



Observatory
on national
policies
to combat
social exclusion

UNITED KINGDOM

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SOCIAL EXCLUSION 1990-1992:

THE UNITED KINGDOM

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**EC Observatory on Policies to Combat Social
Exclusion**

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PREFACE

Early in 1990, the European Commission established the Observatory on Policies to Combat Social Exclusion. This followed a resolution of the Council of Ministers in 1989, which called upon Member States to promote social and economic integration by ensuring the access of citizens to education, training, employment, housing, community services and medical care; and called upon the Commission to record and monitor how they set about this, (Council of the European Communities 1989.) A group of independent researchers * was convened to observe trends, analyse policies and exchange information about the phenomenon of social exclusion and how governments were reacting to it.

The Observatory has so far produced three sets of national reports: a general overview report in 1990, an "annual" updating report early in 1992, and a special report focusing on the personal social services - also in 1992. A synthesis of the first set of reports was written by the Coordinator, Graham Room (Room 1991), and the second will be published later this year (Room 1992).

This document brings together key elements from all three national reports for the UK. Material from the 1990 overview has been combined with the second report to

** A list of the names and addresses of Observatory members appears in the Appendix.*

produce a summary of trends and policies covering a wide range of issues and a period of more than two years. Extra space is given to the personal social services in this summary, to take account of the Observatory's special focus for 1992. The report includes data up to and including the spring of 1992: developments since then will be included in a further "annual" update, available early in 1993.

This report is based on published sources, interviews and conversations with policy-makers and practitioners, and experience of research in this field. The published sources include official government documents, academic studies, and the reports of voluntary organizations and pressure groups which are concerned with the issues raised in this report. If a source is cited, it is because it makes, in the author's view, a significant contribution to the debate - not because it is, in some simple sense, "true". The representation of views in this account aims to be perfectly balanced, but given the time in which it was written probably is not.

Any account of this kind is open to the charge that it is selective

- correct;

and that the selection of material to some extent reflects the bias of the author

- guilty.

It would be difficult to imagine a relatively brief report about a wide range of policy areas which did not select material to illustrate an argument, rather than exhaustively reviewing every possible source. The author's task, in this situation, is to try to ensure

that as many aspects of each policy question as possible are raised, even if the question itself cannot be resolved in the time and space available. The particular focus of the Observatory - its Community-wide character, the framework provided for the report, the context of the EC debate on the concept of "social exclusion" - means that the elements recorded here will at least be different from those commonly appearing in national documents, and may for that very reason throw new light on the topics under discussion.

Reports like this, which are based on existing knowledge depend on the generosity of others. This is particularly true in the field of social services where official and published sources of information are of mixed quality and coverage, and where the impact of policy can only be determined in relation to the experience of practitioners and users. There is not room here to thank everyone individually, but I hope that they may find the finished product of some interest and use.

The material is theirs. The opinions expressed here - and the mistakes - are my own.

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September 1992

INTRODUCTION

This report is steered by two beacons. The first is found in the first annual report of the Observatory, which defined social exclusion in terms of the social rights of European citizens, (Room 1991, p.5):

" - we define social exclusion in relation, first of all, to social rights. We investigate what social rights the citizen has to employment, housing, health care, etc.; how effectively national policies enable citizens to secure these rights; and what are the barriers which exclude people from these rights.

- We go on, secondly, to study the evidence that where citizens are unable to secure social rights, they will tend to suffer generalized and persisting disadvantage and their social and occupational participation will be undermined." (Ibid. p.6.)

The second framework for a discussion of policies to combat social exclusion is provided by the note by Jean-Paul Tricart (*Note de Problematique*, 17 July 1991.) This suggested a necessarily provisional definition of social exclusion, along the following lines:

" - the notion of social exclusion refers to processes and situations by which persons or groups tend to be separated or held at a distance from ordinary social exchanges or positions which promote or allow integration or "insertion" - that is, from participation in institutions or from access to rights, services or resources which imply full membership of society." (Tricart 1991, p.2).

The note continues from this to propose a three-part pattern for national annual reports. It emphasizes evaluation of policies, rather than data about disadvantage while recognizing that the latter will often be essential to the former. It leaves open the issue of duration - that

is, the extent to which disadvantage must be long-term or apparently inescapable if it is to be said to constitute a kind of exclusion. It suggests that integration, (or - more accurately - "insertion" which carries particular contextual connotations) should be seen as the opposite of the process of exclusion.

These two provisional definitions recall two different sets of political and philosophical debates. Room's statement builds on the ideas developed by TH Marshall, who described social rights in terms of social heritage and prevailing standards of civilized life, which in part had been, " - incorporated in the status of citizenship" operating in a given society, (Marshall 1950, p.47). Putting the definition into practice involves an analysis of this heritage and these standards, as a baseline against which the actual situation of citizens can be assessed and interpreted. "Policies to combat social exclusion", therefore would be identified and evaluated in terms of their function in delivering and promoting the social rights which are seen as part of that society's concept of citizenship.

The second part of Room's definition involves the kind of analysis developed in studies of multiple, persistent and apparently inescapable disadvantage - the work of Townsend, Wilson and others (for a review, see Robbins and Room, 1991). Persistent failure to deliver, failure to deliver a wide range of rights, or delivery in such a way as to reinforce lack of access to social rights would be critical criteria for the evaluation of policies.

The definition outlined by Tricart, on the other hand, appears to set the discussion of exclusion in the context of an idea of society in which the actions of governments both define and safeguard its conception of solidarity. The table attached to Tricart's note, therefore, designed to schematize the analysis of policies, suggests that there may be a direct correspondence between "social rights" and the policies developed by governments to implement them, (however successfully). But this is not, of course, necessarily the case. The prevailing political ideology in the United Kingdom, which will be discussed in the body of the report which follows, tends to define detailed "rights" in terms of the market, rather than some overriding principle of social solidarity.

The differences which I have tried to clarify here are not unimportant - part of the work of all the Commission's Observatories must be the refinement of a commonly understood "language" for the discussion and development of genuinely European ideas. They deserve further analysis and debate. But, in practical terms, the report which follows can accommodate both. It will follow the tripartite pattern proposed by Tricart -

Chapter 1: The Problem - how social exclusion, seen in terms of current views of citizenship, "social heritage" and legally-enforceable rights, is identified and debated.

Chapter 2-4: General Policies - the impact of general social policies, (employment and training, education, health, housing, social security, social services, urban policies), in relation to social exclusion. The material summarized in these Chapters will be of four kinds: firstly, description of the impact of a particular, general set of policies in relation to social exclusion;

secondly, data which illustrate the extent of that impact; thirdly, description of policies to remedy perceived negative effects; fourthly, data against which the effects of the "remedial" policies may be evaluated.

Chapter 5: Specific Policies - policies specifically implemented by Government, in an explicit attempt to promote integration or "insertion", or those generally identified by scientific or political debate as particularly relevant.

An additional Chapter 6 - "Britain in Europe" - attempts briefly to set the discussion of the UK in its European context, drawing on material in the Observatory members' reports, and the two synthesis reports by Graham Room.

The report will make no further reference to different possible interpretations of the definitions outlined here, but will concentrate on the evidence which exists in the UK about the existence of relevant policies, and their effectiveness. Clarification of the fundamental conceptual discussion will be for the Observatory as a whole, and will be developed in future reports.

1.1. THE POLITICAL CONTEXT

In the early months of 1992, all discussion of policy in the UK was coloured by the imminent prospect of a General Election. As usual, the key issue was seen to be the extent to which either main party could manage the economy. Maastricht assumed temporary significance, and defence was still important; but on the whole, foreign, European and defence policy were secondary. Inflation, unemployment, the continuing, deep recession - these were the issues which hit the headlines and engaged the electorate. In the social policy field, the future of the NHS, the standard of education offered to British children, and homelessness - the visible homelessness of young people on the streets of London, as well as the serious problem of families made homeless through mortgage default - were all questions which generated concern.

In the period leading up to the Election, one professional journal attempted to map the commitments of the different parties to policies relating to benefits and the personal social services. Part of their table is reproduced as Figure 1, below. It would be possible to extend this kind of partly hypothetical analysis over the whole of social policy. As a broad generalization, it is fair to say that Conservative policies emphasized individual prosperity and responsibility, competition and the free operation of market forces; Labour policies focused on redistribution, and the role of the state in promoting wealth for the whole of society. Criticisms of the former emphasized the casualties of 13 years of Conservative government, and the

FIGURE 1

POLICY SUMMARY: LOCAL SOCIAL SERVICES AND SOCIAL SECURITY

CONSERVATIVE	LABOUR
Local taxation: Community Charge ("Poll Tax") replaced by Council Tax in April 1993, containing both a property and a personal element.	Pledge to introduce a property-based local tax.
Budget increase for UK Social Fund * to £302 million.	Abolition of UK Social Fund loans, if possible in first Parliament.
Child Benefit uprated in line with inflation.	Value of Child Benefit to be restored, as if it had not been frozen in 1987.
New disability benefits introduced from April 1992.	Promise of a comprehensive disability income.
Guaranteed place on youth training schemes for 16-17 year-olds, but for most - effectively - no entitlement to benefit.	Pledge to restore benefit entitlement.
Pensions uprated in line with inflation.	Plans to restore link between pensions and average earnings; and for a new National Pensions Plan based on SERPS.
Will ratify the UN Convention on the Rights of the Child, "as soon as possible".	A Children's Commissioner will be appointed, to work across departmental boundaries.

* NB: UK Social Fund, the system of grants and loans available to meet the exceptional needs of people receiving Income Support.

SOURCE: adapted from Community Care, 2/9 January 1992, p.12 and 13.

progressive loss of a public ethic of generosity and concern for vulnerable members of society. The latter were attacked on grounds of cost, loss of individual liberty, and the lack of experience of government of potential Labour ministers.

There cannot in any real sense be said to have been a general public debate about "social exclusion", before or since the Election; but there are elements in current controversies which relate to policies of concern to the Observatory. In general, it is becoming clear that even the supporters of the market-led approach, which has dominated policy-making in the UK for much of the last thirteen years, accept that there is a significant minority whom these policies leave behind. Part of the Government's response to this realization has been a conscious attempt to strengthen "consumers'" rights in the social policy field.

1.2. THE CITIZEN AS CONSUMER

In July 1991, the "Citizen's Charter" was presented to Parliament - a White Paper detailing the content of a strategy for improving the responsiveness of public services to the wishes of their consumers. It was heralded as, and probably was, a personal initiative by the Prime Minister, which had generated a Government-wide exercise designed to identify aspects of all public services which could be improved.

" The White Paper sets out the mechanics for improving choice, quality, value and accountability. Not all apply to every service. But all have a common objective: to raise the standard of public services, up to and beyond the best at present available." (White Paper 1991, p.2.)

The principles outlined in the paper summarize what, " - every citizen is entitled to expect ": explicit standards of service; openness, and accountability; information in an accessible form; choice and consultation; non-discrimination and multi-lingual provision; convenience and accessibility; and redress - if only in the form of an apology or an explanation - for problems.

This is a very important document, not only for what it offers in terms of improvement of services - it appears to offer a great deal - but also for the definitions of citizenship and power it promotes. The "four main themes" of the document are listed as quality, choice, standards, and value; and if all of them recall the supermarket rather than the ballot box, presumably this is no accident. The social heritage which this interpretation of social rights draws upon is consumerism: the legitimate concern of the generally affluent with getting what they pay for.

Not all the policy areas which are relevant to the Observatory are susceptible of the Citizen's Charter treatment, but a number of important services are included, with indications of what the new deal should mean for "consumers" of social security, social services, the NHS, education, unemployment services, and rented housing. For all of them, increased access to information, the right to complain, increased public monitoring of services, and the implementation of performance measures will be the basis for improving quality and choice. Competition between services, wherever possible, will be the discipline which promotes value for money. "The Citizen's Charter is about giving more power to the citizen": the power to know, choose, complain, and take your custom elsewhere.

Although it is obviously too soon to evaluate the success or failure of the whole strategy, some of the questions which need to be answered are already clear.

1) How is power to be devolved to citizens?

Part of the rhetoric of the Charter is that "people should choose for themselves"; that decision-making should take place somehow in the community, and that big state monopolies should be broken up in favour of human-size institutions which will be responsive to local demand. Legislation which restructures local government finance, as well as the delivery of education, health services, community care, and housing is all set in this apparently consistent ideological context. Yet some commentators believe that the parallel reduction in the power of local government over the past decade or so may in fact concentrate power at the centre, leaving the individual citizen at an even greater remove from a significant say in policy:

"The desire to decentralize to smaller management units like schools or estates or colleges is laudable and attractive, but if local authorities lose all their significance, there will be nothing to set between small scale semi-representative bodies and a very powerful central state. Poor tenants or school governing bodies, or small voluntary organizations will be largely powerless in this situation." (Glennerster et al. 1991, p.413.)

2) Who sets the criteria for assessing "quality"?

The issues raised by "quality" in the provision of public services are for obvious reasons very different from those involved in buying a hat or having your car repaired, although the rhetoric might have us believe otherwise. Many services are most heavily financed by those - top-rate tax payers - least likely to encounter benefit offices, or social services, or public health care. They therefore have less direct experience of the quality of service offered, and less direct self interest in seeing it improve at the point of delivery. A strategy for improving services which depends on the self-interest of the "customer" will not work in a context which

depends, to some extent, on a distinction between the burden of payment and the concentration of use. The encouragement which has been given to the growth of private provision in a number of policy areas reinforces this distinction.

3) How can access and choice be assured?

Choice implies plenty; yet the application of market constraints to some services may actually reduce provision, or concentrate it geographically in the most profitable areas. Problems of access to services are of course related to the total supply - not just to information about distribution, or the right to complain about delays in provision.

4) Can the street-level bureaucracies comply?

Lipsky's study of public service workers - the "street-level bureaucrats" - underlines their role in regulating conflict and coping with complex situations, while always short of the resources they need to meet the apparently insatiable demand for increased services. Their aims may be ambiguous or internally inconsistent, yet in an important sense, " - they hold the keys to a dimension of citizenship," (Lipsky 1980, p.4.) His analysis foresees the effects of recession and fiscal crises in generating demands for cuts in services, and performance measures linked to inappropriate, quantitative criteria.

Increasing the power of people on the receiving end is indeed, in his view, a way forward for public services, but only in the context of support for professionals and a major political movement in favour of more humane provision.

Is this what the Citizen's Charter offers? In a society where the citizen is consumer, the citizen with least resources has the lowest kind of citizenship. Yet these -

the poorest and most vulnerable people - are the very people for whom many of the services have been designed. There is no question about the energy which is being put into the Charter exercise:-

" The Citizen's Charter is the most comprehensive programme ever to raise quality, increase choice, secure better value and extend accountability. We believe it will set a pattern, not only for Britain, but for other countries of the world... the Charter programme will be at the heart of government policy in the 1990s - ". (White Paper 1991, p.4.)

And the authors may well be right in anticipating that other states will be interested in adopting similar strategies. A study completed for the European Foundation for the Improvement of Living and Working Conditions in 1990 identified, " - a wave of interest in consumerism in the public services," (Epstein 1990, p.84), in many countries of the Community. The author includes a number of caveats in her conclusions: consumerism may simply be directed at middle-class approval; it can use the language of empowerment to introduce token improvements; it can be used to justify cuts in services, and so on.

Many of the issues raised by the Charter will be returned to in later sections of this report - particularly in relation to the debate about social welfare and community care in Chapters 4 and 5. Careful and clear monitoring of the strategy, as it develops in the UK, will be needed before it is possible to say whether the Charter offers anything real to anyone; and the document appears to promise this. It is particularly unclear at present how the least powerful, the poorest and the most vulnerable people are going to be able to make use of this kind of citizenship.

1.3. RECOGNIZING SOCIAL EXCLUSION

Discussion among citizens about the social state, and about access to the kind of citizenship it offers, is not of course confined to media accounts of debates between the main political parties. A wide range of voluntary organizations, trade unions and professional organizations, researchers and writers continually contribute to the analysis of social rights which forms the basis for lobbying for particular policy directions.

" A key element in the post-War vision of citizenship was participation in the life of the community of which one is a member. Poverty, which, in contrast, spells exclusion from full participation, diminishes the citizenship rights of a significant proportion of the community. These rights are all too often eroded further for black people, women and people with disabilities. Although children are not full citizens, the community acts as a guardian of their rights..." (Lister 1990, p. 66.)

It is in accounts of the kinds of barriers to access to full citizenship, of the discrimination and marginalization experienced by minority ethnic and disabled citizens, women, and perhaps elderly people that we may find a picture of social exclusion in the UK. Voluntary organizations concerned with the welfare of children defend their right to "visibility" in discussions of broader policy. Groups which work with disadvantaged young people press for action in relation to their employment, or housing, or health, or training opportunities, or income support, or social support.

Some of the groups mentioned above will be included in the discussion of policies in later Chapters. The point here is that "social exclusion" in the UK cannot be recognized simply in relation to prevailing policies; but from the interaction between those policies and the wider debate they are derived from or generate. Part of this wider debate depends on, and creates public

opinion. The best source of evidence about the extent of public support for the particular kind of social heritage implied by the term "Welfare State" continues to be the annual surveys reported in the British Social Attitudes series.

The most recent report (no. 8, published 1991, data collected in 1990) includes an analysis of trends identified in public attitudes to state provision of a range of services. As in previous years, the main priorities for state spending remain the services which are relevant to the lives of the majority: the NHS, the education service and state pensions for elderly people. But support for the state's role in providing other services is also clear, as the table reproduced as Figure 2 demonstrates.

While enthusiasm for state intervention in a range of social policy fields appears to have remained high between 1985 and 1990, support for more state spending to improve services - in principle, at least, from increased taxation - has risen steadily throughout the eighties. Whereas in 1983, 9% of respondents thought that the Government should reduce taxes, and spend less on health education and social benefits, only 3% thought so in 1990. Increasing taxes, and spending more appealed to 32% in 1983; 46% in 1986; and 54% in 1990. (Jowell et al. eds. 1991, p. 25.)

A number of the reforms in education and the NHS which will be discussed later were not in place when the fieldwork for the BSA report was done.

" The recent reforms in state education and the NHS have sought to introduce market principles into both services. In education...the move towards local management of schools, financed in relation to pupil numbers and combined with enhanced parental choice, is designed to bring the benefits of private schools to 'consumers' of state education. The introduction of internal markets into the NHS is designed to

bring about decentralization, also for the benefit of the 'consumer'...". (Taylor-Gooby 1991, p.27.)

FIGURE 2

Answers to the question: whether or not it should be the Government's responsibility to intervene in a number of policy domains, mainly to do with welfare provision -

% saying it should definitely or probably be the government's responsibility to..	1985	1990
.. provide health care for the sick	98	98
.. provide a decent standard of living for the old	97	97
.. provide industry with the help it needs to grow	92	91
.. provide decent housing for those who can't afford it	n/a	90
.. keep prices under control	91	87
.. provide a decent standard of living for the unemployed	81	77
.. reduce income differences between the rich and poor	69	71
.. provide a job for everyone who wants one	68	60

Source: adapted from - British Social Attitudes: the 8th. report, p. 24.

The report also makes the point that reactions to specific policy innovations would be difficult to isolate

in a survey of this kind. Nevertheless, although evidence for support for increased "consumer choice" is currently lacking, there is ample evidence for concern about the absolute levels of resources devoted to some key services:

"These [identified] priorities do not, of course, rule out the wish for greater choice....but there is little doubt that there is widespread criticism of the basic level of resources devoted to both health and education - ", (Taylor-Gooby 1991, p.27.)

1.4. SUMMARY

This report is about full participation in society, and the policies interpreted in social systems which create or reinforce that participation, remove barriers or repair damage. It involves a discussion of the prevailing definitions of participation, citizenship, inclusion and restoration of participation after an experience of exclusion; about the nature of the public debate about these definitions; and about where that debate can be found. This discussion will be very different for different Member states of the Community, but some of the factors which make it urgent are shared: a growing understanding of the impact of the economic and social exclusion which can be generated by unemployment; widespread anxiety about the costs of services and benefits which promotes the search for policy innovation; new evidence of growing intolerance towards migrants from outside the Community's boundaries. All of these, together with the well-known changes in European age profiles and family patterns, argue for the need for a common understanding of the meaning of social exclusion, the forces which create it, and the policies to combat it which work.

GENERAL POLICIES: A

2.1. EMPLOYMENT

The history of labour market policies, coupled with broader industrial policy and a prolonged recession have created a situation in which high and rising levels of unemployment continue to concern the Government, and the electorate.

"The seasonally adjusted level of claimant unemployment in the United Kingdom increased by 38,900 between October and November 1991 to 2,513,000. This was the twentieth consecutive month that unemployment has risen. The level is now 906,400 higher than in March 1990 when the current upward trend began... The unemployment rate in November 1991 was 8.8% of the workforce... The unemployment rate is higher than a year ago in all Regions of the UK." (DE 1992, p.S3.)

There is no argument about the fact that unemployment in the UK, having fallen steadily for some months previously, has increased since early 1990, and is likely to increase further. There is however a great deal of disagreement about how far it fell in the first place, and how the official figures are currently presented. This is not the place to resolve these debates: simply to note that whereas the Employment Department took the line that there had been only two (legitimate and technical) changes in the way unemployment was counted since 1979, plus five changes in the rules governing benefit entitlement (letter to the Economist, 8 September 1990), the independent Unemployment Unit has counted thirty.

"Mr. Jackson [Employment Minister] .. has produced a lower figure mainly by ignoring many changes in the

benefit rules. But even the the Employment Department seems unable to make up its own mind: as far back as 1986 its own monthly Gazette admitted to ten adjustments, some admittedly minor." (Economist 8 September 1990.)

The Economist goes on quite fairly to point out that the Government cannot take the credit both for weeding out illegitimate unemployment benefit claims and for reducing unemployment. A lower claimants count, in this context, does not mean more people in jobs. However, in 1990, the Employment Department published a comparison of the figures derived from the claimants count, and from preliminary analysis of the 1989 Labour Force Survey for which figures were estimated using the ILO definition. The comparison showed that while higher total figures are produced by the Labour Force Survey definition, the same general trend was revealed by both sets of data.

The statistics remain controversial, although the broad, economic consequences of unemployment - especially long-term unemployment - for families and individuals are not disputed. But correlations between unemployment and other factors which might contribute to social exclusion - poor mental and physical health, family breakdown, involvement in criminal activity, and so on - are notoriously difficult to demonstrate.

Basic data relating to unemployment are reproduced in Tables 1-3, in the Statistical Annex (A) to this report. They are broken down according to ethnic origin, Region, gender, age and duration. They show that despite the decline in the numbers of long-term unemployed people, in 1991 25% of unemployed men, and 20% of unemployed women had been out of work for more than a year, (CSO 1992, p.82.) In 1990, unemployment rates were highest among workers under the age of 20; but length of unemployment increased with age.

Unemployment rates for minority ethnic workers remain

higher than those for whites, although they have been falling at a faster rate since 1986. Unemployment among West Indian or Guyanese men, for example, fell from 26% in 1986 to 13% in 1990; but it remains nearly double the rate for all men (7%).

The most recent issue of Social Trends - the basic annual collection of government social statistics - comments that:

"Factors contributing to more prolonged periods of unemployment include a mismatch between the skills (and location) of unemployed people and those required by employers, the level of unemployment benefits, low economic activity and how the unemployed go about looking for a job." (Ibid. p.82.)

It follows from this analysis of the problem that government policies designed to overcome or reduce the impact of long-term unemployment will focus on these issues.

National policies to combat unemployment have continued along the lines established at the end of the '80s: support for the network of Training and Enterprise Councils set up in 1989; and extension and refinement of Employment Training and job-search measures.

"The Government's Guarantee to adults is for everyone aged 18-24 who has been unemployed between 6 and 12 months to receive an offer of Employment Training, a Job Interview Guarantee, an Enterprise Allowance, a place in a Jobclub or on Employment Action.

The Government's Aim is for everyone under 50 who has been unemployed for over two years and all people with disabilities, to receive an offer of Employment Training, a Job Interview Guarantee, an Enterprise Allowance, a place in a Jobclub or on Employment Action." (PQ 1991 a.)

Brief details of each of these schemes for unemployed

adults is attached at Annex B; policies specifically aimed at youth unemployment will be included in the next section.

Benefits

General issues relating to benefits available to people on low incomes will also be included in later sections. But it is important, in any evaluation of the current policies which are designed to diminish or remove the excluding effects of unemployment, to look at how the benefit position of unemployed people affects their prospects of full integration. One major concern of Government has been to remove the disincentive effects of benefit structures, and eliminate, as far as possible, the "traps" which might have discouraged people from seeking work in the past. The aim has been to remove elements in the system which might have been barriers to economic re-integration. The effectiveness of the controversial "actively seeking work" rule (introduced by the 1989 Social Security Act) in promoting job-search through benefit sanctions has been questioned as a result of research into awareness of the rule among claimants, (Thomas and Ritchie, 1991; Low Pay Unit, 1991.)

The second respect in which benefits may or may not alleviate exclusion is through the standard of life and participation in the life of the community which they permit. One small-scale study of thirty families, published by the Department of Social Security in 1990, examined in detail some of the financial effects of unemployment on family life. Firstly, there was the impact on living standards:

"Almost without exception, the families felt that the standard of living they had in unemployment was lower than when they had been employed. Many families described what they saw as a continuing decline, at least for the first two or three years of unemployment, until they hit 'rock bottom'." (Ritchie 1990, p.v.)

Evidence is also provided about the extent and nature of the psychological effects of unemployment, negative effects on the children and on marriages, as well as on the variation in coping strategies which families employed.

Employment and training measures

Two principal criteria are used for evaluating these schemes, both by government and outside observers: take-up/participation rates, and outcome measures related to success in finding jobs.

"An average of 215,000 trainees in training on Employment Training was planned in Great Britain in 1990-91. An average number in training of 196,000 was achieved." (PQ 1991 b.)

The most recent Employment Training (ET) Leavers Survey published by the Employment Service relates to people in Great Britain leaving the scheme between February 1990 and January 1991, and shows that 58% of leavers were unemployed three months later, while 34% had found jobs (including 12% who were self-employed or working part-time). These figures are rather worse than those for the period up to July 1990. Some 43% of leavers said that during their time on ET they had worked towards a qualification, while 57% had not (Unemployment Unit 1992).

The Job Interview Guarantee Scheme was launched as a national programme in December 1990, and by April 1991 was available in most areas of Great Britain. In the next six months, more than 66 thousand unemployed people had used the scheme, and some 25% had been placed in jobs. (Ibid.)

The Restart scheme offers help to people who have been

unemployed for 6 months or more. Of the 435, 688 people who attended the effectively compulsory Restart Interview between April and June 1991, about 1% were placed in jobs, and a further 16% were referred to other Government schemes. The Restart Course is also effectively compulsory for claimants who have been unemployed for two years or more, and have not taken up the offer of a training place: three quarters of people starting the Course in the six months to June 1991 had arranged a "follow up", (Unemployment Unit, 1991 a.)

Employment Action aims to provide an integrated work experience, training and job-search package for adults unemployed for more than six months. The first entrants joined the scheme in October 1991; help for 30,000 applicants is planned by March 1992. (PQ 1991 c.)

2.2^c. YOUTH EMPLOYMENT

Many of the educational innovations of the past decade have related to the growing official interest in young people as workers, in the context of the "vanishing youth labour market", (Ashton and McGuire 1983.) The Technical and Vocational Education Initiative, for example, was introduced in 1988 in order to stimulate curricula changes which would make education in schools, "more relevant to working life", (Employment Minister, John Cope, quoted in Employment Gazette Vol.97, p.57.)

Youth Training replaced the former "YTS" scheme in June 1990, which in turn had replaced the Youth Opportunities' Programme in 1983. At the time YTS was introduced, it was presented as an important new chance for young people to gain high-quality training for up to two years, and vocational qualifications. In fact, it never lost its controversial image as a resource for unemployed young people who could find nothing better to do, and - in the eyes of some observers and participants - a source of

cheap unskilled labour for employers, and a means of removing numbers of young people from the unemployment register. It incorporated an equal opportunities policy, but extensive monitoring by the Training Agency (formerly, Manpower Services Commission,) demonstrated that existing inequalities in the labour market were reflected in the experience of trainees.

Data relating to the operation of YTS were published regularly by the Training Agency, and in the Department of Employment's Employment Gazette. Provisional figures for 31 March 1990 indicated that 359.5 thousand young people were in training, on the YTS. How well the scheme appears to have performed depends crucially on the period chosen for analysis, and on the assumptions behind various categories of outturn. The "YTS 100% Follow-Up Leavers Survey" was the Training Agency's monitoring system for the scheme. On the basis of the evidence provided by this survey, it has been officially claimed that over 85% of young people who completed their training job went into jobs, further education or training, while 65% gain a vocational qualification. However, for the period between July 1987 and June 1989, only 60.9% of YTS leavers had full-time employment, three months after leaving; 3.5% had part-time jobs, 3.5% had gone into full-time education, and 16.2% were unemployed. Only 36.4% had left YTS with a qualification, (Unemployment Unit 1990a, p.1).

A further factor which complicates the statistics is the number of young people who left the course early. The Training Agency survey produced about a 52% response rate: results in the middle of 1990 showed that, of those who replied, 66.7% were in work, and 14% were unemployed. However, these figures include trainees who have simply moved from one scheme to another, and exclude those who failed to complete their scheme. Between January 1988 and December 1989, 66.6% of YTS leavers were early leavers;

reasons included: getting a full-time job (43.5%), going on another YTS (9.8%), illness (4.5%), and dismissal (7.9%). Reasons which reflect directly on the value of the scheme as perceived by participants include: "not getting the training needed" (14.6%), "unhappy with the way scheme run" (15.6%), and "not getting help/advice needed" (7.4%). Nearly a quarter of early leavers said that they had left partly or wholly as a result of the low rate of pay (23.4%) (Unemployment Unit 1990b, p.5).

The new YT scheme has been heralded as, and is designed to be, more closely linked to the needs of employers than its precursor. One of the aims of the scheme is to secure the "cost-effective delivery of the Government's Youth Training Guarantee", i.e. to implement the existing guarantee of a training place to all school-leavers not in employment or full-time education at less cost to the Exchequer by stimulating greater participation and funding from the private sector. The role of Training and Enterprise Councils (TECs) is central in promoting and negotiating the scheme.

There are four respects in which these schemes are relevant to consideration of the social exclusion confronting young people. Firstly, there is the question of their effectiveness in overcoming youth unemployment, and providing young people with the real training they need to enter the job market. Criticisms have included those outlined above: poor quality of training offered, no guarantee of a real job at the end of the course, high levels of disappointment and drop-out among participants, and so on. Secondly, there is evidence of dissatisfaction with the level of pay offered: to what extent are low rates of pay on YTS and YT keeping young people and their families on the margins of poverty?

Thirdly, there is the problem of the group of young people who do not attend the scheme, and who "disappear"

from the statistics, only to reappear in the debate about homelessness and begging. An attempt by a youth unemployment pressure group to estimate the numbers of young people actually unemployed but excluded from the official unemployment figures concluded that during January 1990, about 18,000 young unemployed people received some form of assistance or temporary aid, but 45,000 were receiving no assistance at all (Unemployment Unit 1990c). Attendance on a training scheme has been virtually compulsory for 16 and 17 year-olds since the Social Security Act 1988 removed general entitlement to Income Support from unemployed under-18s - a change justified on the grounds of discouraging benefit dependency in the young.

Finally, there is the question of the extent to which the class and/or income background of the young people coincides with or is relevant to attendance on YT. No official attempt is made to collect statistics which would provide information about the class background of participants, but one study has tried to establish the "inner city dimension" of the youth labour market, using 1981 Census data, and data from the Youth Cohort Study of England and Wales, (Gray et al.1990). The social characteristics of the areas where respondents had attended school were classified according to six social disadvantage indicators, (unemployment, ethnic background, household amenities, family structure, family size and "low" class), and one measure of advantage - "high" social class.

By this means a sample of Cohort Study respondents were identified with "inner city" disadvantage, and their routes through YTS and into work were compared with non inner-city respondents. The results showed that living in the inner-city did not significantly affect take-up of further full-time education or YTS: for YTS, the key variables were differences in educational attainment, in

social background, ethnic background, and gender. However, "being in the 'inner-city' did appear to matter with respect to gaining a full-time job or being unemployed." (Ibid. p.463.)

Some 300,000 young people in Great Britain were attending Youth Training schemes in February 1992. The YT National Follow-up Survey results for April-September 1990 show that 65% of respondents had found jobs, 47% had gained a qualification, and 20% were without jobs or further training, (Unemployment Unit 1992). More recent figures suggest that 83% of those completing their training found jobs or places in further training or education. In an attempt to ease the transitions between education and training, encourage more young people to undertake job-related courses at or after school, and give, "business leaders .. a greater say in the way schools and colleges prepare young people for working life", a package of measures was launched in 1991 incorporating new kinds of qualification and an expanded role for TECs, (DE 1991c, p.326.)

Partly as a response to controversy about the situation of 16 and 17 year-olds who were unable to find a YT place, and had no work, the Department of Social Security undertook a programme of research designed to establish the effectiveness of the Severe Hardship Payment scheme, (DSS 1991 a, p.47.) The survey commissioned from MORI found that young people most at risk of hardship were receiving the payments, but that the system should be improved. Payments in September 1991 were more than double the total for the equivalent period in 1990, and some observers believe this reflects a growing crisis for "excluded youth", (Unemployment Unit 1991 b; Kirk et al. 1991). The official view is that this reflects improvements to the scheme introduced in response to MORI's findings.

2.3. EDUCATION

Policies in the field of primary and secondary education since 1988 have focused firstly, on introducing elements of competition and consumer choice into the local provision of state education; and secondly, on the introduction of a National Curriculum, formal tests and more "traditional" forms of teaching at primary level. The apparent contradiction between the concentration of control in the centre, and devolution of power to parents was mentioned in Chapter 1; (see Glennerster et al. pp. 394ff.)

UK figures for school leavers' examination achievements in 1988/89 are included at Table 7. In 1989/90, 55.7 % of 16 year-olds in England and Wales intended to stay on at school, or undertake some other full-time further or higher education; another 10% left school for Youth Training, while 21.1% were "available for employment" (CSO 1992, p.59.)

The far-reaching changes introduced by the Education Reform Act 1988 are being implemented progressively, and it is too soon to assess the impact they may have on the opportunities open to school-age children. In November 1991, the Secretary of State for education made public the results of the first national tests of seven-year-olds: about 25% of those tested were unable to read adequately. These findings fuelled the debate which has surrounded a report on the standard of teaching in primary schools, released in January 1992, (DES 1992):

"Both Labour and the Tories claimed their views were vindicated in a report on teaching in primary schools. The government said it confirmed the damage done by 'trendy' teaching methods. Labour said it confirmed that twelve and a half years of Tory rule had lowered education standards." (Economist, 25 January 1992, p.29.)

During the late 1970s, debate about class bias in higher

education was stimulated by the work of a national survey in 1972, and subsequent work undertaken by Halsey and his associates (Halsey et al. 1980). The same issues were explored by Williamson, using OECD data in 1981, to argue that the phenomenon of class bias was persistent and widespread. More recent analyses have concentrated on low income, rather than class as a key variable in the access debate: in 1988, Low, for example, found that those from the lowest income levels were six times less likely than those with the highest incomes to be enrolled in higher education, (Low 1988). The continued association of social class background and higher educational attainment has been demonstrated by figures in the most recent General Household Survey, for 1989, (OPCS 1991, pp. 20-24.)

The educational maintenance system, on which students primarily depend, is designed to equalize chances once a place in higher education has been achieved. However, a review of evidence collected from local Citizen's Advice Bureaux in 1991, suggested that the Government's benefit policy towards students, coupled with the lack of available vacation jobs, might have the opposite effect of contributing to the exclusion of children from poorer backgrounds from higher education.

"Barriers to undertaking or continuing studies

NACAB is concerned that the withdrawal of benefits, combined with the lack of jobs, is acting as a disincentive to study for poorer students. In a number of cases reported to CABx, prospective students are deterred, and existing students are considering giving up - simply because of lack of money....In direct conflict with the government's policy to increase student numbers, this could not only undermine equality of access to higher education, but also could reduce the pool of skilled and educated workers which will be needed in the future. (NACAB 1991,p.10.)

GENERAL POLICIES: B

3.1. HOUSING

The impact of general housing policies in relation to social exclusion, and their interaction with unemployment and recession in the economy, are seen at their most dramatic in the figures for homelessness and mortgage repossessions. The growing visibility of young homeless people in the streets has become the most common image for exclusion from the prosperity enjoyed by the well-off in Britain. The fundamental housing policies of the current Government involve encouragement of individual home-ownership, decreasing local authority provision of housing, and encouragement to housing associations as the providers of low cost housing.

"More people own their own homes. Over two-thirds of dwellings are now owner occupied." (CSO 1992, p. 145.)

Nearly 16 million people owned the homes they lived in in 1991, more than double the number for 1961; 67% of the housing stock was in owner occupation. Nearly 1.5 million council houses were sold to tenants in the 1980s; 5.3 million local authority or new town dwellings remain. Something over 1 million dwellings were classified as unfit for human habitation in 1986 - the most recent available figures. (CSO 1992, Ch.8.)

Statistics relating to households accepted as homeless in Great Britain in 1989 and 1990, and to reasons for homelessness in the second quarter of 1988 and 1991 (for England only) are in Tables 4 and 5 in Annex A. In the second quarter of 1991, 4300 households were accepted as

homeless because of mortgage arrears - 38% more than in the equivalent period in 1990. Numbers of mortgage repossessions, of course, only represent the visible end of the hardship created for families by the increasing cost of increasing numbers of mortgages. The 1989 OPCS survey of living standards during unemployment showed that people who suddenly confront reduced incomes do not divest themselves of their property in the order in which they acquired it. First of all, they cut down on food, clothing and entertainment, (Heady and Smyth 1989.)

Census figures indicate that some 2,700 people in England and Wales were sleeping rough in April 1991 - nearly half of them in London (CSO 1992, p.145.) Numbers of mortgages, arrears and repossessions between 1981 and 1991 are at Table 6. The figure for properties taken into possession in 1991 - 36.6 thousand - is based on mortgage lenders returns for only the first half of the year, and compares with 16.6 thousand for 1990. Arrears are showing the same steeply upward pattern, (CSO 1992, p.154.) The Council of Mortgage Lenders has attributed this increase to the recession in the housing market, with rapidly increasing mortgage interest rates causing, -

" - substantial difficulties for many borrowers, and added to the pressures faced by those with other problems, such as illness or relationship breakdown... The growth in unemployment affects the situation in two ways -

a) It is clearly more difficult for those who become unemployed to meet their mortgage payments, especially where income support is not available;

b) The effect on housebuyer confidence is helping to keep the number of transactions in the market at a low level... In the past, borrowers having difficulties in meeting their repayments were able to sell their dwelling and purchase a cheaper one..." (Council of Mortgage Lenders 1991.)

The urgent need for policies to alleviate these problems has been recognized in a number of Government initiatives. In relation to homelessness, the Government announced a one-off allocation of £132 million in November 1990, to alleviate homelessness in London and South East - the most recent of a series of emergency allocations, including the three-year "rough sleepers' initiative" launched in June 1990. Altogether, some £397 million have been devoted to this issue since November 1989. The funds were of course welcomed in principle by organizations working with homeless people: criticisms in the press and from pressure groups focused on the lack of resources offered to areas other than London; unclear objectives for the money; and the obvious disparity between the scale of the problem identified by some research, and the numbers of new lettings implied by the funds. (Roof Sept-Oct 1991, pp.17-19; Foster and Burrows 1991, p. 30-31.)

Mortgage arrears have also been the subject of recent policy initiatives. In November 1991, the Government worked out a scheme with housing associations, whereby they would rent currently empty, repossessed properties, and let them out to homeless families in temporary accommodation. At the end of the year, negotiations between mortgage lenders and the Government resulted in a package which meant that interest payments made on behalf of Income Support claimants would be paid directly to the lenders, in return for a number of concessions by the companies. In particular, if repossession seemed inevitable, lenders would attempt to arrange for the repurchase of the house by themselves or a housing association, leaving the former owners *in situ* as tenants, (Economist 21 December 1991, p.27-28.)

In addition, the Government has attempted to put life into the housing market by suspending the 1% stamp duty on house purchases up to £250,000 (19 December); and in January 1992, some building societies decided unilaterally to lower mortgage interest rates, to the

especial benefit of the first time buyer.

It is too soon to evaluate the effects of these measures, although some popular newspapers promptly announced the rebirth of the housing market in the South East. The statistics produced by the Council of Mortgage lenders are the best indicator of what is happening to arrears and repossessions, and the first relevant set will be available in the autumn of 1992.

Healthy housing.

Apart from the attempts which have been made to link Census data on poor housing to other indicators of disadvantage, which will be discussed below, a number of studies have suggested a direct connection between inadequate housing and poor health. Historically, of course, there has been no argument about the relationship: it has been claimed that the Victorian engineers who installed mains drainage in British cities and homes had a greater impact on the nation's health than the discovery of penicillin. And today, there is little dispute about the importance of environmental health. Some local authorities working on poverty strategies in the '80s included environmental health indicators in their discussion of housing need (Balloch and Jones 1989, p.42): Bolton, for example, in planning a housing strategy for the Borough, looked at levels of pollution in relation to EC standards, as well as "traditional" environmental health issues like infestation and food standards, (Bolton Metropolitan Borough 1986, p.38.)

But research interest in directly unhealthy dwellings has revived more recently, following the post-War period when the massive slum clearance programmes were assumed to have removed the worst health hazards, and the National Health Service would do the rest. A review of literature

on research into the links between poor housing and poor health suggested that residents of the worst housing on no longer "new" estates in some of the most deprived areas of Britain experience above average levels of respiratory disease and cold-related ill-health, and that these problems are especially marked among children, (Blackman et al. 1990).

The special health problems of homeless people have also been the focus of a number of studies. A joint report by the British Medical Association and the Health Visitors Association focused on the physical, emotional and developmental effects of temporary accommodation on children, (BMA/HVA 1989); and the health needs of "hidden", single homeless people were examined in an evaluation of two Government-sponsored pilot projects in London, (Williams and Allen 1989).

3.2. HEALTH

A health strategy for England was set out in 1991 in a consultative document, presented to Parliament by the Secretary of State: The Health of the Nation, (Green Paper 1991.) This document was based on the proposition that the reformed NHS, and the new strategic role of health authorities, set the stage for a targeted approach to improvements in health.

"It sets in train the generation, effectively for the first time in England, of national and local health objectives and targets within a strategic framework." (Green Paper 1991, p.iv.)

Separate approaches were prepared for Scotland, Wales and Northern Ireland by the other health departments.

The document represents an important stage in the development of the monitoring and review functions of the NHS Management Executive. A strategic approach to NHS research and development was also announced, and a

framework published soon after the main consultative document, (NHS Management Executive, 1991). Both publications emphasize the development of outcome measures, evaluations of effectiveness including cost-effectiveness, and the need for coordination and rational planning.

Health policy aims to promote good health, prevent bad health, and maximize the effective use of resources allocated to health service provision. Indicators of success include throughput (the number of cases dealt with by services), uptake (the extent to which services are used by people needing them), and outcome (the result, in terms of improved health and quality of life, of treatment). The concentration of poor health, disability, chronic or repeated sickness or early death in identifiable groups would have obvious implications for the deployment of resources.

The basic national health indicators all reflect improvements in nutrition, housing, hygiene and health care which have developed since the beginning of the century. Life expectancy, (estimated at 71.9 years for males and 77.6 for females born in 1986,) is expected to rise; perinatal and infant mortality both declined sharply between 1900 and 1960, and although both trends levelled off in the 1980s, this may be attributable to the small room left for improvement, (CSO 1990, p.112). Deaths analysed by selected causes showed marked overall improvements in 1988 over 1951 in relation to respiratory, infectious and all other diseases except circulatory diseases (which accounted for nearly a half of all deaths in 1988), and cancer. National debates in the late 1980s centred on food-related disorders: medical concern nationally focused on heart disease, the spread of HIV/AIDS, and substance and alcohol abuse.

Some statistics which measure the impact of the health

services in ensuring the nation's health, and equal access to health and health care are included in the most recent edition of Social Trends. In general, the figures continue to show improvements in relation to life expectancy, potentially avoidable deaths, and nutrition for the population as a whole. But these health gains are not experienced equally by everyone. Infant mortality, for example, is not evenly distributed across the population:

"..in 1990 the infant mortality rate [for the UK] fell to 7.9 per thousand live births, representing a fall of one third compared with 1981. Despite these improvement in infant mortality, differences between the social classes remain. Rates are higher for those whose fathers are in the unskilled or semi-skilled groups.. Indeed, infant mortality rates were over three quarters higher among babies whose fathers were unskilled than those whose father had a professional occupation." (CSO 1992, p. 123.)

Figures for chronic illness and disability among adults in 1989-90 also indicate health divisions along class lines. Data from the General Household Survey (GHS) show that reported prevalence rates for a range of long-term conditions is usually highest among unskilled manual respondents, and lowest among the "professional" group. The commentary notes that a similar pattern has been observed since 1972 (CSO 1992, p.126). The most recent edition of the GHS explains the problems with the kind of self-reported and subjective assessments on which these rates are based. Nevertheless,

" - for certain purposes it is more appropriate to measure people's perceptions of health than their clinical condition. Perceptions are thought, for example, to be more meaningfully related to demand for health services. They also provide a fuller picture of the health of the population than can be obtained from existing clinical or administrative records.." (OPCS 1991, p.99)

While acknowledging that there are difficulties in interpreting this kind of data, a range of commentators

including medical experts as well as the "Poverty Lobby" have argued for a programme of research and targeted provision which would break the link between low income and poor health, (see for example, Davey Smith et al. 1990; Cole-Hamilton 1991.) Most recently, a study undertaken by the Food Commission and National Children's Home looked at the food-buying behaviour of a national sample of families living on low incomes. The nutritional value of the families' choice of foods, and their reasons for the choice were explored in interviews.

The study found that no child or parent in the survey was eating a healthy diet; that healthy food costs more; that despite spending a large proportion of their incomes on food, these families spent less than the national average; and that poor diet correlated directly with food expenditure. There was no evidence to suggest that these families were ignorant about what a healthy diet would be, (NCH 1991). Family Expenditure data for 1990 shows that two-parent two-child families with incomes of £275 a week or less spent on average at least 20% of their income on food, compared with (at most) an average of 14% for families with incomes of £550 or more; but still spent nearly one fifth less than the national average, (CSO 1991, Table 11.)

Health reforms in 1990/91 have focused on improved efficiency in the NHS. Legislation introducing an internal market in health care was passed in July 1990, and took effect from April 1991. There have been some preliminary studies of how the reforms appear to be working: some waiting lists, but not all, are falling; "throughput" has increased in some treatment areas; patient satisfaction with semi-independent NHS trust hospitals seems to have increased, (Economist, 18 January 1992, p.25.) However, it is too soon to say accurately how far the reforms will change the pattern and nature of services, and some of the factors which have been hailed

as "improvements" - such as the increase in the number of patients treated - may have little or no connection with the reforms (The Guardian newspaper, 7 February 1992.)

As part of the "Citizen's Charter" exercise, a "Patient's Charter" has been devised, and widely distributed in England (DH 1991). This interprets the aims of the Charter in the context of the health services, and has the characteristics already described in relation to the main document. It sets out the "seven existing rights" to health care, and adds three new ones: the right to information, to treatment in under two years, and to complain. And it establishes "nine standards of service" - to be monitored, presumably, by reference to patient complaints - which do indeed represent a description of ways in which treatment could be less unpleasant or degrading. What it does not do is talk about supply or distribution.

3.3. URBAN POLICY

The association of decaying urban centres with multiple deprivation has been the subject of concern to successive governments for at least two decades. A series of policies designed to regenerate the inner cities have been implemented, and commitment to "Action for Cities" was restated by the present government in 1988.

Throughout the '80s, much of the evidence for the condition of life of people in inner urban areas was derived from the "Z-score" analysis of 1981 census data. Suitable indicators for a similar exercise using 1991 data are being developed by the Department of the Environment, and the results will be published later this year.

Recent evidence relating to the extent and nature of urban deprivation - one indicator of the well-being of

the inner cities - was provided by the "Breadline Britain" survey (described in Chapter 4). Responses from a sample of people living in deprived urban areas were separately analysed in order to establish their material circumstances and their perceptions of the quality of life available to them.

"The cumulative impact of this environmental, material, health and employment deprivation is marked in terms of the psychological well-being of those living in the inner cities. Three in five say they feel poor all the time (20%) or sometimes (40%). Fully 50% feel that, looking back over their adult life, they have lived in poverty by the standards of that time. One in three feel depressed due to lack of money, and one in five express a lack of hope for the future. One in three (32%) say there have been times in the past year when they have felt isolated and cut off from other people because of lack of money." (Gosschalk and Frayman 1991, p.400.)

The problems of the inner cities - industrial decline, high unemployment, homelessness and poor quality housing, low educational achievement, poor environment, and so on - are thrown into sharp relief in London by the inequality which exists there. While a proportion of the residents enjoy a high and rising standard of living, other families with the lowest incomes may have seen their opportunities and surroundings decline (see, for example, Low Pay Unit 1992, p.15-16.)

The Action for Cities Programme, launched in 1988, was represented as a coordinated attack on 57 areas of inner-city decline by a number of central government departments. Components in the Programme have included the transfer of local training responsibilities to "industry and business-led" Training and Enterprise Councils; support for Urban Development Corporations; the setting up of Task Forces and City Action Teams; a revamped Urban Programme, with increased emphasis on economic development; a range of grants targeted on the priority areas. The majority of the key measures emerged

from the Department of Employment, the (then) Department of Trade and Industry, and the Department of the Environment.

Figure 3 is adapted from the cover of a brochure produced by the Department of the Environment, describing the latest set of inner city initiatives, "City Challenge", launched by Michael Heseltine, then Secretary of State for the Environment, in May 1991 (DOE 1991). It includes many of the key phrases, and actors which have figured in the range of policies introduced by this Government: partnership with local business, the private sector and housing associations; action, commitment and opportunity. But while it retains a number of the same features as before, it is put together as a new "comprehensive action programme", designed to breathe life back into the urban policies of the late 1980s, which were seen by some observers to be flagging, (see, for example, Gosschalk and

Co-operation
COMPETITION

city action teams

E S T A T E A C T I O N

opportunity

in partnership with local business

city action teams

c o m m u n i t y c o m m i t
m e n t

Private Sector Housing Renewal

housing associations

CITY GRANT

DERELICT LAND GRANT

c o n c e n t r a t i o n

city action teams

opportunity

in partnership with local business

FIGURE 3

Frayman 1991.) It also, crucially, gives a higher profile to collaboration with local government.

The programme is built around three principles:

*** cooperation**

Authorities which participate are expected to put together integrated area development plans, involving a wide range of local actors, and enter into a contract with central government and the other "key partners" - the Housing Corporation, the private sector, and other local participants - about implementation.

*** concentration**

Since the 1960s, the notion of area-based positive discrimination has been part of urban policy. Targeting areas in greatest need can provide models and encouragement for others, while providing the impetus for change which may reverse apparently inescapable decline.

*** competition**

This principle is perhaps the newest of the three in this context: in an attempt to get away from "the mechanical allocation of urban resources", based presumably on demonstrable need, the Government has instituted a system of competitive bidding for funds under the programme. In the first round, eleven authorities out of the fifteen invited to apply -all of them, urban priority areas - were successful.

Each of the successful authorities will receive on average £7.5 million per annum for five years, drawn from existing government programmes: Estate Action, the Urban

Programme, City Action Teams (responsible for coordinating government support for the chosen authorities), City and Derelict Land Grants, the Housing Corporation and Private Sector Housing Renewal. In the second round of City Challenge, all 57 urban priority areas will be invited to apply for funding starting in 1993/94; and although the promotional literature expresses the competitive element in terms of the originality and creativity of the action programme proposed by the authority, it is not impossible that the evidence which will be available from census data about the relative deprivation of urban areas may play a part in the selection.

The first, pilot round of City Challenge, and subsequent rounds are to be monitored and evaluated. In addition, at the end of 1992, the results of an important, eighteen-month study of the whole "Action for Cities" initiative will be available.

A joint team of researchers from Liverpool and Manchester Universities has undertaken an extensive evaluation of all the components of the policy, incorporating statistical analysis of expenditure data from all the priority areas plus about 60 other areas, and data at ward level from Merseyside, Greater Manchester and Tyne and Wear; data on outcomes have been collected using performance measures; and surveys have been undertaken of local businesses and households, as well as of local designers and deliverers of services. Information dating back to 1977 has been collected as background to the evaluation of programmes operating between 1988 and 1991.

At the level of local government, authorities' attempts during the '80s to develop integrated packages of measures to combat poverty and deprivation, within their rather limited statutory powers, have been monitored by the Association of Metropolitan Authorities, (Balloch and

Jones 1990.) Typically, urban, predominantly left-wing authorities have been involved in constructing "poverty strategies" comprising income maximization for claimants, local economic development, welfare rights advice, and greater decentralization of services and user-participation. Given the organizational problems involved in implementing packages of this kind in the context of traditional, local bureaucracies, and the atmosphere of constant change and attack at local level which Government legislation has created, it is not surprising that their achievements have been limited. Nevertheless, they have been important in promoting the notions of integrated action and user-control of services, and in altering the centre of gravity in service provision towards the most needy.

All of this section, so far, has focused on urban areas. Targeting particular kinds of area, like particular groups, carries the danger that other kinds of deprivation will be overlooked. For this reason, the Church of England commissioned a companion study to the influential "Faith in the City" - a study of urban deprivation published in 1985 - which would concentrate on the problems of rural England. The report, "Faith in the Countryside", met with a predictably muted response. Despite the evidence it presents of the breadth and depth of change in rural areas, and the level of deprivation experienced by people left behind as employment and services have left, the political will to take action appears to be weak at both central and local levels. The report describes this as the "rural dilemma".

" The scene as we have noted is changing, and in one direction: local village employment has declined; housing has become more difficult; schooling has been grouped, with transport needed for it; post offices and halls have often been under the threat of closure, or have actually closed; local transport has declined to a point of uselessness... Many of the people who are most affected by these changes are the least powerful and articulate - "
(Archbishops' Commission 1990, p.124.)

The report's analysis of the character of rural politics, and its role in underplaying the nature and extent of rural deprivation is partly based on a study by Young and Mills (Appendix G to the report) which identifies integrated rural development as the key strategy used by the Countryside Commission in coordinating local government initiatives, and combating rural decline.

GENERAL POLICIES: C

4.1. SOCIAL SECURITY

Current rates, applicable until April 1992, for the principal insurance and means-tested benefits are shown in Annex C. The extent to which the social security system is preventing social exclusion, by protecting the incomes of unemployed, elderly, sick, disabled or disadvantaged people at a level consistent with the social heritage of the community, has traditionally been measured in the UK in three main ways: by reference to government statistics on low or below-average incomes; in relation to the proportion of the population dependent on the "safety net" of the guaranteed minimum income; and through surveys of perceived poverty.

An estimated 4,155 thousand people in Great Britain received income support in 1989/90, compared with 4,215 thousand in the previous year, (CSO 1992, p.94.) The next set of government statistics showing Households Below Average Income (HBAI), relating to 1989, will be published in mid-1992. This biennial series has been the subject of considerable controversy since it replaced the Low Income Families series in 1988. Following a "stock-taking review" and consultations with experts including the Institute of Fiscal Studies, an official working group reported in November 1991 (DES 1991 b.). The Secretary of State for Social Security announced his acceptance of their recommendations in full on 12 December. Some 45 improvements to the clarity, utility and accuracy of the tables have been agreed. They will be published annually from the 1989 figures onwards; 1979 will be adopted as the baseline for the series; and the coverage of HBAI is to be adjusted so that it relates to the whole of the UK, and not Great Britain as in the

past, (PQ 1991d.)

These changes meet a number of the points raised by the Select Committee on Social Services (later, Social Security) on the new series. However, the Government has not conceded to the Committee's request for a continuation of the Low Income Families series, and has repeated its objections to the levels set for Income Support being used as a kind of poverty line, (DSS 1991 c, para.7).

Nevertheless, a report was prepared during 1991 for the Select Committee by the Institute of Fiscal Studies, which attempted to reproduce the 1988 Low Income Families figures from raw data provided by the DSS.

"At an aggregate level, the tables for 1988 continue the trend seen in earlier years of HBAI analysis, namely that of significant growth in real disposable income for the population as a whole, coupled with much smaller growth for those on lower incomes..." (Social Security Committee, 1991, p.vi.)

The Committee went on to deduce from the disaggregated figures that pensioners and lone parents were faring relatively worst; but the Government's response, in July 1991, warned against too much reliance on year-on-year changes calculated from Family Expenditure data, (DSS 1991 c, para.5). The announcement of improvements to the HBAI series also promises an examination of ways of improving the basic data from which it is drawn (PQ 1991d). It remains to be seen whether the new, improved statistics will satisfy all the reservations which have been expressed about the adequacy of official data for providing an insight into the situation of the poorest families in the UK; (see, for example, Townsend 1991.)

It would be wrong to suggest that the reforms of social security in the late 1980s, and subsequent policy

innovations have been explicitly directed at correcting elements in the system which were failing to prevent social exclusion, or actually creating it. It could be argued that government concern to remove disincentives to work, to reduce dependency on benefit, and to increase "consumer satisfaction" through the Citizen's Charter is relevant to some interpretations of what exclusion means. However, for many commentators, a more important indicator is the standard of life offered to the significant minority which is dependent on benefits, and the kind of life the benefits "safety net" implies.

During 1990, a second "Breadline Britain" survey was undertaken. The situation of a national sample of adults was assessed against a list of perceived "necessities" of life; and some of the results of this survey are shown below, in Figure 4.

This is not the place to resolve the arguments for or against the methodology used, as a means of arriving at a definition of "poverty". But the survey does provide very useful evidence about the prevailing view in Britain of an acceptable minimum way of life, and the extent to which people on low incomes, including benefit incomes, are thought to be able to achieve it. Five main groups were identified among people lacking three or more necessities: unemployed or low paid people, pensioners, lone parents and families where one member was infirm or disabled.

Finally, there have been further evaluations undertaken of the UK Social Fund - the controversial system which, with Income Support premia, was partly intended to fill the gap left by the abolition of the Single Payments scheme (one-off payments for emergency needs) in 1988. A preliminary review of the first three years of the operation of the Fund, based on DSS statistics, funded by the Joseph

FIGURE 4

BREADLINE BRITAIN 1990S

"Using our sample figures we estimate that in the population as a whole,

- * Roughly 10 million people in Britain today cannot afford adequate housing: for example, their home is unheated, damp or the older children have to share bedrooms.

- * About 7 million go without essential clothing - such as a warm waterproof coat - because of lack of money.

- * There are approximately 2.5 million children who are forced to go without at least one of the things they need, like three meals a day, toys, or out of school activities.

- * Around 5 million people are not properly fed by today's standards - they don't have enough fruit or veg., or two meals a day for example.

- * About 6.5 million people can't afford one or more essential household goods, like a fridge, a 'phone, or carpets for living areas.

- * At least one of the necessities which make life worth living - hobbies, holidays, celebrations, etc. - are too expensive for about 21 million people.

- * More than 31 million people - over half the population - live without minimum financial security: they say they cannot save £10 a month, or insure the contents of their homes, or both."

Source: Frayman 1991, p.8-9.

Rowntree Foundation and published in 1991, suggested that there was no objective evidence to show whether the use of the Fund was distinguishing between more or less serious needs either accurately or consistently, and therefore whether the government's "targeting" objectives were being met. The author conceded the difficulties involved in framing any scheme to meet special, emergency needs; but points to the confusion about entitlement, the risks of leading poor people into permanent debt through the provision of loans, and the reduction in the resources available under the new scheme for needs which presumably have not lessened, (Berthoud 1991, p.3).

In January 1992, researchers at the University of York completed a three-year study of the operation of the Social Fund, commissioned by the DSS. The publication of their report will provide crucial material for the evaluation of the scheme inside and outside government; so far, publication has been limited to articles dealing with aspects of the early operation of the Fund, and the way officers arrived at decisions, (Huby and Walker, 1991 a,b).

4.2. THE PERSONAL SOCIAL SERVICES

This section sketches in the background to the very extensive changes which are taking place in the UK, in the organization and delivery of social welfare services. Legislation has been enacted in the recent past which will have a dramatic impact on most of the functions of local government in the field of personal social services: in the provision of child care, as well as in relation to residential care and community-based services for frail elderly or disabled people.

The changes have to be seen against the traditional "Welfare State" approach, which has been the basis of provision in Britain for some fifty years, and which

remains popular despite the obvious problems which rising costs and expectations have created. The existing structure of the personal social services, and the rôle of the social workers who implement them, will be briefly described, followed by an account of the development of the policy of "Community Care".

This policy, which grew in importance throughout the seventies and eighties, has now become law by virtue of the National Health Service (NHS) and Community Care Act 1990. Demographic change, concern about the rights and independence of clients, the rising costs of residential care, therapeutic questions - all these combined to encourage the development of community-based alternatives to long-stay institutional care. One of the objectives of these new policies is to broaden the variety of organizations providing social welfare services, and avoid a state monopoly as providers while reinforcing local government's role as the manager and organizer of packages of care.

Defining the limits of welfare.

In each member state of the European Community, and within each social policy tradition, the expression "social welfare" carries a range of connotations. In the United Kingdom, social welfare may be taken at one level to mean only those services and systems which complement the social security system. At a more popular level, however, "welfare" is widely identified with the Welfare State -with the whole range of benefits and services, provided by the state and paid for out of a mixture of insurance and taxation, which are broadly aimed at promoting and preserving the health and well-being of the whole population.

Not everyone in Britain would necessarily agree about what the Welfare State consists of: everyone would

include the National Health Service, the principal pensions and benefits, and the personal social services. Most would add the system of state education, and perhaps the provision of public housing. But everyone would agree about which kind of institution is responsible for it:

"To the vast majority of the British population, the term welfare is synonymous with state provision...In reality of course, there is a fascinating variety of organizational and economic arrangements for the delivery and funding of welfare." (Knapp, 1989.)

The growth in this fascinating variety is partly due to the encouragement given to a new welfare mix during more than a decade of Conservative government. But it is also true to say that its origins predate the 1980s, and are to be found in the voluntary and private provision which has operated in parallel, if not in partnership, with the state.

Demography, and the role of the state.

In common with many other countries of the Community, the United Kingdom has faced a growing dilemma in relation to the economic support and social welfare of vulnerable, disadvantaged and dependent groups in the population. The factors contributing to this dilemma are repeated, in varying proportions, almost everywhere in Europe. Life expectancy is increasing, birthrates are falling. Parents have fewer children who might support them in old age. Family networks become looser as the search for work draws younger family members away from their birthplace; and the increased mobility implied by the Single Market could exacerbate this trend.

Attitudes to the family, and to family care have changed. More and more women - the traditional carers - want and need to work outside the home. Marriages no longer last a lifetime. In the context of increasing divorce rates, growing numbers of one-parent families, remarriages,

stepchildren - the "family" is no longer the obvious source of long-term care for frail elderly or disabled people. At the same time, the notion of long-term residential care for the elderly or other dependent groups has come under increasing criticism: for reasons of cost to the statutory services, as well as on therapeutic and humanitarian grounds.

The British Government has faced a growing bill for the financial support of pensioners, and a growing imbalance in the capacity of insurance-based funds to meet it. The dependency ratio - the ratio of workers paying social insurance contributions to retired people, drawing insurance-based benefits - is steadily worsening, both because of the demographic trends which have been mentioned, as well as unemployment. Meanwhile, in common with the rest of the population, the expectations of elderly people continue to rise - particularly in relation to the provision of health care. They expect, and have a right to expect a longer and better-quality life than their parents. And the factors which will contribute to this long, good life are not really in dispute: adequate income, good health care and community-based services for frail elderly people, and policies on housing and social integration which will combat the isolation which can accompany old age.

In 1987, Professor Halsey introduced the annual digest of official social statistics, "Social Trends 17", with a personal analysis of the impact of the past two decades on social Britain:

" - Britain emerged from the Second War as a classical industrial economy, a centralized democratic polity, and a familistic social structure. It was a society with historical roots in a social order in which there had been minimal government, and in which welfare had been dominated

by the relation between the family and the workplace through the market for labour. The institutional division of labour of prototypic industrialism was an essential triangle joining the family, the economy and the state." (Halsey, 1987.)

This "essential triangle" has broken under the impact of change, summarized here; and the kind of welfare system appropriate to the new situation has become a subject for debate.

The impetus for change.

The 1970s saw growing strain and confusion in the British welfare system, particularly in relation to the provision of cash benefits; and the reform of social security, introduced in 1986, was designed to overcome some of the perceived deficiencies. The reforms reflected the growing realization that social assistance was no longer the comparatively rare recourse of the unfortunate, but a large and growing component of national household income. Long-term unemployment was a major factor contributing to this change: in effect, the cost of maintaining unemployed workers transferred to the social assistance bill, once their insurance benefits expired at the end of one year's unemployment.

The 1990 British Social Attitudes report (Jowell et al., 1990) includes material devoted specifically to changing attitudes to welfare. One of the striking conclusions of the study is that public anxiety over and dissatisfaction with the quality of the NHS has grown steadily during the '80s, in parallel with growing public support for increased expenditure on welfare paid from taxation. Universal services - like the NHS - remain the most popular. This finding holds good for both the richest and the poorest members of the population; and, interestingly, there is only one issue studied on which

opinion appears to have diverged since 1983 -

" - and that is on their perception of the power of social workers... It appears then that those most likely to have direct or indirect contact with the social services [i.e. the poorest people] are conspicuously more suspicious of their powers." (Taylor-Gooby, 1990 p.17.)

The functions of the social services.*

In 1989, the Children Act introduced very important reforms in the principles underpinning the administration of child care cases by local government; and in 1990, the National Health Service and Community Care Act established a framework for change in the NHS, and in provision for frail elderly or disabled people. Both of these pieces of legislation will have a very significant impact on the general responsibilities of SSDs which, prior to the changes, were broadly as follows:

* child care, including promotion of the welfare of children, the prevention of child abuse, and the prevention of family breakdown for as long as is consistent with the welfare of the child;

* welfare services for elderly and disabled people, and people who are chronically sick - physically or mentally;

* the provision and regulation of residential accommodation for vulnerable elderly or physically disabled people, and people with a mental disorder.

The last two functions cover their responsibilities in relation to residential care and what has broadly come to be known as "community care" - the provision of

* The account of the functions of the personal social services which appears here applies to England and Wales: similar schemes apply in the rest of the UK, but terminology and legislation may differ.

community-based services designed to support people dependent on some degree of personal care, so that they continue to live at home or in "homely settings" for as long as possible. Before the new legislation, these responsibilities represented considerable expenditure and manpower:

"In 1987/88, local authorities spent £2305 million on community care: £1183 million on residential care and £1167 million on domiciliary and day care services. SSDs employed 232,000 staff in total: 5500 managers, 27,000 social work staff, 1100 occupational therapists, 88,200 staff in residential care establishments, 59,500 home help service staff and 27,200 staff in day care establishments. The volume of services provided was also large:

- * 133,800 places in local authority residential care homes;
- * 46.4 million meals on wheels; and
- * 108,700 places in day centres." (White Paper 1989.)

Social work.

Although the numbers of social workers are relatively small, they form a highly visible and often controversial service. In the child care field, for example, they are expected to protect the child from abuse at the same time as giving priority to supporting natural families, respecting the rights of parents, and preventing family breakdown. The dilemmas posed by this work, intensified by a number of highly publicized cases of injury to children, have encouraged English authorities to articulate their basic child care policies - many, for the first time. Important elements in these policies are the notions of inter-agency collaboration, and the participation of parents and children in the decisions which affect their lives, (Robbins, 1990).

As in other countries of the Community, discussion of the delivery and effectiveness of the social services in the UK is bedevilled by the lack of complete data. Small scale local studies suggest that most users of the social

services are claimants - that is, they depend wholly or partly on benefit payments (Becker and Macpherson, 1988), but information about the population in touch with social workers is acknowledged to be limited. The Association of Metropolitan Authorities has commissioned studies of the impact of both unemployment and of poverty on SSDs; and a number of local authorities have worked to develop local poverty strategies, which in some cases incorporate the advice and advocacy functions of social work (Balloch and Jones, 1990).

These initiatives highlight the paradox at the heart of the social workers role in relation to poor clients: they are expected to deal with and contain the effects of deprivation, while having very little influence over the distribution of resources which might combat it.

Although the ways in which both social security benefits and social services are provided may be seen as equally stigmatizing by poor people themselves, staff at benefit offices and local authority social workers perceive their own roles as very different. Some SSDs have established welfare rights offices to help claimants cope with the very bureaucratic procedures which the benefits' system involves. Small sums of money are available to social workers, (under child care legislation,) to give as direct financial support to families in trouble; and some local authorities see this as one way of making up for deficiencies in the benefits' system.

Cooperation at local level between different statutory agencies, and the different sectors in the field of care, has been notoriously weak in the past; and much recent legislation - for instance, the Children's Act 1989 - emphasizes the need for close and effective collaboration between health, education, police and social services. This has become an acute problem in relation to the policies of community care. Long-stay

hospitals, run by the NHS through Regional Health Authorities, have been closing; but provision "in the community" to support the mentally or physically handicapped or very frail elderly people, who might in the past have been cared for in NHS residential establishments, has passed by default to local government - initially, without specific policies or extra resources.

Important policy developments have affected all the functions of SSDs in the past eighteen months, as the provisions of the Children Act 1989 and the NHS and Community Care Act 1990 begin to take effect. Both are relevant to a discussion of social exclusion. The provisions of the Children Act bring the needs and opinions of the child into the centre of policy on child care. They reinforce the notion that the child's welfare is paramount in any decision about intervention; and that children are generally best cared for within their families. They introduce a new obligation on social service authorities to provide services which will promote the welfare of "children in need":

"Children in need covers children who need services to secure a reasonable standard of health and development and includes children who are disabled. This broad duty, which comprehends and extends the present duty to reduce the need for children to be brought into care or brought before the courts is a key provision.." (DH 1989, p.2.)

Potentially, the policy expressed by this duty appears to offer the key to a range of services which will keep children with their families, and perhaps even break the demonstrable link between general deprivation and being taken into the care of the state. In practice, and predictably, social service authorities are experiencing difficulties in interpreting and implementing an open-ended commitment of this kind, in the context of limited resources.

The new legislation on community care is equally significant in terms of the new responsibilities laid on social services departments to assess need and arrange for appropriate services to be supplied. If confinement in institutions can be said to present one unequivocal kind of social exclusion, then the policy of community care which has developed through the 1980s in the UK must be crucial in overcoming it. But here again, the local authorities which have the job of implementing the policy are pointing to the "credibility gap" between the broad objectives of the legislation, and a practicable interpretation of it.

"There is a new requirement on local authorities to identify children in need and care needs in the community of other people, but the definition of 'needs' has been left to local interpretation. Local authorities will have to make clear and open decisions about where and how to draw the line. It is highly likely that the needs revealed will have implications which exceed current budgets.." (Policy Forum, 1992.)

4.3. CITIZENSHIP AND THE LANGUAGE OF POLICY

Discussion of the personal social services in the UK - the services broadly concerned with supporting families and vulnerable members of society - raises the most fundamental questions of public morality and of the social rights of the citizen.

Policies are very often analysed by reference to numbers: but in the UK, at least, the language of policy change and implementation is of critical importance. The language of the market, for example, brings with it a whole range of allusions which may or may not be appropriately applied to situations demanding sensitivity, compassion, generosity and altruism. The personal social services are centrally concerned, not with production, but with pain. It may not be the proper function of government to supply "sympathy" as a service,

but the tenor of government pronouncements will certainly be a crucial factor in determining whether it is generally available. Bourdieu describes the force of language in politics: a new slogan has for him a similar significance to a declaration of war, and possesses -

"... symbolic power - a power of constituting the given through utterances, of making people see and believe, of confirming and transforming the vision of the world and, thereby, action on the world and thus the world itself, an almost magical power which enables one to obtain the equivalent of what is obtained through force ..." (Bourdieu 1991, p.170.)

Belief in the legitimacy of the speaker is what gives his words their power, and government, after repeated electoral success, has that legitimacy. What governments say, therefore, is not just a gloss on what they do, but a central element in their doing it.

Statements of government policy which are directly relevant to the areas relevant to this report have emphasized:

* **a mixed economy of care** - that is, a reduction or removal of the state's near-monopoly of the caring services, and encouragement to private and voluntary provision;

* **care in the community** - a reduction in institutional care for disabled or vulnerable groups, and a corresponding increase in community-based support;

* **targeting** - the concentration of resources and services on those most in need;

* **a customer/contractor split** - a clear distinction, within statutory agencies, between those responsible for spending the welfare budget, and those providing the services;

* **quality assurance** - an emphasis on records, planning, inspection, assessment, monitoring, the development of outcome measures and performance indicators, which will make possible the evaluation of services in terms of costs and quality.

Some of these phrases are ambiguous - "care in the community" or "care by the community"? - or mutually contradictory. Targeting, for example, is hardly consistent with the "free market" quality of other principles. They also beg many questions: resources are to be concentrated, at whose expense; where costs and quality conflict, which is the overriding criterion? Many of the changes are obviously for the better. Noone regrets the passing of Victorian long-stay hospitals for elderly people or people with disabilities. Everyone must applaud the new emphasis on rational judgement implied by monitoring. But the fundamental drift which they represent towards the "privatization" of functions seen as the preserve of the state for some fifty years has to be evaluated as a whole, not just by reference to individual reforms.

Britain is not, of course, alone in seeking some new solution to the rising costs of social welfare. A study of changes in the "welfare mix" in nine European countries in 1988, found a trend towards privatization in a number:

"The general theme is to move towards market relationships. Rather than governmentally-provided services, individuals would purchase current government social services in the 'market' where private firms would compete in attracting customers... The proponents of privatization seek efficiency, less governmental expenditures, and increased choice through market competition."
(Miller 1988, p.383.)

One of the potential benefits of the market approach, which Miller singles out, is a reduction in the social

control implied by state services. The better-off people could choose to pay for the level of service they could afford, while poorer people would be provided with "purchasing power" through government grants or vouchers. Thus everyone would become a customer, not a client, and could potentially takes his/her business elsewhere.

The social control function of "street-level bureaucrats" was analysed at length by Lipsky, in his study of social welfare workers, broadly defined, in the US. In his view, the public service sector softens the impact of the economic system on those who are not its main beneficiaries, and reduces discontent. Where demand for public services exceeds supply, the bureaucracies of public welfare introduce rationing mechanisms. Where clients are unwilling to comply, they can be coerced by the non-voluntary nature of their contact with the system, and by the unequal power implied by the kind of interaction allowed to them, and the environment in which it takes place. Services are rationed through lack of information and lack of time:

"It is for this reason that we conclude that the stated intentions of street-level bureaucracies to become more client-oriented, to receive more citizen input, and to encourage clients to speak out are often questionable... it is dysfunctional to most street-level bureaucracies to become more responsive. (Lipsky 1980.)

If clients, then, become transformed into consumers and customers by the market-style provision of services, it should follow that power becomes more equal, and discontent can find expression. This, however, is not necessarily the outcome foreseen by Miller:

".. would consumer-clients have adequate knowledge to make choices? Would they be well enough organized to exert political pressure to improve or change services? .. The elimination or reduction of state provisioning is likely to lead to greater inequalities as those with more private funds can purchase services not available to those with meagre governmental vouchers or cash benefits. The business organizations providing social services are likely to cream. The aim of reducing governmental social welfare expenditures is likely to harm the scope and quality of services available to lower-income individuals. Greater 'choice' does not necessarily result in more equality, adequacy and concern." (Miller 1988, p.384.)

Some redress for inequality and disadvantage, some defence against trouble and despair, first aid for the family and support for the informal care of the community - these have traditionally been seen as the ideals of the social services. The needs of the least well-off and most vulnerable are their proper concern. How these ideals are to be translated into practice is the function of policy.

SPECIFIC POLICIES

5.1. POLICIES WHICH PROMOTE INTEGRATION

So far, this report has focused on the extent to which policies which have a general or sectoral application have an impact on the social exclusion of citizens. This Chapter attempts to identify policies which may be said to relate more directly to their situation.

While social exclusion remains a rather remote and foreign concept to most policy-makers in the UK, the opposite -social integration - is the specific objective of policies in a number of fields. Some of these have already been mentioned in earlier Chapters: for example, many of the policies directed at the reintegration of long-term unemployed people into the labour market have a social element - support, counselling, advice on self-presentation. The community care policies described in the last Chapter are explicitly aimed at "re-incorporating" people who would have lived in institutions in the past back into the community.

Integration into the "community".

Briefly, the key facts are as follows:

* Local government Social Services Departments (in England and Wales) are, in the future, to manage and regulate residential, domiciliary and community-based services for vulnerable groups - but not necessarily

provide them.

* The mix in provision, as between voluntary, private and statutory, is to be encouraged by service managers.

* More broadly, social welfare is to involve charges to those people who can afford them, and therefore more means-testing, and "targeting" the most needy groups.

The full implications of these three principles will emerge over the coming months; but they are bound to have an impact on:

The client -

What are the implications for quality of care; how will it be monitored? Will private accommodation take only fit, relatively able customers, leaving severely disabled or senile people to state provision? How will market forces affect the geographical spread and availability of provision? Will contractors be forced to buy the most "cost-effective", i.e. cheapest provision for clients?

The social worker -

Have the training needs of social workers in the new context been thoroughly explored and funded? Will sufficient resources be available for effective management, as well as creative and flexible provision? If state provision becomes somehow "residual" - what is left for the most handicapped or the poorest people - this has obvious implications for morale and recruitment in statutory facilities.

The voluntary sector -

Questions for the voluntary sector include the potential effect of the new "contract culture" on their traditional strengths. How will they maintain their advocacy role; do

they have the expertise to compete in an increasingly commercial context? The capacity of voluntary organizations to innovate and respond quickly and flexibly to changing needs - will this survive?

The private sector -

Like any other commercial enterprise, private providers of social welfare will depend on a reasonable return on their investment, as well as some security about the future profitability of the sector. It is as yet unclear whether the levels at which social security payments are to be set, and the resources available to local authority care managers will be an adequate financial basis for growth in the sector.

The public -

Finally, there are unanswered questions about the extent to which public opinion supports these changes. "Privatization" has become associated in the public mind with the progressive sell-off of state utilities, of increasingly doubtful legitimacy. Lack of public enthusiasm for change in the NHS has resulted in amendments to the legislation, and to plans for implementing it. When the new mixture of private, voluntary and state provision of welfare is in place, will it represent what most British people want for the most vulnerable members of society?

Clearly, an accurate evaluation of the new system will have to wait for its full implementation in 1993, and for the experience of subsequent years. Some of the indicators for the future are optimistic: improved inter-agency cooperation, better support and recognition for informal carers, increased participation in the design of services by users, and increased choice - all these changes, if realized, have a positive ring.

The key question, of course, centres on resources. Choice can be increased, but only in the context of fully adequate provision, equally available in all areas, and to all kinds of users. A new kind of professional culture, involving real cooperation between statutory agencies, and the real consultation and involvement of people formerly seen as "clients", is possible, but only given adequate resources for training staff and restructuring services. If the overriding principle guiding implementation is the need to save money, then the fears of a two-tier system - of a market caring for those who can pay and at best warehousing those who cannot - may become the reality.

Children

The provisions for preparation for independent living in the Children Act 1989 reflect the need, demonstrated repeatedly by research during the 1980s, to plan for and train young people to leave the care of the state and become integrated into independent life. Local authorities are now required to provide after-care to any child ceasing to be "looked after" by them (the new terminology for being in the care of the state) up to the age of 21, and to coordinate help from housing, education and health authorities. In a review of residential child care provision for children, commissioned by the Secretary of State for Health in 1991, Utting drew attention to the special need of children leaving residential care for preparation and support, (Utting 1991, pp. 39-40.)

People with disabilities.

The social and economic integration of people with disabilities has also been the subject of policy initiatives in 1991. A new package of benefits was introduced, to take effect from April 1992. The

Disability Living Allowance (DLA) replaces mobility allowance altogether, and attendance allowance for people under 65. It has two components - "care" and "mobility" - and a range of rates resulting in 11 permutations of payment. It is tax free, and paid in addition to other benefits. The Disability Working Allowance (DWA) is intended to supplement wages from full-time work (16+ hours per week), with a reduction in the Allowance of 70p. for every £1 earned above the threshold. As an example, a single person would get a DWA of £42.40 a week if their wages were less than £39.95 a week, and would receive no DWA if their wages rose to more than about £100 a week, (Vaux 1992, p.1.)

These changes, the third and final stage of the policy outlined in the White Paper "The Way Ahead - Benefits for Disabled People" (White Paper 1990) are part of the Government's response to the situation of disabled people revealed by the official surveys of disability published in 1988 and 1989. The changes were aimed at simplifying the system, removing disincentives to work, and reducing the income gap between disabled and non-disabled people. Figure 5, on the following page, gives comparative figures for the gross weekly earnings of disabled and non-disabled male workers in full-time employment in Great Britain, in 1988/89.

Some features of the new benefits have been welcomed: in particular, the change to self rather than medical assessment is seen as an improvement, although this will involve the completion of elaborate application forms. But they have been criticized for being too complicated; for reintroducing a "poverty trap" situation through the DWA taper; for failing to restore the value of benefits lost at the time of the reform of Social Security in 1988, including Single Payments; for perpetuating the situation whereby two people with similar disabilities receive very different benefits; for very low thresholds;

and for attempting to support reintegration into work by a means-tested benefit, with the possibility of low take-up, (Barnes 1992; Disability Alliance 1991.)

FIGURE 5

weekly gross pay	disabled workers %	non-disabled workers %
under £100	13	2
100-150	25	12
150-200	25	21
200-250	16	21
250-300	10	16
300-400	7	17
400-600	3	9
over 600	2	3

Source: Barnes 1991.

A consultative document published by the Department of Employment in July 1990, "Employment and Training for People with Disabilities", canvassed views on the statutory quota scheme which was intended to reserve 3% of jobs in larger firms for people with disabilities. The document admitted that the scheme was not working, but a subsequent announcement from the Department states simply that it will be kept "under review":

"However, persuasion will continue to be used as the most effective way of securing employer commitment to widening opportunities at work for the disabled..." (DE 1991a, p.525.)

This approach is in contrast to the calls for legislation to combat discrimination against disabled people from organizations representing them, (Community Care, 30 January 1992, p.5.) Income disadvantage among disabled people may be explained by unemployment, or underemployment, or in relation to levels of benefit. But the social exclusion of disabled people is a more

complicated amalgamation of poor educational opportunities, extra costs, social isolation, inadequate services and support, and discrimination.

5.2. POLICIES WHICH TARGET DISADVANTAGE

The notions of targeting, concentrating resources on particularly needy groups or areas, positively discriminating in favour of the worst-off - these are not new ideas, but have been a marked feature of some government policies in the late 1980s. They are relevant to the definition of social exclusion which sees citizenship at risk from the apparently inescapable nexus of disadvantage experienced by some people in some places.

Examples here include the urban policies described above, as well as the changes to social security, health and social service provision which have been noted throughout this report.

But there are two aspects of these "targeting" policies which are relatively new, and which must be taken into account in any evaluation of their effectiveness. Firstly, targeting is being linked to spending limits. Thus, if benefits are concentrated on the most needy, there are bound to be losers (among the relatively needy) as well as gainers. Secondly, free services are being concentrated on the poorest people, while others are asked to pay. Apart, again, from the implications for the fairly poor, this kind of strategy raises all the questions of equity, stigma and access that are inherent in two-tier systems.

"Both the practice of charging and the rates charged for services have increased. Again, charging redistributes resources between service users, rather than over the population as a whole. Shifting the boundary between health (free at the point of delivery) and social care (chargeable) as is happening with bathing services, for example, has financial implications for people who need services. Targeting services on those in greatest need is resulting in a reduction in less intensive and preventive services.." (Policy Forum 1992, p.2)

One of the aims of the reform of social security was to target benefit spending most effectively, within the existing budget limits, on the most needy - including low-income families with children. The incidence and possible effects of poverty among British children in the 1980s were discussed in a report by Bradshaw, as part of the UNICEF international study of child poverty and deprivation. Both the physical and behavioural impacts of poverty on children were considered, but lack of data precluded a complete analysis:

" - the evidence is not very good, the impacts have probably yet to be observed and the manner in which social and economic change affects the lives of children is not well understood", (Bradshaw 1990, p.51.)

The report argues convincingly for better systems of monitoring the impact of poverty on children in the UK, and - therefore - by implication, for improved and uncontroversial measures of poverty. Currently, trends in the proportion of dependent children living in families with below half average incomes may be traced by reference to the HBAI series of statistics, (see Figure 6 below).

Family Credit was the main mechanism introduced in the 1988 reforms to target help on low-income families. Area-based studies undertaken by researchers at the University of Oxford demonstrated that a key to the success of the strategy was take-up (Noble and Smith 1991, pp. 15-16.).

FIGURE 6

PERCENTAGE OF DEPENDANT CHILDREN LIVING IN HOUSEHOLDS
WITH INCOMES BELOW 50% OF THE AVERAGE, INCOME AFTER
HOUSING COSTS 1979-1987

	1979	1981	1983	1985	1987
CHILDREN IN HOUSEHOLDS OF:					
full-time workers	5	8	6	6	13
lone parents	45	42	29	35	60

Source: Bradshaw 1990, p.14.

(NB: This table is not adjusted for the increase in the absolute value of half-average income which took place over the period.)

5.3. POLICIES WHICH COMBAT DISCRIMINATION

Among the most explicit attempts by policy-makers to remove or reduce the barriers to full citizenship implied by social exclusion are the laws to combat discrimination on the grounds of race (Race Relations Act 1976, replacing the Act of 1965 and subsequent amending legislation), sex (Sex Discrimination Act 1975), and religious affiliation (Fair Employment Northern Ireland Acts 1976 and 1989).

Racial discrimination.

The oldest of these initiatives - policies to combat racial discrimination - have been the subject of recent debate stimulated by three sets of developments. Firstly, there are fears that racism may be reviving in Britain after a relatively quiet period, mirroring the rise of far right wing parties in other countries of Europe, and possibly reflecting anxieties about the implications of

developments in the Community and in Eastern Europe for immigration. The far right British National Party was said to be planning to field at least 50 candidates at the last election, (The Economist, January 18-24 1992, p.23.)

Secondly, controversial measures to control asylum have been introduced by the Government. The total number of people seeking asylum in the UK (excluding dependants) rose from 4000 in 1988 to over 22,000 in 1990, and to 44,000 in 1991 (CSO 1992, p.35.) In response to this steeply growing demand, legislation was introduced to discourage fraud and "streamline" the processing of applicants. Protests from Church leaders, the legal profession and organizations concerned with the rights and welfare of immigrants led to some modifications of the provisions of the Bill, which was shelved until after the Election.

Innumerable one-off studies have documented the disadvantages which black and brown Britons face in the housing market, (see Smith 1989, for a review), in relation to social services provision, Government training schemes, low pay, insecure employment. Black and brown families are overrepresented among the homeless, in areas offering the worst environments, in industries suffering the greatest decline. Attitudes to minorities, and their current disadvantage, are both to some extent the result as well as the cause of the politics of immigration legislation, which have always linked action to combat racial discrimination and disadvantage with ever-tighter restrictions on rights of settlement.

Controlling immigration and combating discrimination have been linked by policy since the 1970s, but the link remains the subject of debate. Government has taken the line that good relations between ethnic groups are fostered by the confidence which immigration control

creates in the majority of the population; opponents argue that it legitimizes racism. In the popular press, for example, few distinctions are made between asylum-seekers, illegal immigrants, and visitors to Britain of the same ethnic origin as other British citizens. In what appeared to be a straightforward attempt to stimulate racist animosity towards Africans, Turks, Indians and other people of Asian origin,

" - the newspaper Daily Star has been running a campaign to 'halt the influx of foreigners who end up living off the state'. The campaign during May and June [1991] was a success, the paper claimed, with the Home Office promising tougher measures on immigration." (Runnymede Trust 1991, p.19.)

The third source of debate has been provided by a recent evaluation of the effectiveness of the legislation in providing redress for people who are discriminated against, on grounds of race, in the workplace. The researchers identified three different purposes behind the legislation - justice for individuals, promotion of public standards of behaviour, and improvement of opportunities for ethnic minorities as a group - and this confusion of goals meant, in their view, that none of them was fully achieved:

"It is a central conclusion from this research that much more could be done through the individual complaints system to achieve justice for individuals -the procedure is troublesome, the applicant has a poor prospect of obtaining a small reward, and the present capacity to provide competent representation to applicants is too small to meet the demand." (McCrudden et al. 1991.)

The large and growing number of successful cases heard before tribunals bears witness to the continuing need for a system of redress for the individual, and to the perseverance of applicants. In the year from June 1977, a total of 146 cases were heard of which 5 were upheld. Equivalent figures for the year from April 1987 are 709 heard, and 61 upheld, (ibid.)

Women.

Progress towards equal opportunities for women in Great Britain is monitored by the Equal Opportunities Commission. Statistics published by the Commission in September 1991 focus on, " - the EOC's priority issues of earnings without discrimination, part-time work, social security and pensions." (EOC 1991.) The data relating to continuing inequality are too extensive to summarize here, but the following paragraph lists some of the main points:

In 1990, women who worked full time earned 77% of the hourly earnings of their male counterparts. Women not only receive lower average weekly earnings than men, but they are also concentrated at the bottom of the earnings distribution. An important aspect of job segregation is the way in which women and men tend to be employed in different occupations, as well as different industries. Most occupations remain heavily segregated. Men dominate the ranks of management. In all ten industries with the most female employees, a higher proportion of the men employed received training. The problem of the poverty of retired people is likely to become even more important in future years. Women form a majority of the elderly population. In 1989, 61% of male and 37% of female employees were in occupational pension schemes.

The data reveal improvements in some areas - the gap between the hourly earnings of male and female full-time workers has narrowed since 1987; more women are beginning to get into management - but the overall pattern of segregation, disadvantage and discrimination remains. One response to this has been the government's "Opportunity 2000" campaign:

"Barriers facing more than a million women at work were set to crumble last month as 61 leading employers signed up to Opportunity 2000 - a national initiative on equal opportunities... Each employer sets his own goals and will monitor progress towards them made over the next few years." (DE 1991b, p.637).

Discrimination creating and reinforcing economic disadvantage, and the traditional role of women as carers and unpaid labourers preserve their subordinate position in British society. The disadvantaged situation of women on YTS (Cockburn 1988), in industry (Cockburn 1983, Robbins 1986,) and in relation to work, welfare and the family (Glendinning and Millar 1987) have been extensively documented. The hidden character of women's poverty, and its analysis in terms of powerlessness and social exclusion, have led to demands for gender to be emphasized in future work on the measurement of poverty, (Thomas Coram Research Unit/Institute of Education 1989.) The provision of childcare is seen as a major determinant of economic progress for women, but while reports on Britain from the EC Childcare Network present some evidence of growing provision (see, for example, Cohen 1990), there is still ample evidence of unmet need. The major policy instrument working to equalize chances for women remains the EOC's implementation of the sex discrimination legislation: Specific policy initiatives have focused on improving benefits for informal carers, and on encouraging the provision of workplace nurseries as a way of replacing the projected shortfall of young workers by women.

5.4. COMBINED POLICIES

Clearly, the kind of analysis attempted here does not fit neatly around a discussion of all the disadvantaged groups which have often been the traditional concern of social policy in the UK. But the kinds of policies described in this Chapter will be found in most of the typical packages which are designed to alleviate group disadvantage. The social exclusion of elderly people, for example, can be said to be targeted through Income Support premia, and their integration promoted by means of community care policies. Lone parents are another group for which policies relating to discrimination,

targeting and economic if not social inclusion have been combined.

Lone parents.

The especially disadvantaged situation of lone parents, whose numbers in the UK - as elsewhere in the Community - continue to rise, has been the focus of much popular and political debate. Preliminary analysis of the General Household Survey for 1988 showed that 16% of families with dependent children in Great Britain were headed by a lone parent, compared with 8% in 1971, (OPCS 1989); a year later, the proportion had grown again to 17%, (OPCS 1990.) Most lone parents are women, many are dependent on state benefits for their income, and they are overrepresented among the homeless. Analysis of the Family Expenditure survey for 1988 showed that on average, 32% of the income of a lone parent with two children came from earnings, and 44% from social security; the equivalent figures for a couple with two children were 71% and 6% respectively, (Oppenheim 1990, p.98.) In 1987, lone parent families had a 47% risk of living on an income below 50% of the average, (ibid. p.30); in the same year, 90,000 lone parents lived on incomes below Supplementary Benefit (ibid. p.26).

The "double disadvantage" facing lone parents as the sole providers of childcare, and as (predominantly) women, at a disadvantage already in the labour market was identified by Millar and Bradshaw as the key determinant of the persistence of poverty among lone parent families, (Millar and Bradshaw 1987, p.250.) Given the place of low pay and unemployment in the poverty of lone parents, the provision of affordable childcare is of course, a key issue. Pilot schemes providing child care allowances for lone parents willing to undertake government-sponsored training have been tried in some areas, but some critics believe that the lone parent's continuing and overriding

need for reliable and affordable childcare can never be met without public or subsidized voluntary provision, (Brown 1989, p.95).

A recent attempt to analyse the health status of lone parents, using data from the General Household Survey found generally poorer health, according to three measures, than among the population as a whole, (Popay and Jones 1990). In discussing the reasons for this finding, the authors emphasize the ill-health factors which are found among unemployed people, among women, among poor people, among the socially isolated, among people whose marriages have broken down, but which are found together among lone parents. A similar set of factors, compounding each other, may be in operation in the housing market, increasing the difficulties which arise when one housing unit resolves into two.

Recent policy initiatives in respect of lone parents have focused on the responsibilities of absent fathers. The government has introduced legislation which will have the effect of compelling fathers to make provision for the financial maintenance of their children, after separation from the mother. Further changes to the social security system, designed to remove disincentives to reentering the job market, or to provide incentives to do so, will depend on the outcome of research that is in progress.

5.5. CONCLUSION

Both the definition of social exclusion and the analysis of policies will be refined as the work of the Observatory develops. But it is already possible, on the basis of this account, to distinguish some themes in current policy which are important to the debate about social exclusion. The terminology of social policy in the UK has to be seen in the ideological context of the market, of individual responsibility for prosperity. But

"exclusion" is certainly of concern, although it may be described in terms of dependency, the cost to the state of benefits or institutions; "citizenship" is on the agenda, in terms of consumption of services; both social and economic integration are the object of policies in employment, social security, social services, and so on.

The key strategies include targeting the most disadvantaged groups and areas - positive discrimination, without the blank cheque; legal remedies for discrimination on grounds of sex, race and religion; and efforts to promote the reintroduction of excluded groups to full participation in social and economic life through coordinated, cross-departmental initiatives involving private and voluntary sectors as well as state services. What is missing from the official debate is discussion of the minimum acceptable standard of life for the people with lowest incomes, and its implications for citizenship, for the distribution of wealth in Britain, and for the total supply and quality and of services.

Monitoring and evaluation, the development of performance indicators in the public service, and the issue of quality assurance have all been preoccupations of policy makers in the UK in the 1980s. Some important evaluations - for example of urban policy - are currently underway, and should provide valuable data for the future work of the Observatory.

BRITAIN IN EUROPE

Throughout this report, there have been references to experiences which the Member States of the European Community share: rising numbers of lone parents, for example; a concern to improve the responsiveness of public services to "customers"; a common anxiety about the rising cost of welfare in the face of economic crisis and demographic change. The relatively new and apparently intractable problems of homelessness, questions surrounding the care of an ageing population, fears of increasing racism - these are felt as keenly in the UK as they are in most other countries of the Community.

But any comparison of the debates which are taking place in all the countries of the Community around many of the same problems and issues highlights again another constant theme of this report: the overriding importance of the ideological context in which these debates take place. An emphasis on reduced state intervention and the disciplines of the market, on competition and consumerism, removing disincentives to work, on efficiency and effectiveness -all of these contribute to the unique ideological cocktail which has dominated British social policy-making in the recent past.

The emphasis of Government policy has not, then, given priority to social integration, but has focused on economic integration - getting back to work - as the key to full citizenship. The implications of this focus for vulnerable people, and people at a disadvantage are, of

course, what the whole of this report has been about.

Policy-makers and commentators at European level are often criticized - in the UK at least - for jumping to comparisons, for not comparing "like with like". Inadequate bases for comparison, it is claimed, may lead to incorrect conclusions and inappropriate initiatives. For this reason, the nature of the ideological contexts for national policy-making must be of central concern to the Commission's Observatories, all of which have the improvement of comparative data near the top of their agendas. The context to a large extent defines what is meant by "partnership", "community", even "subsidiarity" in the different countries of the Community. "Insertion" must be seen in its French context, and "quality assurance" in its British. These words are not simply what they say. Nevertheless, it is possible to see some common trends in policies which are being tried in relation to common problems - the encouragement of or support for the private sector, NGOs and the family is one kind of policy response to the problems facing frail elderly and other vulnerable people which is found in a number of countries, for example.

The next, obvious question for the observer is: to what extent is this process of finding and testing common solutions an explicit choice by governments? Is it simply a question of spontaneous, simultaneous intellectual combustion, or are policy-makers setting out to learn from each other? Is it a process which can and should be encouraged at European level?

In general, few high-profile government statements in the UK have emphasized the amount that British policy has to learn from other member states: the protection of uniquely British institutions and systems has seemed to be the higher priority. But at the level of local government, practitioners and voluntary sector, practical

cross-national learning is going on. One recent initiative which brought together a homelessness pressure group, a charity, a TEC and a private sector partner built on the French model of the *foyer*, in designing a new scheme for homeless, jobless young people, (DE 1992, p.268.)

It is also true to say that there has been more interest from the field in developing contacts with social workers in other EC member states, and exploring common problems than from central government. However, with the advent of the Single Market, and the growing realization of the issues which increased migration could raise, this is likely to change.

The local authority associations in the UK have affiliated to some Europe-wide networks, as one way of keeping in touch with issues of common concern. (For an account of some of these, see Harvey 1992.) Individual local authorities - Birmingham is one - have set up offices in Brussels, and many more have allocated European responsibilities to their policy or research units. These posts are in general more concerned with funding than with exchange of information and good practice, but they help to encourage local authority staff to be aware of a European dimension to their work.

Perhaps the most interesting initiatives in the social services have been taken by the local authority in Kent, which has for some years been collaborating with colleagues in the Pas de Calais, in anticipation of new "inter-authority" issues arising from 1992, the Social Charter, and the Channel tunnel. The SSD, and the University of Kent have jointly appointed a researcher and projects manager (at the European Institute of Social Services) to explore the implications of greater involvement with the rest of the Community. Part of the stimulus for this was an interest in funding, but the

research programme has gone much wider than this. The initial publication from the project - An Audit of the Implications of Greater European Integration for Kent Social Services - has become something of a "bible" on the subject for other authorities.

The author has provided an inventory of Community action in the social field, together with impact statements for Kent Social Services, and suggestions for action. He points to policy issues which as yet have not been the subject of Community action, but which have inter-country relevance; to the existing skills and training needs of staff; and to the potential for greater collaboration with French colleagues, (Swithinbank 1991.) The next phase of the project will involve raising the awareness of staff, and developing the contacts on which the initial audit is based.

The policy issues listed by Swithinbank as requiring a European-level or inter-country response are: child protection and child care issues; access to information on clients; problems arising from increased demand on services; the social care needs of migrants and people in transit through Kent; questions relating to charges for services; language and cultural differences; coordination of assessment systems, and definitions of mental health; and collaboration on benefit entitlements. (Ibid. App.3.) In addition, he identifies staffing issues - increased demand for staff, increased mobility - and possibilities for marketing services and expertise in other countries. Some of these points will be of particular concern to the local authority associations.

Apart from the initiatives of individual SSDs, local authority associations, and the professional journals, there are of course a great many voluntary social welfare organizations which have affiliated to Europe-wide

networks, or participated in training activities organized by the National Council of Voluntary Organizations (NCVO). The NCVO has jointly sponsored two studies designed to illuminate the problems and opportunities facing the voluntary sector on a wider European stage, (Harvey 1992; Baine, Benington and Russell 1992); and is taking a particular interest in the institutional issues raised by converging voluntary sectors.

The examples listed here - sporadic and limited at present - nevertheless illustrate a number of ways in which a common interest in reducing or removing social exclusion can draw on a European dimension. The opportunities for exchange of information and experience, promoted by a wide range of Community initiatives including the Observatories; the chance to test approaches and solutions, again through Community experiments; the bilateral consultation prompted by cross-border questions, which must become multilateral with increasing migration - all of these suggest a role for Community-level involvement.

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Annex A

TABLE 1: Unemployed Claimants: by duration, sex and age, at April 1991

<i>United Kingdom</i>		Percentages and thousands					
		Duration of unemployment (percentages)					
	Up to 13 weeks	Over 13 up to 26 weeks	Over 26 up to 52 weeks	Over 52 up to 104 weeks	Over 104 up to 156 weeks	Over 156 weeks	Total (= 100%) (1000s)
Males aged:							
18-19	48.2	24.3	20.7	6.8			119.6
20-24	38.4	22.1	20.9	11.9	3.8	2.8	345.4
25-34	34.4	20.1	19.6	13.5	4.8	7.6	502.8
35-49	32.6	18.7	17.5	12.9	4.7	13.5	417.9
50-59	25.4	14.8	14.5	11.6	5.8	28.0	240.7
60 and over	38.8	23.0	23.5	8.5	1.4	4.9	40.2
<i>All males 18 and over</i>	34.6	19.8	18.8	12.2	4.3	10.4	1,666.6
Females aged:							
18-19	51.3	23.1	19.9	5.6			65.8
20-24	45.2	21.6	19.1	9.0	2.6	2.6	128.3
25-34	43.2	20.8	20.5	8.9	2.5	4.2	136.4
35-49	40.7	18.4	17.8	11.6	3.9	7.6	120.0
50-59	25.1	13.3	15.1	12.4	6.5	27.6	77.8
60 and over	5.6	4.7	4.6	6.1	8.1	71.0	0.6
<i>All females 18 and over</i>	41.4	19.6	18.6	9.6	3.1	7.6	528.8

Source: Social Trends 22

TABLE 2: Unemployment: percentage of workforce, seasonally adjusted annual averages by region

	Number	Percentage workforce		Number	Percentage workforce
South East			East Anglia		
1987	69.4	7.3	1987	657.9	7.2
1988	50.4	5.2	1988	495.8	5.4
1989	35.2	3.6	1989	35.2	3.6
1990	37.4	3.7	1990	37.4	3.7
South West			West Midlands		
1987	172.3	8.1	1987	292.0	11.4
1988	133.7	6.2	1988	229.7	8.9
1989	98.0	4.5	1989	167.9	6.6
1990	97.2	4.4	1990	152.6	6.0
East Midlands			Yorkshire and Humberside		
1987	171.6	9.0	1987	266.4	11.3
1988	137.4	7.1	1988	221.0	9.3
1989	104.7	5.4	1989	175.2	7.4
1990	99.2	5.1	1990	161.0	6.7
North West			North		
1987	383.7	12.5	1987	201.3	14.1
1988	320.7	10.4	1988	171.0	11.9
1989	261.9	8.5	1989	140.0	9.9
1990	234.6	7.7	1990	122.7	8.7
Wales			Scotland		
1987	148.1	12.0	1987	321.8	13.0
1988	123.9	9.8	1988	278.2	11.3
1989	96.1	7.3	1989	233.2	9.3
1990	86.2	6.6	1990	202.1	8.1
Northern Ireland					
1987	122.1	17.0			
1988	113.2	15.6			
1989	105.6	14.6			
1990	97.2	13.4			

Source: Employment Gazette

TABLE 3: Unemployment Rates by Sex and Ethnic Origin

	<i>Great Britain</i>			Percentages	
	1984	1986	1988	1989	1990
Males					
White	11	11	9	7	7
West Indian or Guyanese	30	26	18	15	13
Indian	13	16	11	10	8
Pakistani/Bangladeshi	33	27	24	18	15
Other ¹	19	17	9	8	12
<i>All males</i> ²	12	11	9	7	7
Females					
White	11	10	8	7	6
West Indian or Guyanese	18	19	11	14	-
Indian	20	19	13	9	11
Pakistani/Bangladeshi	-	-	-	-	-
Other ¹	19	17	10	8	9
<i>All females</i> ²	12	11	8	7	7
All persons					
White	11	11	9	7	7
West Indian or Guyanese	24	23	15	14	11
Indian	16	17	12	9	9
Pakistani/Bangladeshi	34	28	24	22	17
Other ¹	19	17	10	8	11
<i>All persons</i> ²	12	11	9	7	7

1 Includes those of mixed origins

2 Includes those who did not state their ethnic origin

Source: **Social Trends 22**

TABLE 4: Households Accepted As Homeless

	1989	1990	% Change 89/90
England	126,700	145,800	+ 15
Wales	6,700	6,600	-1
Scotland	14,400	15,000	+ 4
<i>Great Britain</i>	147,700	167,400	+ 13

Sources: DoE Homelessness Statistics, Scottish Office, Welsh Office

TABLE 5: Reasons For Homelessness

Households for whom local authorities accepted responsibility: reasons for loss of last settled home

	England	
	2nd qtr 1988	2nd qtr 1991
<i>Parents and friends no longer willing or able to accommodate</i>	11,800	15,500
<i>Relationship breakdown</i>	5,300	5,800
<i>Mortgage arrears</i>	2,000	4,300
<i>Rent arrears (local authority or private tenants)</i>	1,100	1,100
<i>Loss of private rented dwelling or service tenancy</i>	4,500	5,200
<i>Other reasons</i>	28,100	36,100

Note: these figures are derived from the DoE's Homelessness Statistics, in which the total number of households accepted are given together with the percentage of these homeless for each reason. The numbers given in this table are calculated using these figures, and are therefore subject to some degree of inaccuracy. Figures for Scotland and Wales are not available.

Source: **Social Trends 22**

Table 6: Mortgage Lenders*: number of mortgages, arrears and possessions

	<i>United Kingdom</i>	Thousands		
		Loans in arrears at end-period		Properties taken into possession in period
		Number of mortgages	By 6-12 months	
1981	6,336	21.5	-	4.9
1982	6,518	27.4	5.5	6.9
1983	6,846	29.4	7.5	8.4
1984	7,313	48.3	9.5	12.4
1985	7,717	57.1	13.1	19.3
1986	8,138	52.1	13.0	24.1
1987	8,283	55.5	15.0	26.4
1988	8,564	42.8	10.3	18.5
1989	9,125	66.8	13.8	15.8
1990	9,415	123.1	36.1	43.9
1991*	9,628	162.2	59.7	36.6

* Council of Mortgage Lenders estimates as at 31 December in each year except 1991, 30 June. Estimates only cover members of the Council, these account for 90 per cent of all mortgages outstanding.

Source: **Social Trends 22**

TABLE 7: School Leavers' Examination Achievements¹: by sex, 1988/89

	Percentages and thousands			
	1 or more 'A' levels ² (or SCE highers)	GCSEs ³ or SCE O/standard (no 'A' levels/ SCE highers)	No graded results ⁴	All leavers (= 100%) (thousands)
Males				
England	20.4	70.6	9.1	317.0
Wales	19.0	65.0	16.0	20.2
Scotland	33.4	52.9	13.7	37.2
Northern Ireland	24.4	51.9	23.7	13.0
Females				
England	20.8	72.5	6.7	300.7
Wales	21.0	68.0	11.0	18.9
Scotland	42.8	47.3	9.9	35.5
Northern Ireland	31.6	54.7	13.8	12.1

1 Excludes results in further education

2 Two 'AS' levels are counted as equivalent to one 'A' level

3 And equivalent grades at GCE and CSE

4 Includes those pupils with no graded results in GCSE, SCE or A/AS levels. Leavers sitting other examinations (eg Certificate of Education, etc) are excluded.

Source: Social Trends 22

Annex B

Government Schemes for Combatting Unemployment

Travel to Interview Scheme

- FOR:** people who have been unemployed for more than **four weeks**
- OFFERS:** financial help with travel to job interviews in the UK, for jobs away from home
- COVERAGE:** nationwide

Job Search Seminars

- FOR:** people who have been unemployed for **three months** or more
- OFFERS:** expert advice on the best ways to seek and apply for jobs
- COVERAGE:** nationwide

Job Review Workshops

- FOR:** anyone considering a **new career**
- OFFERS:** help in assessing the individual's suitability for a range of jobs
- COVERAGE:** nationwide

Jobclub

- FOR:** people who have been out of work for **six months** or more
- OFFERS:** advice and practical support - including resources - in finding a job
- COVERAGE:** nationwide

Job Interview Guarantee

- FOR:** anyone who has been unemployed for **six months** or more
- OFFERS:** range of short-term training and work-experience help, leading to a **guaranteed** job interview
- COVERAGE:** selected areas in England, Scotland and Wales

Restart

- FOR:** compulsory for anyone out of work for **six months** or more
- OFFERS:** expert help in determining a plan of action for getting a job, and benefit advice
- COVERAGE:** nationwide

Restart Course

- FOR:** people aged 18 and over who have been unemployed for **six months** or more, and who do not receive a State Retirement Pension
- OFFERS:** guidance and advice on job-hunting and seeking a new career
- COVERAGE:** nationwide

Training for Adults

- FOR:** anyone aged 18-59 who has been out of work for **six months** or more. Priority is given to people (18-24) unemployed for 6-12 months, those out of work for more than two years, and those with a disability
- OFFERS:** training, provided locally, in a wide range of occupations, including skill-shortage jobs and self-employment
- COVERAGE:** nationwide

Employment Action

- FOR:** those aged 18-59 who have been unemployed for **six months** or more
- OFFERS:** temporary, community-based work aimed at maintaining skills, plus help and advice in finding permanent employment
- COVERAGE:** nationwide

Annex C

The Main Means-Tested and Insurance Benefits

	Beneficiaries	Cost (£)
Attendance Allowance	890,000	1,406m
Child Benefit	6,760,000 (12,165,000 children)	4,636m
Christmas Bonus	12,200,000	122m
Community Charge Benefit	7,795,000	2,192m
Family Credit	315,000	484m
Guardian's Allowance	2,101	1m
Housing Benefit:		
<i>Rent rebate (council tenants)</i>	3,030,000	2,881m
<i>Rent allowance (private tenants)</i>	975,000	1,549m
<i>Community charge rebate</i>	0	0m
TOTAL		4,430m
Income Support	4,165,000	8,545m
Industrial Injuries Disablement Benefit	305,000	510m
Invalid Care Allowance	125,000	213m
Invalidity Benefit	1,270,000	4,459m
Maternity Allowance	20,000	34m
Mobility Allowance	630,000	897m
One Parent Benefit	760,000	216m
Pneumoconiosis, byssinosis and miscellaneous diseases benefit scheme	700	4m
Retirement Pension	9,905,000	22,715m
Over 80 Pension	35,000	35m
Severe Disablement Allowance	295,000	433m
Sickness Benefit	105,000	218m
Social Fund:		
<i>Funeral payments</i>	47,000	27m
<i>Maternity payments</i>	180,000	18m
<i>Budgeting and Crisis Loans</i>	1,055,000	32m
Community Care Grant	245,000	68m
Unemployment Benefit	385,000	808m
War Pensions	265,000	699m
Widows' Benefits	365,000	879m

Source: DSS Facts and Figures, April 1991

Current Rates* of the Main Means-Tested Insurance Benefits

	Rate (£)
Attendance Allowance:	
higher rate (day and night)	41.65
lower rate (day or night)	27.80
Child Benefit:	
for the eldest qualifying child	8.25
for each other child	7.25
Christmas Bonus	10.00
Community Charge Benefit:	
lone parent premium	10.05
Family Credit:	
adult credit (for 1 or 2 parents)	38.30
and for each child aged:	
under 11	9.70
11-15	16.10
16-17	20.05
18	27.95
Guardian's Allowance (per child)	10.70
Housing Benefit	maximum amount payable is 100% of eligible rent
Income Support:	
<i>Personal Allowances:</i>	
Single	
– aged 16-17	23.65 or 31.15
– aged 18-24	31.15
– aged 25 or over	39.65
Couple	
– both aged under 18	47.30
– one or both aged 18 or over	62.25
Lone parent	
– aged 16-17	23.65 or 31.15
– aged 18 or over	39.65
Dependent children and young people	
– aged under 11	13.35
– aged 11-15	19.75
– aged 16-17	23.65
– aged 18	31.15
<i>Premiums:</i>	
Family	7.95
Lone parent	4.45
Pensioner	
– single	13.75
– couple	20.90

<i>Enhanced pensioner</i>	
– single	15.55
– couple	23.35
<i>Higher pensioner</i>	
– single	18.45
– couple	26.20
<i>Disability</i>	
– single	16.65
– couple	23.90
<i>Severe disability</i>	
– single	31.25
– couple (if one qualifies)	31.25
– couple (if both qualify)	62.50
<i>Disabled child</i>	16.65
<i>Carers</i>	10.80
Industrial Injuries Disablement Benefit:	
100% disablement pension (maximum)	84.90
Exceptionally severe disablement allowance	34.00
Constant attendance allowance (maximum)	68.00
Reduced earnings allowances (maximum)	33.96
Retirement allowance (maximum)	8.49
Invalid Care Allowance	31.25
Invalidity Benefit:	
– higher rate	11.10
– middle rate	6.90
– lower rate	3.45
Basic invalidity pension	52.00
Extra benefit for dependent adult (maximum)	31.25
Extra benefit for dependent child	9.70-10.70
Maternity Allowance	40.60
Mobility Allowance	29.10
One Parent Benefit	5.60
Pneumoconiosis, byssinosis and miscellaneous diseases benefit scheme:	
Total disablement allowance	84.90
Partial disablement allowance	31.25
Retirement Pension:	
Basic retirement pension	
Man or woman (own contributions or late spouse's contributions)	52.00
Man or woman (spouse's contributions)	31.25
Extra benefit for dependent adult	31.25
Extra benefit for dependent child	9.70-10.70
Non-contributory pensions	

– full rate	31.25
– married woman's	18.70
Over 80 addition	0.25
Over 80 Pension	31.25
Severe Disablement Allowance	31.25
age-related additions:	
– under 40	11.10
– under 50	6.90
– under 60	3.45
Extra benefit for dependent adult	18.70
Extra benefit for dependent child	9.70-10.70
Sickness Benefit:	
Over pension age	49.90
Under pension age	39.60
Extra benefit for dependent adult	29.95
Extra benefit for dependent child	24.50
Social Fund:	
Funeral payments – the cost of a simple funeral	
Maternity payments – up to 100	
Budgeting and Crisis Loans – repayable interest-free loans	
Community Care Grant – non-repayable grant	
Unemployment benefit:	
Over pension age	52.00
Extra benefit for dependent adult	31.25
Under pension age	41.40
Extra benefit for dependent adult	25.55
Widow's Benefits:	
Widow's payment (lump sum)	1,000
Widowed Mother's Allowance	52.00
Widow's pension	52.00
Widow's pension (age-related)	15.60 (at 45) - 48.36 (at 54)
Extra benefit for dependent child	9.70-10.70

Source: DSS Facts and Figures, April 1991



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