a year. I know that I'm not the only one in this boat. A lot of other parents I know are in the same situation." These are the words of Mary (not her real name), a 34-year-old Castlebar mother of four on a lone parent allowance, describing her struggle to meet back to school costs to *Western People* in September 2009.

Mary estimated that the cost of school uniforms, shoes, books, incidentals and extra-curricular activities for her children amounts to almost €1,000. And while she received a back to school allowance, this barely covered the cost when she had to spend €300 on books. There is no schoolbook rental scheme in her children's school.

Staggeringly, Ireland is one of the few European countries where there is no national school book rental scheme or free provision of books to school students.

Western People, 'Back to school costs causing sleepless nights', 9 September 2009.

Overview

An overall 'E' grade in material wellbeing – a huge drop from last year's 'C-' – shows Government's 'unacceptable' response to the economic crisis, which took steps in the wrong direction and will have no positive impact on children's lives.

In 2009, families with children – across all income brackets – took the brunt of Budget cuts.¹⁷¹ All at once, families were hit by a cut in Child Benefit for 18-year-olds and the abolition of the Early Childcare Supplement, by substantial increases in school transport costs and the end of the school book grant. They were also affected by reductions in Rent Supplement and in Mortgage Interest Relief, as well as the income, pension and health levies. For many families, the abolition of the Christmas Bonus payment meant a stressful Christmas and a legacy of debt. For families with sick children, changes to the Drug Refund Scheme and the increased cost of a hospital bed added a further burden. This trend looks set to continue; Budget 2010 cut the Child Benefit payment – the only universal payment that recognises the costs associated with bringing up children – by 10%.

In simple cash terms, every single family in the country was worse off in 2009 than in 2008. Yet raising a child was no cheaper. While consumer prices overall decreased, costs associated with children went up: childcare by 6%, primary and secondary education by 7% and healthcare by 3%.¹⁷² Each of these increases risks pushing more children into poverty. Indeed, 2006 research found that over 60,000 families with children would fall into poverty if weekly income was reduced by €10; and over 30,000 households with children would find themselves in poverty if weekly household income was reduced by €5.¹⁷³

The Government has made *some* progress in reducing child poverty – 2008 figures show a reduction of 1% on those from 2007, and over 4% since 2005 – but this decrease in poverty does not reflect the increased level of wealth in Ireland during those years. Still, one child in every 16 in Ireland lives in consistent poverty: over

65,000 children living in families that cannot afford basic necessities like food, warm clothing or heating.¹⁷⁴ One in six children are 'at risk' of poverty: over 185,000 children live in households where the family income is less than 60% of the national median income per adult of €238.69 per week.¹⁷⁵ In 2009, families struggled to get by with serious cuts to their income. In 2010, with further cuts to cope with and rising costs, including fuel, the number of children in poverty is likely to rise.

But ending child poverty once and for all should not be a mere aspiration, but a real goal. Government knows what is required: adequate income support to the poorest families; investment in public services, particularly education, health and social services; and constructive policies to get parents into work that pays a decent wage. Children have a right not to live in poverty and it is the State's duty to ensure that they do not.

In 2009, families with children – across all income brackets – took the brunt of Budget cuts.



171 The Children's Rights Alliance produced a series of papers and analyses of Government responses to changes in the economic environment during 2009, including: *An Bord Snip: Cutting Childhood Short* (July 2009); *Information Note on the Report of the Commission on Taxation: Impact on Children* (September 2009); *Pre-budget Submission to the Department of Social and Family Affairs* (September 2009); *Pre-Budget Submission to the Department of Finance* (October 2009); *Briefing Note on the Renewed Programme for Government as it relates to Children* (October 2009); *Analysis of Budget 2010 and its Impact on Children* (December 2009). All available on www.childrensrights.ie

172 Central Statistics Office (2009) *Consumer Price Index*: June 2009.

173 Combat Poverty Research Seminar Series, 'Living around the Poverty Line', January 2009.

174 This figure represents 6.3% of all children. Central Statistics Office (2009) *EU Survey on Income and Living Conditions (EU-SILC) 2008*.

175 Central Statistics Office (2009) *EU Survey on Income and Living Conditions (EU-SILC) 2008*, p. 33.

3.1. FINANCIAL SUPPORT FOR FAMILIES

“All children should grow up in a family with access to sufficient resources, supports and services, to nurture and care for the child, and foster the child’s development and full and equal participation in society.” (*Towards 2016*, p. 41).

COMMITMENT	PROGRESS
Ending child poverty has been a stated Government priority since 1999. Most recently, <i>Towards 2016</i> commits to progress towards achieving the NAPS target: that the combined value of child income support measures be set at 33-35% of the minimum adult social welfare payment rate. ¹⁷⁶	Steps backwards. Cut to Child Benefit is a negative move since <i>Report Card 2009</i> .

that not all children in low income families will benefit from the top-up. Families on low incomes, just above the FIS threshold, will be hit hardest by this cruel cut.

The combined child income support for social welfare dependent families is currently at 33%, thus meeting the *Towards 2016* commitment.¹⁷⁷

In 2008, over 65,000 children in Ireland were living in consistent poverty.¹⁷⁸ This is a reduction of 43,400 children, or 4.4% of all children, since 2005.¹⁷⁹ We commend the Government for its progress in this vital area. But this progress was made in good times. Signals now – like the cut to the Child Benefit payment – suggest that addressing child poverty is no longer a Government priority.

What’s happening?

Child Benefit was reduced by up to 10% in Budget 2010. Targeting basic payments for children to make exchequer savings is a deeply disappointing move and the opportunity to fundamentally reform the tax and welfare system was missed.

The Child Benefit payment was reduced by €16 for all children in Budget 2010. It is now paid at a rate of €150 for the first and second child and €187 for the third and subsequent children. Families on low incomes will be compensated using the Qualified Child Increase (QCI) for those on social welfare payments, and through the Family Income Supplement (FIS) for those at work on low pay. The savings made from the cut are €221 million. However, the cost of compensatory measures through QCI and FIS total €98 million, leaving an overall saving for Government of €123 million. This blunt cut to Child Benefit fails to recognise the poverty traps associated with the QCI or the low take-up rate and limited eligibility for FIS (which does not include the self-employed). This means



176 Government of Ireland (2006) *Towards 2016: Ten-Year Framework Social Partnership Agreement 2006-2015*, Dublin: Stationery Office, p. 45 and (2007) *National Action Plan for Social Inclusion 2007-2013*, Dublin: Stationery Office, p. 14.

177 The exact percentage figure is 32.9%. Information received by the Children’s Rights Alliance from the Department of Social and Family Affairs, January 2010.

178 Central Statistics Office (2009) *EU Survey of Income and Living Conditions (SILC) 2008*, Dublin: Stationery Office.

179 Children’s Rights Alliance, *Analysis of EU SILC Figures for Children under 18*, November 2009, see <http://childrensrightrights-ie.access.secure-ssl-servers.biz/files/EUSILCfiguresAnalysis1109.pdf>

COMMITMENT	PROGRESS
<i>Towards 2016</i> also promises to progress, as a priority, further work aimed at assisting children in families on low incomes, including reviewing child income supports which avoid employment disincentives. This work is to be informed by the NESC study on new ways to target child income support, completed in 2007. ¹⁸⁰ The <i>Programme for Government</i> commits to the amalgamation of Qualified Child Allowances and Family Income Supplements in order to develop a second tier of income support targeted at the poorest families. ¹⁸¹	Stalled. No progress since <i>Report Card 2009</i> .

compensate families on low incomes for the cut in the Child Benefit payment. But there are basic problems with each of these payments, including low take up, restricted eligibility and potential poverty traps, making them ineffective mechanisms to significantly reduce child poverty. This means that children in low income families, who should be eligible for support from the State, are not getting it.

Despite the commitment made by Government, and the findings of the two studies above, there is no indication that a second tier payment will be introduced.

IMMEDIATE ACTION

> **Introduce a new, targeted payment for low income families with children.**

The Department of Social and Family Affairs and Revenue Commissioners should use the recession as a long-awaited opportunity to integrate their systems. Then, they should work together to urgently introduce a second tier, targeted payment at families with children on the lowest incomes.¹⁸⁷ This payment would be paid to parents on low incomes, regardless of whether that low income comes from welfare or work.

What's happening?

Nothing.

A National Economic and Social Council (NESC) study, examining new ways to target child income support, was completed in 2007, but to date its findings have not been acted upon.¹⁸² The study explored the feasibility of introducing a new payment to reduce child poverty, targeted specifically at families on low incomes, regardless of parents' employment status.¹⁸³ This payment referred to as a 'second tier' payment, is estimated by NESC to cost €775 million per annum,¹⁸⁴ and by the ESRI to cost €450 million per annum.¹⁸⁵

To administer the second tier payment, integration of the tax and welfare systems is required.¹⁸⁶ This would require some initial investment and would take time, but until these two systems are joined-up the current methods of responding to families in poverty remain flawed. To date, the Government has avoided this step by using two existing tools – the Family Income Supplement (FIS) and the Qualified Child Increase (QCI) – to target payments at children in poor families. Budget 2010 extended the use of these payments to

This blunt cut to Child Benefit fails to recognise the poverty traps associated with the QCI or the low take-up rate and limited eligibility for FIS.

180 Government of Ireland (2006) *Towards 2016: Ten-Year Framework Social Partnership Agreement 2006-2015* Dublin: Stationery Office, p. 46.

181 Government of Ireland (2007) *Programme for Government 2007-2013*, Dublin: Stationery Office, p. 53.

182 National Economic and Social Council (2007) *Ireland's Child Income Supports: the Case for a New Form of Targeting*, Research Series, no. 6 Dublin: NESC.

183 The United Nations Committee on the Rights of the Child, in its *Concluding Observations* to the Irish Government, September 2006, recommended the introduction of a supplement to the existing child benefit payment as an additional and targeted allowance to assist families that experience the highest levels of poverty, see (CRC/C/IRL/CO/2, p. 12 paragraph 57.b).

184 National Economic and Social Council (2007) *Ireland's Child Income Supports: the Case for a New Form of Targeting*, Research Series, no. 6 Dublin: NESC, p. 68.

185 T. Callan et al. (2006) *Child Poverty and Child Income Supports: Ireland in a Comparative Perspective*, Dublin: ESRI.

186 The merging of the two systems will have other positive advantages, outside of the area of child income support.

187 National Economic and Social Council (2007) *Ireland's Child Income Supports: the Case for a New Form of Targeting*, Research Series, no. 6 Dublin: NESC, p. 68.

Comment

The Government did not seize the opportunity to better target payments at children in poor families by integrating the tax and welfare systems in 2009. This grave failure by Government merits an 'F' grade – a huge drop from last year's 'B-' – because this decision undermines children's wellbeing.

The Child Benefit payment is a non-stigmatising, regular and valued payment, wholly focused on children. In 2009, cutting, taxing or means testing Child Benefit were considered as ways to reduce the annual social welfare bill. The Alliance was firmly opposed to any change in the Child Benefit payment, and remains opposed to the €16 cut introduced in Budget 2010.¹⁸⁸

2009 research shows that the cost of raising a child, providing the very basic minimum requirements, costs, on average, €43.20 per week.¹⁸⁹ Providing a 'modest but adequate' standard of living for a child comes to €60.29 weekly.¹⁹⁰ Neither standard can be sustained on the €34.61 that child benefit provides. Child Benefit alone, or combined with existing social welfare payments, will not lift children in the poorest families out of poverty. Essentially, the system is flawed and needs reform.

Current Child Income Supports: Child Benefit is paid on behalf of (almost) all children in the country.¹⁹¹ The Qualified Child Increase (QCI) is additional financial support paid to families with children who rely on social welfare as their only income; in 2009 it was paid on behalf of 492,000 children.¹⁹² The Family Income Supplement (FIS) is a payment for families at work on low pay, designed to incentivise parents into employment; in 2008 it was paid to 29,000 families on behalf of 58,000 children.¹⁹³ However, FIS operates on the assumption of low numbers accessing it: the

annual budget for the scheme would not cover its full take up.¹⁹⁴ Together, QCIs and FIS support approximately 550,000 children. This leaves over 590,000 children without any additional support from the State beyond the basic Child Benefit payment. There are problems with QCI and FIS: QCIs are paid at a low rate to avoid becoming an employment disincentive, and thus can have little real impact on child poverty. FIS is complicated to access, lacks flexibility, is plagued by low take-up and the self-employed are not eligible. Moreover, moving between the two payments is difficult and creates problems for parents moving between welfare and work.

System Change: It is the duration of poverty, not the depth that has the most damaging effect on children's lives.¹⁹⁵ Therefore, the State must respond rapidly to families in poverty and those living on the poverty line. To do this, it must integrate the tax and welfare systems so that the State can react quickly to changes in family income. Then, it should introduce a second tier, targeted payment to allow parents to move between welfare and work, without risking loss of benefits or mountains of bureaucracy. These measures must be supported by constructive policies to get parents into work that pays.

Lone Parent Families: Budget 2010 cut the One Parent Family Payment by 4.1%, from €204 to €196 per week, despite EU SILC figures released in 2009 showing that lone parent households have the highest recorded consistent poverty rate among all household types. Nearly one in five of those living in lone parent households (17.8%) were in consistent poverty in 2008, and more than one third (36%) of the same group were at risk of poverty in the same year.¹⁹⁶ The decision to cut the One Parent Family Payment puts children in the most vulnerable families at further risk of poverty.¹⁹⁷

188 During 2009 the Alliance campaigned against any change to the Child Benefit payment. The Alliance produced a Position Paper and met with the Minister for Social and Family Affairs, and, (as members of the Community and Voluntary Pillar of Social Partnership) with the Minister for Finance and the Taoiseach. See Children's Rights Alliance papers: *Position Paper on the Child Benefit payment* (July 2009); *An Bord Snip: Cutting Childhood Short* (July 2009); *Information Note on the Report of the Commission on Taxation: Impact on Children* (September 2009). All available at www.childrensrights.ie.

Local focus: *Offaly Express*, 'Offaly families to march in Dublin to save child benefit', 16 September 2009.

189 B. Harvey (2009) *Cost of A Child Briefing Paper*, Dublin: Barnardos, p. 2.

190 *Ibid.*

191 In 2008, Child Benefit was paid to 596,108 families on behalf of 1,141,938 children. Children who do not satisfy the Habitual Residency Condition do not receive Child Benefit; this includes separated children and children seeking asylum living in direct provision centres.

192 363,000 children receive a full rate QCI payment of €26 per week, 129,000 children receive a half rate payment of €13 per week. Information received by the Children's Rights Alliance from the Department of Social and Family Affairs, December 2009.

193 Department of Social and Family Affairs (2009) *Statistical Information on Social Welfare Services 2008*, p. 74, available at www.welfare.ie

194 Information received by the Children's Rights Alliance from the Irish Congress of Trade Unions, January 2010.

195 Combat Poverty Agency (2006) *Tackling Child Poverty: a dynamic perspective*, p. 4.

196 Central Statistics Office (2009) *EU Survey of Income and Living Conditions (SILC) 2008*, Dublin: Stationery Office.

197 Further cuts to this payment have been mooted, see Mary Minihan, 'Lone parent allowance may be cut, says Hanafin', *The Irish Times*, 30 December 2009. However, Minister for Social & Family Affairs Mary Hanafin has said that any changes would not be in 2010 but in three to four years time. See <http://www.rte.ie/news/2009/1230/welfare.html>

3.2. ACCESS TO EDUCATION

“Our key overall objectives [in education] are to [...] make each element of the system more inclusive and responsive to marginalised groups.”

(Programme for Government, p. 42).

COMMITMENT	PROGRESS
<i>Towards 2016</i> aims to build an Ireland where children will benefit from a range of educational opportunities and experiences which reflect the diversity of need. ¹⁹⁸	Mixed signals: cuts made and then reversed. Backward steps since <i>Report Card 2009</i> .

additional €7.65 million of grant support available to schools, payable in April 2010.²⁰² School transport fees for second-level pupils were also increased in Budget 2009, further increasing the cost of school for families.²⁰³

Access to education is not just a financial issue; 2009 figures suggest that leading fee-paying schools make little provision for students with special educational needs.²⁰⁴

What's happening?

Confusion. Cuts were made and then reversed. Decisions demonstrate little regard for families struggling with the cost of school. The inherent unfairness in the system of private and public schools remains.

The Back to School Clothing and Footwear Allowance (BSCFA) and the School Books Grant are the primary mechanisms through which families on low incomes are supported with the cost of sending a child to school. Affordable school transport is another important element for many, particularly in rural areas. The rate of the BSCFA does not cover today's schooling costs, and its eligibility criteria means that many low income families miss out. In 2009, applications for this payment increased by 20% on the 2008 figure, reflecting the changed financial circumstances for many families.¹⁹⁹ Budget 2009 abolished the School Books Grant to all schools not in the DEIS programme.²⁰⁰ This decision was reversed in October 2009, however, children in poor families (but not in DEIS schools) did not receive the School Book Grant for the 2009/10 school year.²⁰¹ Budget 2010 announced an

IMMEDIATE ACTION

- > **Reform the payment to support children in low income families with the cost of school.**
The Back to School Clothing and Footwear Allowance and the School Book Grant are not sufficient to support families on low incomes with the cost of children's schooling. The Department of Social and Family Affairs should reform these payments and introduce a single, more substantial, 'cost of school' payment.
- > **Support the establishment of local enrolment committees to facilitate fair and equitable admission decisions for all schools in receipt of state funding.**
The Department of Education and Science should support the establishment of local enrolment committees. These committees, within school clusters, should facilitate a balance of social and ethnic mix, and the inclusion of children with disabilities and special educational needs in schools.

198 Government of Ireland (2006) *Towards 2016: Ten-Year Framework Social Partnership Agreement 2006-2015*, Dublin: Stationery Office, p. 41.

199 There were 150,000 applications for the BSCFA in 2009, compared with 117,057 in 2008 and 100,834 in 2007. There is a budget of €68 million for the scheme in 2009, compared with €47.5 million in 2008. Eithne Donnellan, '20% rise in applications for back-to-school allowance', *The Irish Times*, 20 October 2009.

Local focus: *The Kerryman*, 'Back to School woes for many families', 26 August 2009; *Western People*, 'Back to School costs causing sleepless nights', 9 September 2009.

200 DEIS, Delivering Equality of Education in Schools, is the Government policy to address educational disadvantage.

201 *Renewed Programme for Government* (October 2009) http://www.taoiseach.ie/eng/Publications/Publications_2009/Renewed_Programme_for_Government_October_2009.pdf

202 It is not yet clear exactly which grants this funding is applicable to, or how it will be allocated.

203 School transport fees were increased in Budget 2009 from €168 for Junior Cycle students and €234 for Senior Cycle students to a flat rate of €300 for all students. The maximum amount payable by a single family, regardless of the number of children using the system, is €650.

204 Sean Flynn, 'Fee-paying schools less likely to cater for special needs', *The Irish Times*, 8 December 2009.

Comment

A 'D-' here – a drop from last year's 'D' – shows that Government performance is bordering on the unacceptable.

Education is a proven route out of poverty. Education can change a child's life chances, and plays a crucial role in breaking inter-generational cycles of poverty. But despite 'free' education in Ireland, not all children have the same access to schooling. Instead, a two-tier system dominates. At primary level, the education system is propped up by parents' contributions. 'Voluntary' subscriptions to schools and the extent of fundraising by parents dictate the quality of resources and activities – in art, culture, science, leisure and sport – and thus the quality of the child's school experience. The UN Committee on the Rights of the Child, reporting in 2006, recognised this, and voiced its concern about the "de facto" cost of education and materials in schools, which can act as a disincentive to sending children to school for families of limited means.²⁰⁵ This method of funding is neither fair nor sustainable.

Cost of School: Children in poor families need support with the cost of school. Despite big increases in the BSCFA in recent years – from €16.7 million in 2004 to an estimated €68 million in 2009 – it still fails to reflect the real costs associated with sending a child to school.²⁰⁶ Extras, like books, photocopying, school trips and voluntary subscriptions all add up.²⁰⁷ In 2009, the overall cost of sending a child to primary school was estimated at €353 and as much as €609 for a child in secondary school.²⁰⁸ Existing payments are not enough to support the poorest children at school: additional, innovative measures are required. Potential ways to reduce the cost of school for families include book rental schemes and free homework clubs.

Fee-Paying Schools: In Ireland, the State supports all schools (including private schools) with the cost of teachers' salaries. Private schools can channel additional fee income towards teaching resources and school facilities. In 2009, the 51 fee-paying schools received more than €100 million in State funding for teachers' pay and an additional €2.1 million was provided for capital or building works in 17 of these schools.²⁰⁹ In Budget 2009, the Government differentiated between supports for fee-paying and non fee-paying schools for the first time.²¹⁰ The Education Act 1998 obliges all schools to operate fair and equitable admissions policies,²¹¹ and holds that no child can be excluded from school because of academic ability or social background.²¹² Although private schools' admission policies are in line with the Education Act, 2009 figures show that fee-paying schools cater for just a minority of pupils with special educational needs.²¹³

Education can change a child's life chances, and plays a crucial role in breaking inter-generational cycles of poverty. Existing payments are not enough to support the poorest children at school: additional, innovative measures are required.

205 United Nations Committee on the Rights of the Child (CRC/C/IRL/CO/2, p. 12 paragraph 58), September 2006.

206 In 2007, 180,000 children received the BSCFA, an increase from 161,000 in 2006, due to a widening of the income threshold for access to the payment.

207 Local focus: In Carlow a frustrated father publicly pleaded with the local primary school to stop asking him for money, see *Carlow Nationalist*, 'Enough is Enough!', 18 September 2009.

208 Barnardos (2009) *Back to School Costs Analysis*, http://www.barnardos.ie/assets/files/policies_and_campaigns/Back%20to%20School%20Costs%20Briefing%202009%20%283%29.pdf [accessed 4 December 2009].

209 Sean Flynn, 'Taxpayers fund private schools to the tune of €100m', *The Irish Times*, 6 November 2009.

210 Budget 2009 increased class sizes for all second-level schools, but the cut was deeper for fee-paying schools. Now, non fee-paying schools are entitled to one teacher for every 19 pupils; in fee-paying schools the ratio was increased to 1:20.

211 This issue was raised by the United Nations Committee on the Rights of the Child in its Concluding Observations to the Irish Government, September 2006. The Committee recommended that the existing legislative framework be amended to eliminate discrimination in school admissions, see (CRC/C/IRL/CO/2, p. 13 paragraph 61).

212 Education Act 1998, Part IV, Section 15 (2)(d).

213 Sean Flynn, 'Fee-paying schools less likely to cater for special needs', *The Irish Times*, 8 December 2009.

3.3. ACCESS TO HEALTHCARE

“Every child should have access to world-class health, personal and social services...”
(Towards 2016, p. 41).

COMMITMENT	PROGRESS
The <i>Programme for Government</i> commits to doubling the income limit eligibility for the medical card for parents of children under six years old, and trebling the income limit for parents of children with an intellectual disability. ²¹⁴	Blocked. Review still not published. No progress since <i>Report Card 2009</i> .

What's happening?

No action. The commitment to increase eligibility was not included in the *Renewed Programme for Government* or in Budget 2010.

A review of medical card eligibility was announced in 2005 and is to look at eligibility in terms of financial, medical and social needs. It was due to report in autumn 2008 and did not.²¹⁵ There is still no indication when the review will be completed or published.²¹⁶ Meanwhile the number of families applying for medical cards is increasing.²¹⁷ Now, as the economic situation worsens and more and more families struggle to cover the cost of basic healthcare for children, widening of eligibility criteria for medical cards is vital. There is no excuse for this delay.

Budget 2010 increased the threshold for the Drug Payment Scheme from €100 per family per month, to €120. This means that families with children who require regular prescription medication – for conditions like asthma or epilepsy – will pay more for vital medication each month.

IMMEDIATE ACTION

- > **Finalise the medical card review and widen eligibility criteria for families with children as promised.**

Providing children with access to healthcare, regardless of their parents' income status, is a critical step towards achieving health equality for children. The Department of Health and Children should honour the commitment outlined in the *Programme for Government* to widen eligibility for medical cards for parents of children.

- > **Improve access to medical cards for children with certain illnesses.**

Children with ongoing medical conditions – like asthma or epilepsy – and living in families with income below an agreed threshold, should be entitled to a full medical card in their own right. These children regularly visit the GP and use prescription medicines, at significant cost to their families. In these cases, providing a medical card based on a *combination* of medical and financial need is in the child's best interests. The current, ad hoc nature of granting discretionary medical cards is not meeting this need.

214 Government of Ireland (2007) *Programme for Government 2007-2012*, Dublin: Stationery Office, p. 36.

215 A team was established by the Department of Health and Children in 2005 to work on a new legislative framework to provide clear statutory provisions for eligibility for personal, health and social services. The Review was to look at policy objectives underpinning the medical card/GP visit card, income assessment guidelines, the need or otherwise to retain some element of discretion in the new system, maintaining/improving incentives to employment and avoiding poverty and social welfare traps, the financial and operational implications for the HSE of any proposed changes to the existing system, transitional arrangements in moving to any new system with particular reference to the implications for current card holders, and delivery of the commitments in the *Programme for Government*.

216 Written answer to Parliamentary Question [41222/09] 12 November 2009, James Reilly, T.D. to Minister for Health, Mary Harney T.D.

217 Niamh Mullen, '1.5 million hold medical cards at a cost of €1,650 each', *Irish Medical Times*, 25 November 2009.

Comment

The link between poverty and poor health is striking.²¹⁸ Those living in poverty experience worse health than the rest of the population and die younger.²¹⁹ In 2007, UNICEF placed Ireland in the bottom third of countries in relation to child health, along with the United States and Greece.²²⁰ This year's 'E' grade – a drop from last year's 'D' – reflects the complete failure by Government to take any positive action in this area in 2009.

In September 2009, there were over 1.4 million full medical card holders and 94,381 GP Visit Card holders in Ireland, compared with 1.2 million and 5,000 respectively in 2005.²²¹ That month alone an additional 10,632 full medical cards were granted.²²² This increase reflects the changed economy, as more families become wholly dependent on the State for their healthcare needs. Medical cards – though certainly the most immediate and effective measure to reduce health inequalities and improve access to healthcare²²³ – are not always well targeted. An analysis of EU Survey on Income and Living Conditions (SILC) data, to be published in 2010, found that, in 2005, 47,000 people (16%) living in consistent poverty did not have a medical card; that figure rose to 229,000 people (30%) among those at risk of poverty.²²⁴ There are a variety of reasons for this, ranging from limited eligibility criteria, to language and literacy difficulties and the nature of the application process.²²⁵

Early Intervention: For children, medical cards can be the difference between a child receiving timely medical support, or a family – concerned about money – waiting until a health problem reaches crisis point. Research by the Adelaide Hospital Society in 2008 found that extending full medical cards to all children under 19 years would cost €160 million per annum – an increase of just 2% in real terms on healthcare funding.²²⁶

The extension of medical cards to under-fives, which would provide free GP services to an additional 225,000 children, would cost €57 million per annum.²²⁷ Money spent on health at the primary care level is money well spent, as it reduces the demand for acute services. For families on low incomes, a medical card means more than access to health services; it is a 'passport' to social inclusion. In addition to health benefits, the medical card deems families eligible for exemption from fees for school transport and for Junior and Leaving Certificate examinations.

Discretionary Medical Cards: Discretionary medical cards are granted to those who are not eligible for a medical card on income grounds, but who suffer hardship due to the high cost of coping with a particular illness – numbered 79,871 in September 2009, an increase of more than 6,000, or 8%, from a year earlier.²²⁸ But this overall increase masks a deep regional variation, with those living in North Dublin least likely to be approved for a discretionary medical card.²²⁹ In fact, twice as many discretionary medical cards are held by people in the HSE South region than those in Dublin/North East.²³⁰ These figures suggest deep flaws in a system that is intended to increase access to healthcare for those in need.



218 F. Farrell, H. McAvoy, and J. Wilde (2008) *Tackling Health Inequalities: An all-Ireland Approach to Social Determinants*, Dublin: Combat Poverty Agency and Institute of Public Health.

219 *Ibid.*, p. 24.

220 UNICEF (2007) *Child Poverty in Perspective: an overview of child wellbeing in rich countries*, Pisa: Innocenti Research Centre, p. 13.

221 Written answer to Parliamentary Question [41220/09], 12 November 2009, James Reilly, T.D. to Minister for Health, Mary Harney T.D.

222 *Ibid.*

223 Irish Medical Organisation (2005) *IMO Position Paper on Medical Card Eligibility*, Dublin: IMO.

224 Combat Poverty Agency (forthcoming) *Consultation with the Building Healthy Communities Programme on Medical Card Eligibility Issues for the Department of Health and Children*.

225 *Ibid.*, p.5-7.

226 S. Thomas, C. Normand and S. Smith. S. (2008) *Social Health Insurance: Further options for Ireland*, Dublin: Adelaide Hospital Society p. 2.

227 *Ibid.*, p. 9.

228 Eithne Donnellan, 'Medical card 'bias' emerges in new figures', *The Irish Times*, 17 November 2009. There are significantly more card holders in the West and in Dublin/Mid Leinster, than by people in Dublin/North East.

229 *Ibid.*

230 Population differences do not explain this discrepancy. Number of discretionary medical cards by HSE region/population, September 2009: HSE South: 24,796 (1.08 million); Dublin North-East: 11,797 (927,410); HSE West: 21,000 (1.01 million).

3.4. ACCESS TO HOUSING

“Every child should have access to (...) suitable accommodation.” (*Towards 2016*, p. 41).

COMMITMENT	PROGRESS
In <i>Towards 2016</i> , the Government and the Social Partners acknowledge the view taken in the NESC report on housing in Ireland ²³¹ that an additional 73,000 new social housing units should be provided between 2004 and 2012. ²³²	Discouraging. Little improvement since <i>Report Card 2009</i> .

week;²³⁶ payments made to tenants were reduced by 8%; entitlement to the payment was restricted; and maximum rent limits were reduced. For families dependent on Rent Supplement, these changes have increased economic hardship, stress and anxiety.²³⁷

In the *Renewed Programme for Government*, October 2009, the Government reiterated its commitment to eliminate long-term homelessness by the end of 2010.²³⁸

What's happening?

New houses are not being provided at a sufficient pace to deliver on this commitment. Little creativity has been demonstrated in the current recession.

Meeting the National Economic and Social Council (NESC) target of providing an additional 73,000 new social housing units by 2012 involves delivering 9,100 net social housing units per year.²³³ By the end of 2008 the Government was 7,431 units behind; a year later, at the end of 2009, it is estimated to be 15,000 units short of its social housing target, as outlined in *Towards 2016*.²³⁴

In the absence of sufficient social housing units, many families on the housing waiting list are forced to rent in the private market, and rely on the Rent Supplement payment to help cover the cost.²³⁵

For many households, Rent Supplement is the safety net that keeps them from becoming, or returning to, homelessness. A series of changes were made to this payment in 2009: tenants' contributions were increased by 85%, from a minimum of €13 to €24 per

IMMEDIATE ACTION

- > **Provide a national framework for financing the housing output committed to in *Towards 2016*.**
The Department of the Environment, Heritage and Local Government must provide the level of capital investment required to maintain delivery of the NESC target. It should also consider new, flexible and creative approaches to work with the current housing sector to deliver for those in housing need.²³⁹ For example, the estimated 40,000 unsold housing units on the private market – 10,000 in the greater Dublin alone²⁴⁰ – could be made available to those on the social housing waiting list, starting with families with children.

231 National Economic and Social Council (2005) *Housing in Ireland: Performance and Policy*, Dublin: NESC.

232 Government of Ireland (2006) *Towards 2016: Ten-Year Framework Social Partnership Agreement 2006-2015*, Dublin: Stationery Office, p. 27.

233 The United Nations Committee on the Rights of the Child, in its *Concluding Observations* to the Irish Government, September 2006, recommended increased investments in social and affordable housing for low income families, see (CRC/C/IRL/CO/2, p. 12, paragraph 57.d).

234 Focus Ireland (2009) *Building Homes, Creating Jobs, Stimulating the Economy: Focus Ireland pre-budget submission 2010*. See www.focusireland.ie

235 There are currently 90,000 households claiming the Rent Supplement payment.

236 Budget 2009 (announced in October 2008) increased the minimum contribution from €13 to €18 per week. The Supplementary Budget (announced in April 2009) increased it further, to €24 per week.

237 For further information in relation to changes to the Rent Supplement payment and its impact on recipients of the payment see www.makeroom.ie

238 *Renewed Programme for Government* (October 2009) p. 29.

239 See Focus Ireland (2009) *Building Homes, Creating Jobs, Stimulating the Economy: Focus Ireland Pre-Budget Submission 2010*, section on Financing Homes for a variety of policy solutions to housing finance in the present climate.

240 *Ibid.*

COMMITMENT	PROGRESS
<i>Towards 2016</i> commits to implementing the <i>Youth Homelessness Strategy</i> with the objective of reducing and, if possible, eliminating youth homelessness through preventive strategies.	Stalled. No evidence of action since <i>Report Card 2009</i> .

IMMEDIATE ACTION

- > **Produce a new Youth Homelessness Strategy and put in place a new programme of work to seriously address youth homelessness.**
The new Strategy and programme of action should have a clear strategic focus to take into account significant changing factors, such as the current economic crisis, as well as to re-inject energy into ending youth homelessness.
- > **Ensure adherence to the commitments on aftercare contained in the Ryan Report Implementation Plan.**
This should be supplemented by providing a statutory footing for the provision of aftercare services and supports in the Child Care (Amendment) Bill 2009.

What's happening?

Very little. The Strategy needs to be updated and given fresh momentum. The new commitment on aftercare is welcome.²⁴¹

The *Youth Homelessness Strategy* was published in 2001; it does not include an end date.²⁴² The Strategy did initially spur some action,²⁴³ however these initiatives have since lost momentum. The Strategy was reviewed in 2008 by the HSE National Child and Family Services Working Group on Youth Homelessness, but their report was not made public. The Alliance believes that a new Youth Homelessness Strategy should be developed to reflect learning from research and practice over the past nine years. It should also reflect the new strategic focus on homelessness, as set out in *The Way Home 2008-2013*, from 'managing' homelessness to 'ending' it.²⁴⁴

The link between youth homelessness and children leaving state care (either HSE care or youth detention facilities) has been clearly established.²⁴⁵ The latest housing-need statistics, gathered in 2008, show that the largest increase in demand for social housing was from young people leaving institutional care, an increase of 179% since 2005.²⁴⁶ The Ryan Report *Implementation Plan* makes six commitments relating to aftercare support,²⁴⁷ including the provision of aftercare services for children leaving care where the allocated social worker deems it to be necessary.²⁴⁸ These commitments are welcomed.

The link between youth homelessness and children leaving state care (either HSE care or youth detention facilities) has been clearly established.



²⁴¹ The issue of aftercare was raised by the United Nations Committee on the Rights of the Child in its *Concluding Observations* to the Irish Government, September 2006, see (CRC/C/IRL/CO/2, p. 7 paragraph 33).

²⁴² Department for Health and Children (2001) *Youth Homelessness Strategy*, Dublin: Department of Health and Children.

²⁴³ This included the development of national guidelines on leaving care and aftercare – *Developing a Leaving and Aftercare Policy: Guidelines for Health Boards* (2004) Drafted and approved by the Youth Homelessness Strategy Monitoring Committee – and related HSE implementation plans.

²⁴⁴ Department of the Environment, Heritage and Local Government (2008) *The Way Home: A Strategy to Address Adult Homelessness in Ireland 2008-2013*, Dublin: Department of the Environment, Heritage and Local Government.

²⁴⁵ P. Mayock and E. O'Sullivan (2007) *Lives in Crisis: Homeless Young People in Dublin*, Dublin: The Liffey Press, and P. Kelleher, C. Kelleher and M. Corbett (2000) *Left Out on their Own: young people leaving care in Ireland*, Dublin: Oak Tress Press.

²⁴⁶ Department of the Environment, Heritage and Local Government (2008) *Annual Housing Statistics Bulletin 2008*, see <http://www.environ.ie/en/Publications/StatisticsandRegularPublications/HousingStatistics/FileDownload,20957,en.pdf> [accessed 2 December 2009].

²⁴⁷ Children who leave the care of the State may have no links with their birth family or former carers, and hence a weak personal support network. They often require support to access housing, education and training, as well as social support needs such as mentoring or counselling.

²⁴⁸ Recommendations 64-69, *Report of the Commission to Inquire into Child Abuse, 2009: Implementation Plan*, p. 49.

Comment

The 'E' grade – a drop from last year's 'D' – demonstrates Government's failure to take opportunities presented in 2009 to improve the housing situation for those families most in need. This is unacceptable. Having a place to call home – somewhere warm, safe, and private – is central to a child's wellbeing and to family life. In its *Concluding Observations*, the UN Committee on the Rights of the Child recommended that the Irish Government "fully implement existing policies and strategies and increase budgetary allocations for and subsidisation of services, including ... housing for families with children who are particularly vulnerable."²⁴⁹

Social Housing: In 2008 there were 56,249 households in need of social housing nationally, an increase of 31% from 2005.²⁵⁰ Of these households, 27,704 are families with children.²⁵¹ Almost half of all households have been waiting for longer than two years.²⁵² The collapse of the property market in 2008, and the resulting abundance of vacant and unsold homes, creates an opportunity in social housing. The estimated 40,000 unsold housing units on the private market – 10,000 in the greater Dublin area alone²⁵³ – should be made available to those on the social housing waiting list, starting with families with children.

When housing families with children it is important to ensure that the housing is of a high quality, and is integrated – not segregated – communities. Living in poor quality accommodation can have a negative impact on the child's wellbeing, exposing them to dampness, overcrowding, unsafe infrastructure or poor neighbourhoods.²⁵⁴

Children Living in Homeless Families: Homeless families are among the most needy and vulnerable groups on the housing waiting list.²⁵⁵ A 2008 survey, undertaken by the Dublin Homelessness Agency, found that, in Dublin alone, 249 families with dependent children were living in homeless accommodation. Of the 576 children, the majority were living in temporary accommodation with their families.²⁵⁶ Homeless families are usually provided with private emergency accommodation, often in Bed and Breakfasts, which may involve whole families living in one small room with all of their belongings, leaving children with no space to play or do homework. This choice of accommodation is neither suitable for families with children, nor cost effective for the State. For the children, the frequent accommodation moves, and subsequent difficulty in inviting friends over to their home, means they often find it difficult to develop and maintain friendships.²⁵⁷

Homeless Children: Child homelessness in Ireland is not limited to the family context. HSE figures, from August 2006, found 492 homeless children²⁵⁸ – the majority in their mid-to-late teens – were not being cared for by any family member.²⁵⁹ These children are among the most vulnerable in the country; their homeless status is often exacerbated by conflict with family members, a history of state care and mental health or substance misuse difficulties.

Aftercare for Children Leaving Care: Under the Child Care Act, 1991, the provision of aftercare is discretionary; and thus the provision of services differs greatly across the country. An amendment to the Child Care (Amendment) Bill 2009 should be made to provide a statutory obligation on the State to provide any child leaving care, who is deemed to be in need, with tailored aftercare support.

249 UN Committee on the Rights of the Child (CRC/C/IRL/CO/2), p. 12, paragraph 56 (29 September 2006).

250 Department of the Environment, Heritage and Local Government (2008) *Annual Housing Statistics Bulletin*.

Local focus: *The Westmeath Independent*, 'Housing waiting list reaches over 500 in Athlone town', 19 August 2009.

251 Department of the Environment, Heritage and Local Government (2008) *Annual Housing Statistics Bulletin*, p.100.

252 *Ibid.*

253 See Focus Ireland (2009) *Building Homes, Creating Jobs, Stimulating the Economy: Focus Ireland pre-budget submission 2009*.

254 S. Brook (2004) *Housing Problems and Irish Children: The Impact of Housing on Children's Well-Being*, Dublin: Children's Research Centre, Trinity College.

Local focus: *Wicklow People*, 'Mum on housing list 'up in arms over accommodation: not fit for dogs', 27 May 2009; *The Clare Champion*, 'Kilrush house of despair', 6 January 2009.

255 Local focus: Limerick Post, 'Growth in number of homeless families concerns Suaimhness', 10 August 2009.

256 Homeless Agency (2008) *Counted In, 2008: A Report on the Extent of Homelessness in Dublin*, Dublin: Homeless Agency.

257 A.M. Halpenny, A.F.Keogh and R. Gilligan (2002) *A Place for Children? Children in Families Living in Emergency Accommodation: The Perspectives of Children, Parents and Professionals*, Dublin: Children's Research Centre, Trinity College p. 39.

258 A figure exists for 2008 of 391 children who are homeless, however this figure is only for Dublin, Kildare and Wicklow. David Gaskin, PCCC Parliamentary Affairs Division, HSE, Response to Deputy Aengus O'Snodaigh, TD, Re. Parliamentary Question 14495/08, 09 June 2008.

259 Senator Maurice Cummins, Seanad Debates, vol. 184, 12 October 2006, <http://historical-debates.oireachtas.ie/S/0184/S.0184.200610120004.html> [accessed 21 November 2008]. This number does not include the number of children that are homeless with their families.



Safeguarding Childhood

LOCAL EYE



HEAVY CASE LOADS FOR WEXFORD SOCIAL WORKERS: *THE IRISH TIMES*

According to an *Irish Times* article, published in May 2009, County Wexford had one of the highest rates of unallocated cases of suspected child neglect or abuse in the whole State, while its social workers that work with children and families at risk have some of the heaviest case loads.

The figures are contained in a social work and family support survey, conducted by the HSE and commissioned by the Minister for Children and Youth Affairs, Barry Andrews TD, that became available just days after the Monageer report into the deaths of the Dunne family, which highlighted serious flaws in the handling of that case.

The unpublished report showed that, in December of 2008, the average social worker had a total of 31 cases at any one time: the fourth highest figure out of a total of 32 local health offices across the State. In addition, some 43% of all cases of suspected abuse or neglect had not been allocated a social worker: the third highest across the State.

Carl O'Brien, 'Report identifies heavy case loads of Wexford social workers', *The Irish Times*, 14 May 2009.

Overview

Report Card 2009 gave the Government a 'C' in 'safeguarding childhood', its highest grade overall. This year it drops to a 'D', reflecting in particular its failure to take the necessary steps to address alcohol related harm, and to make any progress in play and recreation.

The *Growing Up in Ireland* survey produced its first major research report in July 2009, looking at the lives of nine-year-olds.²⁶⁰ The survey, the first of its kind in Ireland, paints a picture of what childhood is like in Ireland now. It shows that over three quarters of nine-year-old children: live with both parents (82%); are made happy by spending time with family, friends and playing sport; like school (93%); and own a mobile phone (45%). The longitudinal survey is a valuable data source, which, as the findings are published, will build understanding about children's lives in Ireland and inform policy development and service delivery in the future.

But 2009 will unfortunately be remembered for the stories that were told about childhoods from Ireland's past. The publication of the *Report of the Commission to Inquire into Child Abuse* (the 'Ryan Report') – the most comprehensive investigation ever conducted into child abuse in Ireland – examined the horrific legacy of physical, emotional and sexual abuse suffered by over 30,000 children living in institutions throughout Ireland, during the period 1936-2000.²⁶¹

The Ryan Report demonstrates just how urgently we need to change our attitudes, practices and laws to strengthen children's rights and reform our child protection and care systems. The Government's Ryan Report *Implementation Plan*, outlining the actions planned in response to the Ryan Report recommendations, is critical in making sure that the abuse suffered by children at the hands of those tasked with caring for them can never, ever, happen again.²⁶² The Ryan Report *Implementation Plan* maps out actions to reach an achievable vision for a system that would genuinely protect and care for Ireland's most vulnerable children. However, commitments alone do not equal action: recommendations and plans are

meaningless without the political will and resources to make them real. For that reason, we have added the Ryan Report to Report Card 2010 to monitor progress on the implementation of these vital commitments to children this year, and for each year to come.

But 2009 will unfortunately be remembered for the stories that were told about childhoods from Ireland's past.

The UN Committee on the Rights of the Child, in its *Concluding Observations* to the Irish Government in 2006, made specific reference to three areas which were subsequently covered in the Ryan Report *Implementation Plan*. The Committee recommended that social work services operate on a 24-hour, seven-day-a-week basis in order to help support children and families at risk, and that the Government considers placing the *Children First* guidelines on a statutory footing.²⁶³ The Committee also outlined its concern that separated children were not receiving adequate guidance, support and protection, and pushed the Irish Government to ensure that the "same standards of, and access to, support services applies whether the child is in the care of the authorities or their parents."²⁶⁴

November 2009 saw the publication of the Dublin Archdiocese Commission of Investigation Report (the 'Murphy Report'), which once again highlighted major inadequacies in response to allegations of child abuse.²⁶⁵ The Commission reported on the handling by Church and State authorities of a sample of allegations and suspicions of child sexual abuse against clerics in the Dublin Archdiocese between 1975 and 2004. The Report reiterated that the primary responsibility for child protection must rest with the State and that all institutions be open to scrutiny.

260 *Growing Up in Ireland: National Longitudinal Study on Children* (December 2009) *The Lives of Nine-Year Olds: Child Cohort, Report One*, Dublin: Office of the Minister for Children and Youth Affairs.

261 Commission to Inquire into Child Abuse (20 May 2009) *Commission Report*. See <http://www.childabusecommission.com/rpt/pdfs/>

262 Office of the Minister for Children and Youth Affairs, Department of Health and Children (July 2009) *Report of the Commission to Inquire into Child Abuse, 2009: Implementation Plan*

263 This issue was raised by the United Nations Committee on the Rights of the Child in its *Concluding Observations* to the Irish Government, September 2006, see (CRC/C/IRL/CO/2, p. 8 paragraph 37).

264 United Nations Committee on the Rights of the Child (CRC/C/IRL/CO/2, p. 14 paragraph 66) September 2006.

265 Commission of Investigation (July 2009) *Report into the Catholic Archdiocese of Dublin*. See <http://www.dacoi.ie/>

4.1. PROTECTING CHILDREN

“The damage caused by a culture that tolerated and even encouraged physical, sexual and emotional abuse for decades will not be undone by words alone. It is by implementing this Action Plan that we will win back the trust of those whom we abandoned.”²⁶⁶

(Minister for Children and Youth Affairs, Barry Andrews TD, Launch of the *Report of the Commission to Inquire into Child Abuse, 2009: Implementation Plan*).

RYAN REPORT IMPLEMENTATION PLAN

Grade: B

COMMITMENT	PROGRESS
The <i>Renewed Programme for Government</i> commits to deliver on the <i>Government Implementation Plan</i> in response to the <i>Report of the Commission to Inquire into Child Abuse</i> .	Encouraging. New commitment since <i>Report Card 2009</i>

What's happening?

€25 million was pledged in July to deliver the *Government Implementation Plan*. We believe the plan to be excellent and can, if implemented, make a real difference to children's lives.

In May 2009, the Commission to Inquire into Child Abuse published its findings, now commonly known as the 'Ryan Report'.²⁶⁷ In response to this report the Minister for Children and Youth Affairs, Barry Andrews TD, was tasked, by Government, with developing an action plan to deliver on its recommendations. The *Report of the Commission to Inquire into Child Abuse, 2009: Implementation Plan* was published in July 2009.²⁶⁸ The Plan has a pledged budget of €25 million and contains 99 actions to be completed within a timeframe extending to December 2011. Overall responsibility for the Plan's delivery rests with the Minister for Children and Youth Affairs. Most

of the Plan's actions will, however, be undertaken by the HSE, which does not report directly to the Office of the Minister for Children and Youth Affairs (OMCYA). Therefore, the Plan's full implementation will require new and significant collaboration between the HSE and the OMCYA. The appointment of an Assistant National Director for Children and Families Social Services in November 2009 is welcome.

Budget 2010 announced a €15 million funding allocation for the *Implementation Plan* in 2010. This is intended to fund counselling services for survivors of abuse; the recruitment of at least 200 social workers by the end of 2010; preparations in relation to independent inspections of foster care services, detention schools and all children's residential centres (including those for children with a disability); development of multi-disciplinary assessment services for children at risk; a multi-disciplinary team for children in special care and detention; aftercare services; and advocacy services for children in care.²⁶⁹

In May 2009, the Commission to Inquire into Child Abuse published its findings, now commonly known as the 'Ryan Report'.

²⁶⁶ Office of the Minister for Children and Youth Affairs, 'Minister Andrews launches Government's Implementation Plan in response to the Report of the Commission to Inquire into Child Abuse, 2009', [Press Release] 28 July 2009.

²⁶⁷ Office of the Minister for Children and Youth Affairs, Department of Health and Children (July 2009), *Report of the Commission to Inquire into Child Abuse, 2009: Implementation Plan*

²⁶⁸ *Renewed Programme for Government* (October 2009)

http://www.taoiseach.ie/eng/Publications/Publications_2009/Renewed_Programme_for_Government_October_2009.pdf, p.19

²⁶⁹ Office of Minister for Children and Youth Affairs, '€15 million for Ryan Report Implementation Plan' [Press Release] 9 December 2009.

IMMEDIATE ACTION

> **Urgently commence actions leading to the full and timely implementation of the 99 recommendations of the Ryan Report *Implementation Plan*.**

There is no time to waste in implementing the 99 actions; all must be completed by 2011, and some before. A group has been established to oversee implementation of the 99 actions. However, it comprises solely of statutory officials. Given the short timeframe of the *Implementation Plan*, the group should report twice yearly on progress, including its budget allocation and spend.

Transparency is required in how money for the *Implementation Plan* is allocated and spent.

Furthermore, the monitoring of the *Implementation Plan*, given its importance, needs to be augmented with independent non-governmental or high level international experts.

Providing social workers to children in care is a statutory requirement, which means social workers can support and enable children in care to access the services they need and to which they are entitled. The care and protection of separated children is an issue of deep and ongoing concern to the Alliance, particularly given the alarming instances of children going missing from care and evidence of trafficking.²⁷⁰ The failure to place the *Children First* guidelines on a statutory footing is a flaw in our system, highlighted by numerous experts and reports. Now we have an opportunity to fix it.

The care and protection of separated children is an issue of deep and ongoing concern to the Alliance, particularly given the alarming instances of children going missing from care and evidence of trafficking.

Comment

The commitments contained in the *Implementation Plan* are warmly welcomed; if implemented they have the potential to change childhoods. For that reason we award it a 'B': a positive result for children. Now, the focus is on overcoming challenges to the realisation of the Plan; the Government must maintain its commitment to act with urgency on the promises made. The Ryan Report *Implementation Plan* includes 99 actions, each as important as the next. *Report Card 2010* focuses on three aspects of the *Implementation Plan*:

- > Social work provision
- > Separated children
- > *Children First* guidelines

²⁷⁰ Children's Rights Alliance (2009) *Briefing Note on Separated Children*, see www.childrensrights.ie. This issue was raised by the United Nations Committee on the Rights of the Child in its Concluding Observations to the Irish Government, September 2006. The Committee requested that the Government provide more information and data on trafficking in its next report to the UN, due in 2009, see (CRC/C/IRL/CO/2, p. 15 paragraph 77).

SOCIAL WORK PROVISION

Grade: B

COMMITMENT	PROGRESS
The Ryan Report <i>Implementation Plan</i> commits to: Increase the capacity within the social work service, including the recruitment of 270 social workers, with the objective of ensuring every child in care has an allocated social worker by December 2010. ²⁷¹	Encouraging. New commitment since <i>Report Card 2009</i> .

IMMEDIATE ACTION

- > **Commence without delay the filling of 270 promised social worker places.**

This will enable the HSE to fulfil its statutory duty to children. It will make a real difference to the lives of children. Bureaucratic delays cannot be excused while children are left at risk or in need of support.

What's happening?

Important commitments have been made and money allocated. Some progress is already evident and a target was set in Budget 2010.

The *Implementation Plan* commits that by 2011, the 270 currently vacant social work posts will be filled by the HSE, and that, if necessary, recruitment of additional social workers will be considered.²⁷² To achieve this target, a welcome exemption was made to the moratorium on public service recruitment.²⁷³

This initiative will assist the HSE to fulfil its statutory obligations in the areas of child protection and children in care. Progress in relation to this commitment must be made public. Data should be published to show where new capacity has been added, and how this is impacting on the social work service through the reduction in social work caseloads and waiting times.²⁷⁴



²⁷¹ *Report of the Commission to Inquire into Child Abuse, 2009: Implementation Plan*, p. 68.

²⁷² *Ibid.*, p. 46. "The need to recruit further additional social workers will be considered in the light of progress made in delivering necessary reforms in the area of child welfare and protection".

²⁷³ *Ibid.*, p. 63.

²⁷⁴ While the moving of posts filled by staff on temporary contracts to a permanent status is a positive step, it does not constitute new capacity in the social work service.

Comment

Children in Care: In April 2009 there were 5,589 children in care in Ireland, the majority of whom, 89.8% (5,018 children), were in foster care.²⁷⁵ Children are admitted to care for a variety of reasons, predominantly parents' inability to cope, family difficulties with housing or finance, neglect or abuse, drug or alcohol abuse within the family, or the child's emotional or behavioural problems.²⁷⁶

National regulations and standards require each child in care to have a social worker and a detailed care plan.²⁷⁷ However, this is a legal entitlement that is not being upheld. Increasing capacity within the social work service to ensure that every child in care has an allocated social worker and a care plan is critical. But the scale of the challenge poses a barrier to the implementation of this recommendation: still, one in six children in foster care does not have an assigned social worker and this figure rises to one in three children in some areas.²⁷⁸ Figures for March 2009 note that 9.3% children in residential care and 19.7% in foster care do not have a care plan.²⁷⁹

Responsibility for protecting and safeguarding the child rests with the social worker, particularly in developing and implementing a child's care plan. Under law, the care plan should be reviewed periodically by the social worker to examine, among other things, whether the child's needs are being met and if the child should continue to remain in care. The social worker should build up a trusting relationship with the child to form a picture of what is happening in his or her life. This knowledge may prove invaluable in informing opinions and responding in the event of the placement breaking down or complaints or problems arising. The social worker's role also includes facilitating and supporting contact and access visits between the child and his or her birth family (if in the child's best interest).

Child Protection: The lack of capacity within the HSE social work service has led to waiting lists for the assessment of children following a report of suspected abuse or neglect. During 2008, the HSE received more than 21,000 reports in relation to alleged child abuse and welfare concerns. However, only one third of these cases were allocated a social worker. Weaknesses in the system also manifested in difficulties experienced in making first contact with HSE social work staff to report child abuse. A delay in allocating a social worker to investigate suspected abuse or neglect leaves children at risk. It also means there is no one to work with the child and their families to provide supportive interventions that can prevent further abuse or neglect, or an admission into care. This contravenes Article 19 of the Convention on the Rights of the Child which states that States Parties shall take all appropriate measures to protect the child from abuse and neglect.

An assigned social worker is the child's essential 'gateway' to ensuring that his/her rights and welfare are upheld. The grade 'B' here - a good effort, with positive results for children - reflects the importance of this commitment, and the positive steps taken so far towards achieving it.

National regulations and standards require each child in care to have a social worker and a detailed care plan. However, this is a legal entitlement that is not being upheld.

275 Health Service Executive (2009) *Supplementary PR Data April 2009*. Published 11 June 2009. Data relates to year to date. Two groups of vulnerable children are not included in official statistics relating to children in care and are not covered by the national standards – homeless children and children detention schools or adult prisons.

276 Health Service Executive (2009) *Review of Adequacy of Services for Children and Families, 2008*, p. 44. The most predominant reasons children were admitted to care in 2008 were the categories of child centred problems (7%); abuse, including physical, sexual, emotional abuse and neglect (39%); and family centred problems, including parents unable to cope/family difficulty re: housing/finance, family member abusing drugs/alcohol (54%).

277 See *National Standards for Children's Residential Centres*, Department of Health and Children (2001) *National Standards for Special Care Units*, Department of Health and Children, *National Standards for Foster Care*, Department of Health and Children (2003) located at http://www.hiqa.ie/functions_ssi_child_standards.asp

278 Children's Rights Alliance (2009) *Learning from the Past: Responding to the Recommendations of the Commission to Inquire into Child Abuse Report*, p. 8.

Local focus: *Offaly Express*, 'HSE social services struggling', 4 February 2009; Carl O'Brien, 'Report identifies heaviest case loads of Wexford social workers', *The Irish Times*, 14 May 2009.

279 Health Service Executive (2009) *Supplementary PR Data March 2009*. Published 14 May 2009

SEPARATED CHILDREN

Grade: E

COMMITMENTS	PROGRESS
The Ryan Report <i>Implementation Plan</i> commits to end the use of separately run hostels for separated children and accommodate these children in mainstream care, on a par with other children in the care system by December 2010. It also commits, that in the interim, the HSE will inspect and register residential centres and hostels where separated children in the care of the HSE are placed. ²⁸⁰	Awaiting change on the ground. New commitment since Report Card 2009.

IMMEDIATE ACTION

- > **Put in place a plan to enable the immediate roll-out of equity of care for separated children.**
The plan for the roll-out of equity of care involves dispersing separated children throughout the country. Therefore, increased capacity and up-skilling at local level is urgently required to support separated children at a community level. No action should be taken that will further place a child at risk. An independent monitoring system must be instigated to ensure that the plan is delivered in a manner that is truly equitable.

Comment

In April 2009, there were approximately 180 separated children in the care of the State.²⁸¹ Separated children are defined as children under 18 years of age who are outside their country of origin and separated from both parents, or their previous legal/customary primary caregiver.²⁸²

Over the past number of years, the Alliance has consistently raised at ministerial level our serious concerns about the level of care and accommodation being provided to separated children and the alarmingly high number of children going missing.²⁸³ It has also campaigned for reform in coalition with other NGOs through Action for Separated Children in Ireland.²⁸⁴ The Ombudsman for Children, the Special Rapporteur for Child Protection and opposition TDs have also voiced their concerns.²⁸⁵

What's happening?

Separated children are currently treated differently to other children in the Irish care system.

The *Implementation Plan* commits to ensuring that, by December 2010, there will be equity of care for all separated children in the Irish care system. This will be achieved by ending the use of hostels for separated children and accommodating them in mainstream care, on a par with other children in the care system. As an interim measure, the *Implementation Plan* commits to inspect and register separated children's hostels that are at present excluded from the HSE registration and inspection process.

²⁸⁰ Report of the Commission to Inquire into Child Abuse, 2009: Implementation Plan, p. 37.

²⁸¹ Ibid., p.10.

²⁸² Separated Children in Europe's Programme (2004) Statement of Good Practice, p. 2.

²⁸³ See for example, *From Rhetoric to Rights, Second Shadow Report to the United Nations Committee on the Rights of the Child*, 2006; and *Briefing Note on Separated Children* (2009) and *Learning from the Past: Responding to the Recommendations of the Commission to Inquire into Child Abuse Report* (2009) all available at www.childrensrights.ie. The Alliance has also engaged with the Irish Refugee Council in the Body Shop/ECPAT in a campaign to end child trafficking, see http://www.thebodyshop.com/_en/_ww/values-campaigns/trafficking.aspx

²⁸⁴ Action for Separated Children in Ireland (ACSI) comprised of Barnardos, Children's Rights Alliance, Irish Association for Youth People in Care (IAYPIC), Irish Refugee Council and Irish Society for the Prevention of Cruelty to Children (ISPCC).

²⁸⁵ See Ombudsman for Children (2009) *Separated children living in Ireland: A report by the Ombudsman for Children's Office*; Geoffrey Shannon (2007) *Report of the Special Rapporteur on Child Protection: A Report Submitted to the Oireachtas*. Speech by Denis Naughten TD, Fine Gael Spokesperson on Immigration & Integration at the Dignity & Demand Conference Royal College of Physicians, 5 November 2009, <http://www.denisnaughten.fine Gael.org/speeches/> [accessed 14 January 2010].

Substandard Care: Hostels for separated children are poor quality, privately run and lack adequate adult supervision and trained staff. They are not governed by national standards or subject to independent inspection.²⁸⁶ Some progress was made in 2008 and 2009 with the opening of four new residential centres for separated children, which are covered by national standards. However, approximately 80 separated children continue to be provided with substandard care in hostels.

Missing Children: Since 2000, 503 separated children went missing²⁸⁷ from State care; 441 of whom remain missing. These children are hugely exposed to risks, including traffickers who may lure them into prostitution and illegal exploitative work. The inadequate quality of hostel care and accommodation has been directly linked to instances of vulnerable children going missing and being trafficked for exploitation. Additional assistance and protection is required for separated children due to their increased vulnerability. These children lack parental support and may be adjusting to a new language and culture.

Dispersal Policy: The majority of separated children have historically been accommodated in the Dublin area. To achieve equity of care, following an initial assessment in Dublin, responsibility for separated children will now be dispersed throughout the HSE. However, anecdotal evidence indicates that the recent dispersal of aged-out minors²⁸⁸ has been disastrous and traumatic for the young people affected.²⁸⁹ Unless it is managed correctly, this dispersal policy may inadvertently disadvantage certain children and place them at further risk of exploitation and trafficking.

The success of the dispersal plan will depend on the appropriate groundwork being laid before dispersal takes place. Specific training and support should be provided to relevant local social workers, foster families, care staff, NGOs and schools on issues such as trafficking, the asylum/protection system, recognising trauma and the signs of grooming for exploitation. Specialist services will also need to be put in place to

support the psychological and mental health needs of this vulnerable group, many of whom have experience significant trauma.

It may also be appropriate for some children to remain in Dublin so that they can continue established relationships with friends, schools, supportive adults and organisations and access specialised services, such as counselling for victims of torture.

The Government's performance on this issue to date is utterly unacceptable – for that reason it gets an 'E'. These children are at serious risk; progress must be rapid and reflect the urgency of this issue. The Alliance warmly welcomes the commitment to close the hostels and to provide equity of care for separated children, but Government will be judged by its actions. And these actions must happen as a matter of priority and within the agreed timeframe, which is at the end of 2010.²⁹⁰ The Government must finally grasp this issue; it is solvable.

Since 2000, 503 separated children went missing from State care; 441 of whom remain missing. These children are hugely exposed to risks, including traffickers who may lure them into prostitution and illegal exploitative work.

286 See *Report of the Commission to Inquire into Child Abuse, 2009: Implementation Plan*, p.10; Children's Rights Alliance (2009) *Briefing Note on Separated Children*; Michael O'Regan, 'HSE failing in caring for Asylum seeking children', *The Irish Times*, 6 April 2009; and Jennifer Bray, 'Migrant hostels for children have no care staff', *The Sunday Tribune*, 27 September 2009.

287 Speech by Denis Naughten TD, Fine Gael Spokesperson on Immigration & Integration at the Dignity & Demand Conference Royal College of Physicians, 5 November 2009, <http://www.denisnaughten.finegael.org/speeches/> [accessed 14 January 2010].

288 'Aged Out' Minors are separated children who have turned eighteen and whose residency status has not been determined.

289 Information received by the Children's Rights Alliance from non-governmental organisations, October 2009.

290 *Report of the Commission to Inquire into Child Abuse, 2009: Implementation Plan*, p. 10.

CHILDREN FIRST GUIDELINES

Grade: D

COMMITMENT	PROGRESS
The Ryan Report <i>Implementation Plan</i> commits to place a legal duty to comply with the <i>Children First: The National Guidelines for the Protection and Welfare of Children</i> (1999) on staff employed by the State and agencies in receipt of Exchequer funding by December 2010.	No sign of action. New commitment since <i>Report Card 2009</i> .

What's happening?

Nothing. No document has yet been published for consultation.

Children First: National Guidelines for the Protection and Welfare of Children is a voluntary set of guidelines on procedures for preventing child abuse and for responding to allegations and suspicions of abuse.²⁹¹

The Ryan Report *Implementation Plan* recommended that the *Children First* guidelines should be uniformly and consistently implemented throughout the State in dealing with allegations of abuse.²⁹² To achieve this, the *Implementation Plan* states that Government will produce draft legislation by December 2010, to provide that all staff employed by the State and those employed in agencies in receipt of funding from the Exchequer will have a duty to:

- > Comply with the *Children First* national guidelines
- > Share relevant information in the best interests of the child
- > Co-operate with other relevant services in the best interests of the child.

This will require legislative reform. A consultation document or Heads of a Bill has yet to be published.

IMMEDIATE ACTION

- > **Commence the drafting of legislation to place *Children First* on a statutory footing.**
Placing a legal duty on staff to comply with *Children First* requires legislative reform. The deadline for delivery of this commitment is end 2010, and so a Bill should be drafted without delay. It should be published in a timely manner to allow for consultation with professionals working with children, non-governmental organisations (NGOs), relevant state agencies and other stakeholders.
- > **Establish an independent national authority to monitor compliance with *Children First*.**
This body should publish regular progress reports on compliance by public and private bodies (including church bodies); it should have powers, where necessary, to initiate proceedings or recommend the withholding of public grants against non-compliant bodies.²⁹³

Comment

Research has shown that *Children First: The National Guidelines for the Protection and Welfare of Children* is not being applied consistently throughout the State and thus needs to be put on a statutory footing.²⁹⁴ The Special Rapporteur on Child Protection has also raised concerns, including the need for improved interdepartmental and inter-agency communication and responsibilities for the implementation of the Guidelines.²⁹⁵

In the absence of a Bill, it is still unclear as to how the placing of *Children First* on a statutory footing will operate in practice, and steps taken towards developing a Bill appear to be minimal; for that reason the Government gets a 'D', 'barely acceptable'. There is also concern that restricting the legal duty to those organisations that are in receipt of state funding may leave children in other settings vulnerable.

291 A revised edition of the *Children First* guidelines were issued by the Office of the Minister for Children and Youth Affairs in December 2009. <http://www.omc.gov.ie/documents/childcare/ChildrenFirst.pdf>

292 Recommendation 20, *Report of the Commission to Inquire into Child Abuse, 2009: Implementation Plan*, p. 55. This was also Recommendation 3.1 of the *National Review of Compliance with Children First: National Guidelines for the Protection and Welfare of Children* (July 2008) Office of the Minister for Children and Youth Affairs, pp. 13-15.

293 The periodic updating of the Guidelines and ongoing professional and volunteer training in their use should rest with the Department of Health and Children.

294 Office of the Minister for Children and Youth Affairs (2008) *National Review of Compliance with Children First: National Guidelines for the Protection and Welfare of Children*; and H. Buckley et al (2008), *Service users' perceptions of the Irish Child Protection System*, Dublin: Office of the Minister for Children and Youth Affairs.

295 Geoffrey Shannon (2008) *Second Report of the Special Rapporteur on Child Protection: A Report Submitted to the Oireachtas* http://www.omcya.ie/documents/publications/Geoffrey_Shannon_2nd_Report_191208.pdf

4.2. CHILDREN AND THEIR ENVIRONMENTS

“Every child should have access to quality play, sport, recreation and cultural activities to enrich their experience of childhood.” (*Towards 2016* p. 41).

PLAY AND RECREATION

Grade: D

COMMITMENT	PROGRESS
The <i>Programme for Government</i> commits to investing in playgrounds around the country so that every child in every community has reasonable access to at least one modern playground. ²⁹⁶ This commitment is repeated and outlined in more specific terms in the <i>National Action Plan for Social Inclusion</i> . ²⁹⁷	Limited. Little evidence of progress since <i>Report Card 2009</i> .

What's happening?

Little change since last year. Momentum appears to be waning.

Overall, the Government has made significant progress towards this commitment: according to the Office of the Minister for Children and Youth Affairs there are currently an estimated 673 playgrounds in Ireland, an increase of 349 since 2006.²⁹⁸ However, this figure is not publicly available and information on the National Play and Recreation Resource Centre website suggests that there has been no increase in the number of playgrounds since March 2008.²⁹⁹ Either way, the overall increase in playgrounds since 2006 masks children's experience in reality. For example, the spread across the country varies widely; in March 2008 Limerick County Council area had just one playground for 121,471 children, while Leitrim had 11 playgrounds,

with one for every 2,348 children.³⁰⁰ Wexford doubled its number of playgrounds between 2006 and 2008, from 13 to 26, while Galway City, Kildare, Louth and Westmeath have each increased their number of playgrounds by just one in the same period.³⁰¹

Ready, Steady, Play! A National Play Policy was published in 2004 with a four-year life span.³⁰² The National Play Policy has now expired. A new play policy is not planned, instead it is envisaged the new National Children's Strategy in 2010 will “provide the framework for further provisions in the area of play”.³⁰³

IMMEDIATE ACTION

> **Mainstream the principles of the National Play Policy.**

The Office of the Minister for Children and Youth Affairs should ensure that the National Play Policy is kept alive post 2010. The policy focus must be wider than simply increasing the provision of playgrounds and the focus on play must be cross-departmental.

Maintenance and development of play and recreational facilities should not be allowed to fall victim to the recession.

296 Government of Ireland (2007) *Programme for Government 2007–2012*, Dublin: Stationery Office, p. 50.

297 Government of Ireland (2007) *National Action Plan for Social Inclusion 2007–2016*, Dublin: Stationery Office, p. 36.

298 Information received by the Children's Rights Alliance from the Office of the Minister for Children and Youth Affairs, December 2009.

299 National Play Resource Centre (2009) *Analysis of Playgrounds by County*, March 2008, <http://www.nprcc.ie/documents/play/downloads/PlaygroundReport202008.pdf> [accessed 20 Oct 2009].

300 *Ibid.*

301 *Ibid.*

302 Office of the Minister for Children and Youth Affairs (2004) *Ready, Steady, Play: A National Play Policy*, Dublin: Stationery Office.

303 Information received by the Children's Rights Alliance from the Office of the Minister for Children and Youth Affairs, December 2009.

COMMITMENT	PROGRESS
<p><i>Towards 2016</i> commits to publishing a National Recreation Policy. The policy will provide a framework to address the availability of youth friendly and safe facilities and environments for older children. The Office of the Minister for Children and Youth Affairs will work with other Government Departments to examine spending programmes across Government with a view to a more integrated, strategic approach to meeting prioritised needs.³⁰⁴</p>	<p>Limited. Little evidence of progress since <i>Report Card 2009</i>.</p>

has not yet been set for publication.³⁰⁸ Meanwhile, the OMCYA has been allocated €1.5 million from the Dormant Accounts Fund for the development of a structured programme of youth cafés, it is anticipated that this funding will be made available over 2010 and 2011.³⁰⁹ Currently, there are about 50 youth cafés countrywide, and are particularly popular in Cork, Wexford, Roscommon and Kerry.³¹⁰

IMMEDIATE ACTION

- > **Fully implement the National Recreation Policy**
The full implementation of the National Recreation Policy will make a real difference to the lives of children and young people. It has the potential to have a knock-on, positive impact on levels of obesity, anti-social behaviour and educational attainment.

What's happening?

Little change since last year: the Policy is published, but implementation of its actions are limited.

The National Recreation Policy, *Teenspace*, published in September 2007 by the Office of the Minister for Children and Youth Affairs (OMCYA),³⁰⁵ followed consultation with children, young people and stakeholders. The policy has six guiding principles, seven core objectives, and 76 actions; its implementation is the responsibility of a wide range of Government departments and agencies. In 2008, the OMCYA wrote to relevant departments and agencies with responsibilities under the policy informing them of their obligations and requesting that these be reflected in their business plans and strategy statements. It is unclear whether this request was acted upon.³⁰⁶

Within the policy development process, youth cafés were identified as a significant need by young people.³⁰⁷ The National Children's Advisory Council (NCAC) commissioned research into youth café models and a toolkit was developed for setting up a youth café. This work was completed in 2008 and publication was expected in 2009 but was then delayed. A date



304 Government of Ireland (2006) *Towards 2016: Ten-Year Framework Social Partnership Agreement 2006-2015*, Dublin: Stationery Office, p. 45.

305 Office of the Minister for Children and Youth Affairs (2007) *Teenspace: National Recreation Policy for Young People*, Dublin: Stationery Office.

306 Information received by the Children's Rights Alliance from the Office of the Minister for Children and Youth Affairs, November 2009.

307 Office of the Minister for Children (2006) *The Report of the Public Consultation for the Development of the National Recreation Policy for Young People*, Dublin: Stationery Office, p. 11.

308 Information received by the Children's Rights Alliance from the Office of the Minister for Children and Youth Affairs, November 2009.

309 Information received by the Children's Rights Alliance from the Office of the Minister for Children and Youth Affairs, December 2009.

310 Information received by the Children's Rights Alliance from the Office of the Minister for Children and Youth Affairs, November 2009.

Comment

In *Report Card 2009*, Government got its highest grade, a 'B', for play and recreation. This year it gets a 'D', as over the last year there has been no indication of energy or drive behind meeting the commitments made, and progress made risks being lost. The publication of *Ready, Steady, Play! A National Play Policy* in 2004 was an important step in acknowledging the value of play. It put play on the political agenda, and steps were taken towards ensuring that all children have access to play facilities.³¹¹ Momentum gathered behind play and recreation must not be lost.

To date, 62% of local authorities have published a Play Policy and 65% have appointed a Play Officer.³¹² However, in many cases the Play Officers tend not to be experts in play, very often taking on this task as an additional part of an existing local authority role.³¹³ This is indicative of some of the problems experienced in implementing the *National Play Policy*: of the 50 actions it outlines many are devolved to the local level, where resources are limited. There is no national oversight or guidance. This means that implementation has been patchy, and usually dependent upon the initiative of individuals at local level.³¹⁴ Furthermore, while the National Play and Recreation Resource Centre (NPRRC), which provides support to local authorities, was previously staffed by a play specialist, in 2008, it was subsumed into the Office of the Minister for Children and Youth Affairs, diluting its focus.³¹⁵

Physical activity contributes to good physical and mental health, and exercise habits developed in childhood tend to continue into adulthood.³¹⁶ 75% of nine-year-old children in Ireland are involved in organised sport, though participation among boys is much higher (84%) than girls (67%).³¹⁷ Just under half (47%) of all nine-year-old children are involved in cultural structured activities like dance, arts or drama, with more than twice the number of girls than boys taking part in these activities.³¹⁸ Socio-economic status plays a role here too, with children from lower

socio-economic groups less likely to participate than their better off peers.³¹⁹

Funding: Budgets 2009 and 2010 saw a cut to the funding of youth work organisations. Maintenance and development of play and recreational facilities should not be allowed to fall victim to the recession. These facilities provide valuable child development opportunities; and are even more critical when money is scarce in families, and where accessing private activities – like dance classes or costly team sports – is no longer an option. The value of providing recreation space, particularly for teenagers, should be acknowledged and supported by Government, through partnership initiatives with local authorities and communities. For families under stress, a neutral, cost free space for children to play and relax, is vital to their (and their families') wellbeing.



311 The United Nations Committee on the Rights of the Child in its Concluding Observations to the Irish Government, September 2006, recommended that more emphasis be placed on the creation of facilities for children to enjoy leisure, recreation and cultural activities, see (CRC/C/IRL/CO/2, p. 13 paragraph 63).

312 National Play Resource Centre (2009) Analysis of Playgrounds by County, March 2008, <http://www.nprrc.ie/documents/play/downloads/PlaygroundReport202008.pdf> [accessed 20 Oct 2009].

313 Interview with Irene Gunning, Irish Play and Playgroups Association (IPPA) and Steve Goode, Independent Play Consultant, November 2008.

314 Ibid.

315 The NPRRC was integrated into the Office of the Minister for Children and Youth Affairs. It continues to work with local authorities and other national and local providers to promote initiatives such as the National Play Day. In 2009 the NPRRC supported a small number of local authorities and agencies to run a pilot national recreation event for young people (information received by the Children's Rights Alliance from the OMCYA, November 2009).

316 R. Rimal (2003) 'Intergenerational Transmission of Health: the role of Intrapersonal, Interpersonal and Communicative factors', *Health Education and Behaviour* 30, pp.10-28.

317 Ibid., p. 124.

318 Ibid.

319 Ibid.

SCHOOL BUILDINGS

Grade: C

COMMITMENT	PROGRESS
The <i>Programme for Government</i> commits to investing €4.5 billion between 2007 and 2012 towards providing new schools and improving existing ones. ³²⁰	Some progress. Improvement on transparency since <i>Report Card 2009</i> .

What's happening?

Transparency was improved in 2009. Level of delivery improved. Await next year's figures before declaring upward trend.

The issue in relation to school buildings in 2009 was not lack of money, but a failure to spend the allocated money within the budgetary year. Only 52% (or €321 million) of the money allocated for primary and secondary school buildings had been spent by the end of October 2009.³²¹ A senior department official cited teething problems with a new contract process for the delays and it is thought a 30% drop in tender price also contributed to the budgetary under-spend.³²²

The Department of Education and Science did not have to spend the entire budget in 2009, as 10% (€85 million) could be carried over to 2010. Thus, Budget 2010 provided €579 for school buildings, including €72 million from the capital figure carried over from 2009. This is a decrease from the figure of €614 million in

2009, but it is still a significant investment.³²³

Unfortunately, a significant amount of money continues to be allocated to prefab rental for schools: €48 million in 2009.³²⁴

Between 2002 and March 2008, just 57 new primary schools were delivered, an average of less than ten per year.³²⁵ 2008 figures indicate an improvement: 48 new primary schools, providing 9,875 permanent school places and three new second-level schools, providing 1,925 permanent school places, were completed.³²⁶ However, this is a cautious welcome as contractual and tendering problems caused delays in 2009, and it is unclear whether these issues have been resolved.³²⁷

The issue in relation to school buildings in 2009 was not lack of money, but a failure to spend the allocated money within the budgetary year. Only 52% (or €321 million) of the money allocated for primary and secondary school buildings had been spent by the end of October 2009.

320 Government of Ireland (2007) *Programme for Government 2007–2012*, Dublin: Stationery Office, p. 43.

321 Niall Murray, 'Anger over unspent building fund money' *The Irish Examiner*, 9 October 2009. The projected spend to the end of September at primary level was €280.9m, but just €196.6m (or 70%) was spent. At second-level, there has been a €7.8m (5.9%) under-spend on the €132m due to have been spent up to the end of last month.

322 Katherine Donnelly, 'Funds go unspent as just a third of schools being built' *The Irish Independent*, 6 November 2009.

323 Department of Education and Science, *Briefing Note Main Estimates: Education*, 9 December 2009, www.education.ie/admin/servlet/blobServlet/edu_budget_2010.pdf [accessed 9 December 2009].

324 Sean Flynn, 'Spending on prefab buildings a criminal waste', *The Irish Times*, 16 April 2009. More than 200 schools across the country are spending more than €100,000 annually renting prefab accommodation. A total of 210 schools have prefab rental costs of more than €100,000 each year, and a further 184 schools are paying more than €50,000 to lease temporary classroom accommodation from private companies.

325 Irish National Teachers' Organisation (INTO) 'Statement by Angela Dunne, INTO President, on School Buildings' [Press Release] 24 March 2008.

326 Information received by the Children's Rights Alliance from the Department of Education and Science, December 2009. See also Department of Education and Science, <http://www.education.ie/home/home.jsp?maincat=17216&pcategory=17216&ecategory=22132&language=EN> [accessed 29 October 2009].

327 Of the 78 projects that were due to commence in 2009, 7 are completed, while a further 21 are under construction; 30 are at tender stage; a further 12 have submitted draft documents to the Department, and 8 have yet to submit their tender documents. In December it was expected that a further 5 projects would commence on site before the end of 2009. The remaining projects at tender, approximately 25, were expected to commence on site in the first quarter of 2010. This is information received by the Children's Rights Alliance from the Department of Education and Science, December 2009.

In a welcome move, the Summer Works Scheme, which was deferred in summer 2008, was revived for summer 2009. This refurbishment programme funds structural repairs and upkeep in schools during the summer holidays. It is vital to prevent schools falling into total disrepair and requiring expensive new building work.

Also in 2009, the process of allocating school building funds was made more transparent. Now, schools, teachers and parents can check the standing of their school in the building programme on the Department of Education and Science website.³²⁸ Each of the 1,100 schools whose projects are being considered by the Department are rated from bands one to four, with band one regarded as the highest priority. Other information available online includes whether projects are on-site, progressing to tender or in the architectural planning stages. However, it is not yet clear why one school is selected for funding over another. Until the funding criteria is clarified and made public this process remains unfair.

IMMEDIATE ACTION

- > **Ensure appropriate spending of public money in relation to school buildings.**
Now, more than ever, the Government must seek value for money. €48 million spent renting prefabs is not good value for money. In addition, delays in spending much needed, and long awaited, school building funds is unnecessary and inconvenient.

Comment

The 'C' grade here, a 'satisfactory attempt', is the same as last year. Government is making some effort; but the key issues, like providing clarity on criteria for selecting schools for funding, remain the same. There are more than 3,200 primary schools and 730 second-level schools in Ireland and it is these spaces where children, between the ages of four and 18 years, spend a large part of their week.³²⁹ Yet many of these schools have fallen into a state of disrepair.³³⁰ Media reports consistently highlight the very grave nature of the problems associated with substandard school buildings, such as overcrowding, rat infestation, classrooms in toilets and leaking roofs.³³¹ In addition to solving these problems, there is ongoing demand for new schools. The *National Development Plan* estimates that Ireland will need 100,000 new school places in the next ten years – that is 400 new schools or equivalent extensions.³³²

Transparency: Information on the number of schools awaiting renovation or refurbishment is now publicly available, as is the criteria for prioritising schools. This is a welcome and much needed development, which facilitates evaluation of the process and allows those involved – schools, teachers, parents and pupils – to be clear about the status of their request and likely timeframe for action. It is also fairer, removing the potential for behind-the-scenes political lobbying and making all schools subject to the same, publicly accessible, criteria.

328 See Department of Education and Science website, <http://www.education.ie/home/home.jsp?maincat=17216&pcategory=17216&ecategory=22132&language=EN>; and Niall Murray, 'School Building Progress to be detailed online', *The Irish Examiner*, 14 July 2009.

329 Figures received by the Children's Rights Alliance from the Department of Education and Science, November 2008.

330 The United Nations Committee on the Rights of the Child in its *Concluding Observations* to the Irish Government, September 2006, recommended that budgetary allocations are directed at improving and upgrading school buildings, recreation equipment and facilities, and the sanitary conditions in schools, see (CRC/C/IRL/CO/2, p. 13 paragraph 59.b).

331 Ronan McGreevy, 'O'Keefe sends team to study rat-infested fire-trap school', *The Irish Times*, 18 November 2008. 'Outrage as €4.3 million school site left to grow grass', *Waterford News and Star*, 11 July 2008. Katharine Donnelly, 'School split between two sites waiting 11 years for extension', *The Irish Independent*, 9 October 2009.

332 Government of Ireland (2007) *National Development Plan 2007–2012*, Dublin: Stationery Office, p. 197. The figure is based on an average of 250 pupils per school.

4.3. ALCOHOL

“All children and adolescents have the right to grow up in an environment protected from the negative consequences of alcohol consumption...” *WHO European Charter on Alcohol, 1995* (adopted by Ireland).³³³

COMMITMENT	PROGRESS
The <i>Programme for Government</i> commits to prioritising and intensifying measures to tackle alcohol misuse among young people, and to doubling the penalties for all offences relating to the sale of alcohol to children, the purchase of alcohol for children and the breach of the restrictions on the presence of underage persons on licensed premises. ³³⁴	Backwards steps taken. Negative policy decision taken since <i>Report Card 2009</i> .
<i>Towards 2016</i> , the key national policy document has only one commitment in relation to alcohol consumption among children – to monitor trends of substance use via the European School Survey Project on Alcohol and Other Drugs (the ESPAD survey). ³³⁵	Ongoing. No change since <i>Report Card 2009</i> .

products. This suggests that addressing alcohol related harm has slipped way down the Government’s agenda. The move in Budget 2010 to reduce the price of alcohol supports this view.

The Intoxicating Liquor Act, 2008, which came into force in August 2008, introduces firmer penalties for those that sell alcohol to under-18s.³³⁶ While the measures contained in the new legislation are welcome, with the exception of changed off-licensing hours, enforcement has been limited and weak.³³⁷ The impact of earlier closing times for off-licences has yet to be evaluated. Overall, this is an unconvincing response to the serious problem of alcohol misuse among young people. Far more is needed, starting with a stricter Government regulation to govern alcohol advertising and marketing.

What’s happening?

Limited enforcement of existing policy. Budget 2010 took a step backwards by reducing excise duty on alcohol, while ignoring constructive solutions. The 2009 *Renewed Programme for Government* contained just one commitment relating to alcohol: the introduction of stricter labeling requirements on alcohol products. This is compared with nine commitments in the 2007 *Programme for Government* – ranging from specific commitments to reduce alcohol consumption and binge-drinking among young people to using the tax system to incentivise alcohol-free



333 World Health Organisation (2001) Declaration on Young People and Alcohol, http://www.euro.who.int/AboutWHO/Policy/20030204_1 [accessed 11 November 2008]. The declaration was adopted by 51 European Ministers of Health, including Ireland.

334 Government of Ireland (2007) *Programme for Government 2007–2012*, Dublin: Stationery Office, p. 35.

335 Government of Ireland (2006) *Towards 2016: Ten-Year Framework Social Partnership Agreement 2006–2015*, Dublin: Stationery Office, p. 45.

336 The penalty includes a minimum closure period of two days. It also restricts alcohol promotions, shortens off-licence opening hours, and gives the Gardaí new powers to confiscate containers from under-18s that they suspect are being used to hold or consume alcohol in public.

337 A. Hope (2009) *Get ‘em Young: mapping young people’s exposure to alcohol marketing in Ireland*, Dublin: National Youth Council of Ireland, p.5.

IMMEDIATE ACTION

- > **Implement the recommendations from the Strategic Task Force on Alcohol in relation to 'protecting children'.**
The reports of the National Taskforce on Alcohol (2002 and 2004) are clear: Ireland needs to take decisive steps to address drinking among teenagers. The Department of An Taoiseach should take on a leadership role to ensure the implementation of these recommendations.
- > **Introduce a legislative ban to protect children from unnecessary exposure to alcohol marketing.**
Alcohol advertising and marketing shapes children's attitudes to alcohol from a very early age.³³⁸ The current voluntary advertising code is not effective, and does not protect children from the harmful effects of alcohol exposure. The Department of Health and Children should introduce legislation to restrict alcohol marketing as a matter of priority.

Alcohol advertising and marketing shape children's attitudes to alcohol from an early age and play a significant role in their decision to drink and how they drink.

Comment

There is broad acceptance that there is a problem with alcohol in Ireland, and widespread support for the solutions required, yet still, the Government has failed to move on recommendations made. For that reason it gets an 'F' here, a fail, and a significant drop from last year's 'D'. Its decision to reduce the price of alcohol in Budget 2010 was a step that will 'undermine children's wellbeing'. And the problem is worsening: the economic downturn is linked with an increase in alcohol consumption, which in turn is likely to lead to an increase in mental health problems and domestic violence.³³⁹

Advertising: Alcohol advertising and marketing shape children's attitudes to alcohol from an early age and play a significant role in their decision to drink and how they drink.³⁴⁰ A 2009 review of longitudinal studies shows that the volume of alcohol advertisements and media seen by teenagers increases the likelihood that they will start to drink, the amount they drink, and the amount they drink on any one occasion.³⁴¹ In 2003, draft legislation was prepared aimed at significantly reducing children's exposure to alcohol advertising and marketing. Had this been enacted, it would have restricted the placement of alcohol advertisements, limited their content, and banned the drinks industry sponsorship of youth leisure activities. Despite original Cabinet approval, the draft legislation was not brought before the Oireachtas and a voluntary code was introduced in its place.³⁴² It is worth noting that the text of the voluntary code mirrors exactly that produced by the industry, including grammatical errors.³⁴³ It is clear that the voluntary code is insufficient to address the problem; and this is supported by a 2007 World Health Organisation expert committee, which concluded that voluntary systems do not prevent the kind of marketing which has an impact on younger

338 A. Hope and C. Dring (2001) *The Impact of Alcohol Advertising on Children in Ireland*, Dublin: Health Promotion Unit, Department of Health and Children pp. 1-6.

339 Eoin Burke-Kennedy, 'Recession linked to crime, alcohol', *The Irish Times*, 9 April 2009; Kitty Holland, 'Cuts may endanger nation's health', *The Irish Times*, 4 November 2009; Amelia Gentleman, 'Growth in violence against women feared as recession hits', *The Guardian*, 4 March 2009; Kitty Holland, 'No room in refuges for 1,700 women', *The Irish Times*, 14 October 2009.

340 A. Hope and C. Dring (2001) *The Impact of Alcohol Advertising on Children in Ireland*, Dublin: Health Promotion Unit, Department of Health and Children pp. 1-6.

341 Science Group of the European Alcohol and Health Forum (2009) *Scientific Opinion of the Science Group of the European Alcohol and Health Forum* and P. Anderson et al (2009) *Impact of Alcohol Advertising and Media Exposure on Adolescent Alcohol Use: A Systematic Review of Longitudinal Studies in Alcohol and Alcoholism*, Oxford: UK.

342 Children's Rights Alliance interview with Dr. Ann Hope, November 2008.

343 Fintan O'Toole, 'Caving in to the drinks industry', *The Irish Times*, 20 December 2005.

people and that “self-regulation seems to work only to the extent that there is a current and credible threat of regulation by government”.³⁴⁴

Budget 2010 reduced excise duty on alcohol in a bid to reduce cross-border shopping. Children will suffer the effects of this change, as affordability of alcohol is closely linked to levels of consumption.³⁴⁵ Already, Ireland has the second highest rate of alcohol consumption in the EU.³⁴⁶ Irish teenagers are ranked third highest binge drinkers in the EU,³⁴⁷ and Irish teenage girls drink as much as boys.³⁴⁸ A 2008 regional study of teen drinking in the south-east of Ireland found that more than one in three teenagers reported drinking once a week and consuming on average 5.75 drinks on a typical drinking occasion.³⁴⁹ Also of deep concern is the effect that drinking in families can have on children: between 61,000 and 104,000 children aged under 15 in Ireland are estimated to be living with parents who misuse alcohol.³⁵⁰ Consequently, children are affected not only in terms of parental addiction but also owing to financial difficulties, family breakdown, neglect and abuse. The cost of alcohol-related harm in Ireland in 2003 was estimated at €2.65 billion (2.6% of GNP).³⁵¹

The measures required to curb the harm caused to young people by alcohol include reducing children's access to alcohol; restricting the promotion of alcohol; raising awareness of the potential harmful effects of alcohol; developing youth appropriate treatment services; and providing alcohol-free social opportunities.³⁵² But few steps have been taken in this direction. Since 1990, the Government has established eight committees on alcohol and produced 13 official reports.³⁵³ Despite the hundreds of recommendations in these reports (the two Reports of the Strategic Taskforce on Alcohol – 2002 and 2004 – made 100 alone), positive policy change has been minimal, with some decisions being counterproductive.³⁵⁴

Budget 2010 reduced excise duty on alcohol in a bid to reduce cross-border shopping. Children will suffer the effects of this change, as affordability of alcohol is closely linked to levels of consumption. Already, Ireland has the second highest rate of alcohol consumption in the EU. Irish teenagers are ranked third highest binge drinkers in the EU, and Irish teenage girls drink as much as boys.

344 World Health Organisation (WHO) (2007) *Expert Committee on problems related to Alcohol Consumption*, 2nd Report, WHO: Geneva.

345 L. Rabinovich et al (2009) *The affordability of alcoholic beverages in the European Union: understanding the link between alcohol affordability, consumption and harms*, RAND Technical Report, Prepared for the European Commission DG SANCO.

346 Department for Health and Children (2004) *Strategic Taskforce on Alcohol: Second Report*, Dublin: Stationery Office, p. 6 (data from 2001; Luxembourg ranked first).

347 The European School Survey Project on Alcohol and Other Drugs (ESPAD) *The ESPAD Report 2003 on Alcohol and Drug Use among Students in 35 Countries*, Sweden: Swedish Council for Alcohol and Other Drugs (CAN). Data was not available in response to this question in the 2007 ESPAD survey. However Ireland was ranked fifth of the 36 ESPAD countries in the number of teenagers that reported having been drunk during the last 30 days (*ESPAD Report 2007 on Alcohol and Drug Use among Students in 35 Countries*, p.75). This issue was raised by the United Nations Committee on the Rights of the Child in its *Concluding Observations* to the Irish Government, September 2006, see (CRC/C/IRL/CO/2, p. 11 paragraph 48).

348 *Ibid.* The 2007 ESPAD Survey shows that 28% of girls report being drunk in the last 30 days, compared with 24% of boys (p. 75); 46% of girls report being drunk in the last 12 months compared with 47% of boys (p. 73).

349 D. Palmer and G. O'Reilly (2008) *Young People Alcohol and Drugs*, Dublin: UCD and HSE South. http://www.juvenilementalhealthmatters.com/Welcme_files/Young%20People%20Alcohol%20%26%20Drugs_1.pdf.

350 See Alcohol Action Ireland policy work on Alcohol and its impact on children: http://alcoholireland.ie/?page_id=110 [accessed 10 November 2009].

351 Department of Health and Children (2004) *Strategic Taskforce on Alcohol: Second Report*, Dublin: Stationery Office, p. 20.

352 *Ibid.*, pp. 23–4.

353 Dr. Ann Hope, 'Protecting Children', Presentation to the Children's Rights Alliance AGM, 13 May 2008.

354 *Ibid.*, The United Nations Committee on the Rights of the Child in its *Concluding Observations* to the Irish Government, September 2006, recommended the full implementation of the recommendations made in the second report of the Strategic Taskforce on Alcohol, see (CRC/C/IRL/CO/2, p. 11 paragraph 51).

4.4. SEXUAL HEALTH AND RELATIONSHIPS

“Children will be supported to enjoy the optimum... emotional wellbeing.”

(*National Children's Strategy*, p. 55).

COMMITMENT	PROGRESS
The <i>Programme for Government</i> commits to involving community health professionals in the delivery of Relationships and Sexuality Education (RSE) and to providing greater support for teachers in this area through improved teaching resources and access to training, and to updating the sex education programme in schools. ³⁵⁵	Good. Positive and strategic improvement since <i>Report Card 2009</i> .

decrease on the average number of teachers attending training in the preceding years since 2002, which was approximately 500. This decrease is likely to be linked to a shortage of substitution cover as a result of measures introduced in Budget 2009.³⁵⁸ Six Department of Education inspectors have been trained in inspecting the teaching of RSE.

What's happening?

Progressing steadily.

There has been significant progress in teaching Relationships and Sexuality Education (RSE) since 2002. A 2007 report raised serious concerns about the inadequate and inconsistent delivery of the RSE curriculum.³⁵⁶ The need for updated teaching materials and the need for school leaders to champion the programme were identified as barriers to progress. The RSE Support Service has taken a number of steps to address these inadequacies, building on needs expressed by schools.³⁵⁷ New teaching materials have been developed, including a DVD and a 20 lesson resource for senior cycle. Teacher training in RSE for post-primary schools has been increased from three days per year in 2002 to five days in 2008, and covers a wide range of topics including sexual identity, contraception and sexually transmitted infections. In 2009, 385 teachers attended RSE training; this is a



³⁵⁵ Government of Ireland (2007) *Programme for Government 2007–2012*, Dublin: Stationery Office, p. 44 & 49.

³⁵⁶ P. Mayock, K. Kitching, and D. Morgan (2007) *Relationships and Sexuality Education (RSE) in the Context of Social, Personal and Health Education (SPHE): An Assessment of the Challenges to Full Implementation of the Programme in Post-primary Schools. Full Report* Dublin: Crisis Pregnancy Agency and Department of Education and Science.

³⁵⁷ The RSE support service is supported by the Department of Education and Science, see <http://www.ecdumcondra.ie/programmes.html#Relationships%20&%20Sexuality%20Education%20%28R.S.E.%29>

³⁵⁸ Information received by the Children's Rights Alliance from the RSE Support Service, Department of Education and Science, December 2009.

COMMITMENT	PROGRESS
The <i>Programme for Government</i> commits to developing a National Sexual Health Strategy. ³⁵⁹	None. Backwards steps since <i>Report Card 2009</i> .

What's happening?

Nothing. The National Sexual Health Strategy was included in the HSE Service Plan for 2008, but not delivered. It was not included in the 2009 HSE Service Plan.

The development of a National Sexual Health Strategy is the responsibility of the HSE. The 2008 HSE Service Plan indicated that the Strategy, along with an Action Plan, would be published by the end of 2008.³⁶⁰ This did not happen. The Strategy is not mentioned in the 2009 HSE Service Plan and we are unclear whether it will go ahead, and if it does, whether it will include a focus on adolescents.³⁶¹

IMMEDIATE ACTION

- > **Ensure effective delivery of the RSE programme in every school in Ireland by 2012.**
Effective delivery of the RSE programme in schools requires appropriate teaching resources, teachers trained in the subject (with support from outside facilitators as necessary) and quality inspection to maintain standards at both junior and senior cycle in schools.³⁶² Progress is being made in these areas. Principals must continue to demonstrate their support for the RSE course and ensure its full delivery in their schools. Progress on delivery of the RSE Programme in schools should be publicly available.
- > **Include adolescents in the promised National Sexual Health Strategy.**
HSE must include the issues of sex education, sexuality and access to sexual health services for adolescents in the promised National Sexual Health Strategy.



³⁵⁹ Government of Ireland (2007) *Programme for Government 2007–2012*, Dublin: Stationery Office, p.49.

³⁶⁰ Health Service Executive (2009) *National Service Plan 2008*, p. 62.

³⁶¹ *Ibid.*

³⁶² Junior cycle refers to the first three years of secondary school: first, second and third year. Senior cycle refers to the final two years of secondary school: fifth and sixth year.

Comment

A 'C' grade here, the same as last time, reflects a 'satisfactory attempt' by Government; but much remains to be done, as many children are 'still left wanting'.

Implementation of the Relationships and Sexuality Education programme in second-level schools is improving. However, it is still inconsistent, with 30% of schools stating that they do not teach RSE in third year.³⁶³ Other schools report that they do teach RSE but that they do not deliver all the modules.³⁶⁴

Attempts are being made to address this, by incorporating RSE into the school inspection process through making it a criteria in the Whole School Evaluation (WSE), and by increasing the number of inspectors that are skilled in undertaking RSE inspections. Meanwhile, there are significant barriers in delivering RSE to children and young people with special needs, and early school leavers.³⁶⁵

In 2006, at least one in every 10 cases of sexually transmitted infections reported in Ireland was among teenagers (1,106 cases involving individuals aged 19 or under).³⁶⁶ Research consistently shows that young people in Ireland lack adequate knowledge about their sexual health,³⁶⁷ and that parents often feel ill-equipped or ill-at-ease discussing these issues with their children.³⁶⁸ Teenagers report that they want more and better sex education that is not *only* based on the biological aspects of sex, but the emotional and relationship aspects too, and delivered across a range of settings.³⁶⁹ It is crucial that teenagers are aware of sexual health issues, the kinds of services they may need to access and how to do so,³⁷⁰ and issues of sexuality and homophobic bullying.³⁷¹

Yet data relating to teenagers' sexual health is scarce, with a subsequent lack of policy analysis. The latest international Health Behaviour in School Age Children (HBSC) survey, undertaken in Ireland in 2007, did not include a question on sexual relationships for fifteen-year-olds as there was concern that this would discourage schools from taking part.³⁷² The 2006 Irish Study of Sexual Health and Relationships (ISSHR), the first of its kind in Ireland, was limited to those aged over 18. Consequently, adolescents' views and experiences will not be taken on board in the planning and developing sexual health services and interventions in Ireland.³⁷³

Teenagers report that they want more and better sex education that is not *only* based on the biological aspects of sex, but the emotional and relationship aspects too, and delivered across a range of settings.

363 RSE is taught as part of the broader Social, Personal and Health Education (SPHE) course, which is examined in the Junior Certificate but not in the Leaving Certificate.

364 Crisis Pregnancy Agency (2007) *Strategy: Leading to an integrated approach to reducing crisis pregnancy, 2007-2011*, Dublin: Crisis Pregnancy Agency, p. 25

365 *Ibid.*, p. 25

366 Data compiled by the National Health Protection Surveillance Centre (HPSC) June 2008.

367 Crisis Pregnancy Agency (2007) *Strategy: Leading to an integrated approach to reducing crisis pregnancy, 2007-2011*, Dublin: Crisis Pregnancy Agency, p. 25

368 *Ibid.*

369 *Ibid.*

370 The United Nations Committee on the Rights of the Child in its *Concluding Observations* to the Irish Government, September 2006, noted its concern that adolescents have insufficient access to necessary information on reproductive health and recommended that efforts be made to enhance adolescent specific reproductive and sexual health information and services, see (CRC/C/IRL/CO/2, p. 11, paragraphs 52 and 53).

371 See Department of Education and Science and GLEN (Gay and Lesbian Equality Network) (2009) *Lesbian, Gay and Bisexual Students in post-primary schools: Guidance for Principals and School Leaders*, see www.glen.ie, and S. Minton et al (2009) *A Report on Experiences of Homophobic Bullying against LGBT people in Ireland*, see www.belongto.org

372 World Health Organisation (WHO) (2008) *Inequalities in Young People's Health: HBSC International Report from the 2006/06 survey*, WHO: Denmark, p. 12.

373 Department of Health and Children (2006) *The Irish Study of Sexual Health and Relationships*, Dublin: Crisis Pregnancy Agency and Department of Health and Children.

SUMMARY OF RECOMMENDED IMMEDIATE ACTIONS

EDUCATION

Early Childhood Care and Education

- > Dedicate resources to ensuring that the universal pre-school year is of high quality.
- > Develop a comprehensive ten-year national plan for Early Childhood Care and Education.

Child Literacy and Language Support

- > Increase the time spent on literacy skills in schools in disadvantaged areas to 90 minutes a day.
- > Develop a National Literacy Policy with the child at the centre.

Early School-Leaving

- > Build in a process for ongoing evaluation of the work of the National Education Welfare Board.

Children with Special Educational Needs

- > Fully implement the Education for Persons with Special Educational Needs Act 2004.

HEALTH

Primary Care

- > Ring-fence multi-annual funding for the delivery of the promised Primary Care Teams.

Mental Health

- > Urgently deliver the promised Child and Adolescent Community Mental Health Teams.
- > Publish the HSE Implementation Plan for A Vision for Change.
- > Urgently end the practice of accommodating children in adult psychiatric units.

Childhood Obesity

- > Deliver a National Nutrition Policy and provide adequate resources for its implementation.

MATERIAL WELLBEING

Financial Support to Families

- > Introduce a new, targeted payment for low income families with children.

Access to Education

- > Reform the payment to support children in low income families with the cost of school.
- > Support the establishment of local enrolment committees to facilitate equitable school admissions.

Access to Healthcare

- > Finalise the medical card review and widen eligibility criteria for families with children.
- > Improve access to medical cards for children with certain illnesses.

Access to Housing

- > Provide a national framework for financing the housing output committed to in Towards 2016.
- > Begin a programme of work to seriously address youth homelessness, including producing a new Youth Homelessness Strategy.
- > Ensure adherence to the commitments on aftercare in the Ryan Report Implementation Plan.

SAFEGUARDING CHILDHOOD

Protecting Children

- > Urgently commence actions to fully implement the 99 recommendations of the Ryan Report Implementation Plan.
- > Commence without delay the filling of 270 promised social worker places.
- > Put in place a plan to enable the immediate roll out of equity of care for separated children.
- > Commence the drafting of legislation to place Children First on a statutory footing.
- > Establish an independent national authority to monitor compliance with the Children First guidelines.

Children and their Environments

- > Mainstream the principles of the National Play Policy.
- > Fully implement the National Recreation Policy.
- > Ensure appropriate spending of public money in relation to school buildings.

Alcohol

- > Implement the child-focused recommendations from the Strategic Task Force on Alcohol.
- > Introduce a legislative ban to protect children from unnecessary exposure to alcohol marketing.

Sexual Health and Relationships

- > Ensure effective delivery of the Relationships and Sexuality Education programme in every school by 2012.
- > Include adolescents in the promised National Sexual Health Strategy.

LIST OF ALLIANCE MEMBERS

Alcohol Action Ireland
Amnesty International
Ana Liffey Children's Project
The Ark, a cultural centre for children
Assoc. for Criminal Justice Research & Development
Association of Secondary Teachers Ireland
ATD Fourth World
Barnardos
Barretstown
Belongto
Border Counties Childcare Network
CARI
Catholic Guides of Ireland
Catholic Youth Care
Childminding Ireland
Children in Hospital Ireland
City of Dublin YMCA
CityArts
COPE Galway
Crosscare Aftercare Unit
Crosscare Drug & Alcohol Awareness Programme
DIT –School of Social Sciences & Legal Studies
Down Syndrome Ireland
Dublin Rape Crisis Centre
Dun Laoghaire Refugee Project
Educate Together
Education Department UCD
Enable Ireland
Focus Ireland
Forbairt Naíonraí Teo
Foróige
Gay and Lesbian Equality Network (GLEN)
Headstrong
Home Start National Office Ireland
Irish Assoc. of Young People in Care (IAYPIC)
Irish Secondary Student's Union (ISSU)
Inclusion Ireland
Inspire Ireland Foundation Ltd
Integrating Ireland
International Adoption Association
IPPA, the Early Childhood Organisation
Irish Autism Action
Irish Association of Hospital Play Staff
Irish Association of Social Care Workers
Irish Association of Social Workers
Irish Association of Suicidology
Irish Centre for Human Rights, NUIG
Irish Congress of Trade Unions
Irish Council for Civil Liberties
Irish Foster Care Association
Irish Girl Guides

Irish National Organisation of the Unemployed
Irish National Teachers Organisation
Irish Penal Reform Trust
Irish Refugee Council
Irish Traveller Movement
Irish Youth Foundation
Irish Society for the Prevention of Cruelty to Children (ISPCC)
Jack & Jill Children's Foundation
Jesuit Centre for Faith & Justice
Junglebox FDYS
Kids' Own Publishing Partnership
Kilbarrack Youth Project
La Leche League of Ireland
Lifestart National Office
Mary Immaculate College
Matt Talbot Community Trust
Miss Carr's Children's Home
Mothers' Union
Mounttown Neighbourhood Youth Project
National Association for Parent Support
National Children's Nurseries Association
National Parents Council (Post-Primary)
National Parents Council (Primary)
National Youth Council of Ireland
National Organisation for the Treatment of Abusers (NOTA)
OPEN
One Family
One in Four
Parentline
Pavee Point
Peter McVerry Trust
PLANET
Psychological Society of Ireland
Saoirse Housing Association
SAOL Project – SAOL Beag Children's Centre
Society of St. Vincent de Paul
SPARK (Support Project for Adolescent Refugee Kids)
Spunout.ie
St. Nicholas Montessori College
St. Nicholas Montessori Society
Step by Step Child & Family Project
Sugradh
Teen Counselling
Treoir
UNICEF Ireland
YAP (Youth Advocate Programme) Ireland
Youth Initiative in Partnership
Youth Work Ireland

The Children's Rights Alliance Report Card 2010 is the second of a new annual publication that reviews and grades the Irish Government in implementing its own commitments to children. These commitments are found in key Government documents, including *Towards 2016* and the *Programme for Government*.

In this second edition, the Alliance has focused on the areas of education, material wellbeing, health and safeguarding childhood. With over 90 non-governmental organisations in its membership, and as a designated Social Partner, it is well-placed to provide an honest evaluation of Ireland's treatment of its children.

The Children's Rights Alliance is a coalition of over 90 non-governmental organisations (NGOs) working to secure the rights and needs of children in Ireland, by campaigning for the full implementation of the UN Convention on the Rights of the Child (UNCRC). It aims to improve the lives of all children under 18, through securing the necessary changes in Ireland's laws, policies and services.



Children's Rights Alliance

4 Upper Mount Street

Dublin 2

Ireland

Tel: +353.1.662 9400

Email: info@childrensrights.ie

Web: www.childrensrights.ie