

ACCESS : Cottonera Community Resource Centre

Richard Hickey
St. Bridg's Family Resource Centre

1. Relevance of the policy to Ireland

Under the National Action Plan for Social Inclusion 2007-2016 (NAPinclusion), the Irish Government is committed to a coherent strategy for social inclusion based on the lifecycle approach. This approach identifies the three main groups - children, people of working age and older people. The NAPinclusion sets out a wide-ranging and comprehensive programme of action to address poverty and social exclusion within this lifecycle framework. To ensure that a decisive impact on poverty is made, the Irish Government believes that significant interventions are required to prioritise a small number of high level goals covering such themes as education, income support, employment and participation, community care, health and housing.

These targeted actions and interventions are designed to mobilise resources to address long-standing and serious social deficits with the ultimate aim of achieving the objective of reducing consistent poverty. The overall goal of this Plan is:

To reduce the number of those experiencing consistent poverty to between 2% and 4% by 2012, with the aim of eliminating consistent poverty by 2016.

Similar to the ACCESS programme in Malta, a key resource for the progression of a number of themes identified in the Irish NAPinclusion is the national network of Family Resource Centres (FRCs), (currently 100 centres throughout Ireland), which are core funded by the Family Support Agency, a statutory agency under the auspices of the Minister for Social and Family Affairs. FRCs are community-based organisations which take a proactive and innovative approach to identifying the needs of families and communities and in providing community-based supports based on those needs. They are run by voluntary management committees made up by people from the local community and are supported by regional and specialist support agencies.

Family Resource Centres work from the principles and practice of community development. Community development is seen as an effective way of empowering disadvantaged people by involving them in decisions which affect them and in using and developing their own skills, knowledge and experience.

The Family Resource Centre National Forum (FRCNF) is the national representative body of Family Resource Centres in Ireland. As a representative body, the FRCNF provides information, support and networking and training opportunities for its members. One of the key objectives of the FRCNF is to raise key policy issues affecting Family Resource Centres at a national level.

The ethos of FRCs is a set of beliefs and an approach to strengthening and empowering families and communities so that they can foster the development of children, youth and family members.

It entails statutory and voluntary agencies working together to become responsive, flexible, family-focused and holistic in meeting the needs of families at various stages in the lifecycle.

As with the ACCESS Project, the benefits of this approach include:

- the participation of people experiencing poverty and disadvantage in their own development and the development of their community;
- tailoring specific solutions to address the specific difficulties being experienced by a community; and
- addressing difficulties within a community quickly and with local knowledge that comes with working with a community over the longer-term.

2. Similarities/differences of the policy with the experience of Ireland

a) Similarities

There are a number of similarities between the ACCESS Project and the Family Resource Centre Programme in Ireland;

- Family Resource Centres (FRC) very often operate in similar circumstances to the ACCESS Project. FRC's are community based organisations (with voluntary Boards of Management) who take a pro-active and innovative approach in identifying the needs of the family and in providing community-based supports.
- Both have as their central aim the empowerment of individuals and communities through facilitating and supporting them in taking an active role in bringing about positive change, mobilising resources within the community, building informal and formal supports, supporting community participation in order to foster a sense of ownership.
- While Family Resource Centres (FRCs) are located around the country, many of the areas (particularly urban areas) in which they are based have similar social demographic characteristics as those in Cottonera and Kalkara: higher levels of unemployment and poverty relative to the population generally and lower levels of educational attainment.
- Both the FRCs and ACCESS consider the role of the family (taking into account different family forms) as central and aim to provide services and supports to improve the functioning of the family unit.
- Goal B.2 of the Main Elements of the Policy (page 7, Discussion Paper) is that "*ACCESS aims to be a catalyst for sustainable community development and long-term social change through a genuinely collaborative, participatory, holistic and empowering approach which improves the quality of life for all residents in Cottonera and Kalkara*". This is a key goal and similar to the goals of Family Resource Centres.

b) Differences

- The ACCESS Project is more wide ranging in the level and number of services available (social workers, ETC job centre).
- The ACCESS Project as outlined brings together five entities – the Social Welfare Development Programme (APPOG), the Housing Authority, Social Security Department, Adult Training Centre and the Employment and Training Corporation. While the Family Resource Centres provide information from a range of service providers and can assist people in their dealings with these bodies, they are not brought together in this formal way through the Centres. Instead the emphasis in the Centres is on creating successful partnerships between the voluntary and statutory agencies in the area concerned. The bodies which the Centres will work with may vary from area to area and will be decided upon based on the needs of the community. Examples of bodies which the Centres work with include – local authorities, regional health service executives, local educational boards, local partnership committees, voluntary and community groups etc.
- A third difference between the two relates to the governance of the projects. The ACCESS Project falls under the Ministry for the Family and Social Solidarity (MFSS) in Malta, while the FRCs fall under the Family Support Agency, which in turn falls under the aegis of the Department of Social and Family Affairs. In this regard, the Department in Ireland while providing funding for the Programme is slightly more removed from the operation of the Centres than is the case in the ACCESS Project. Also, officials from the MFSS sit on the Board of ACCESS, whereas this is not the case in Ireland, where Boards of the individual Centres are made up of people from the local community.
- The FRC's are managed by local voluntary Boards of Management against the more centralised management of Access. It is noted that in relation to ACCESS, "a culture of service user involvement is slowly gaining ground among the Board of Directors and Management Team" and "a consciousness of the need to involve service users at various levels of planning, delivery and evaluation of service".

3. Potential transferability of the policy to Ireland

As outlined above, the basic "resource centre" concept has been in place in Ireland for more than 10 years, through the network of Family Resource Centres. The concept of a 'one stop shop' approach to service delivery, as the ACCESS Project presents has been discussed in Ireland. Increasingly there is a focus on the need to deliver services in an integrated manner to meet customer needs at various stages in their lives.

It is not clear however, if the FRCs would be the vehicle through which this could be achieved or if this would be a favoured option. A number of issues would arise in considering if the remit of the Family Resource Centres should be expanded to include a wider range of services as outlined in the report of the Maltese ACCESS Project. These include:

- Whether to retain the voluntary management structure of the FRC,
- The extent to which it may change the nature of FRCs / would they lose an element of their community development and empowerment ethos (this does not seem to be the case in the ACCESS Project and this is something that could be explored further),
- Is there a value in the FRCs being slightly removed from statutory bodies?
- Privacy issues for service customers,
- Client confidentiality issues,
- Accommodation – many centres are running at full capacity and actually lease extra rooms for the provision of current services,
- Cross-discipline training (even if just for referral purposes). In Ireland, many of the services outlined in the Maltese document are provided directly by other Departments or Agencies.

It would be interesting to examine individual aspects of the work of the ACCESS Project, particularly in the areas of young children and parenting, to ascertain whether elements could enhance the work currently done in FRC's geographic areas.

4. Questions raised and debated in Ireland

The aim of a Family Resource Centre is essentially to help combat disadvantage by supporting the functionality of the family unit. FRCs can provide services for lone parent families, young mothers and others considered in need of extra support and can act as a first step to community participation and social inclusion. Social inclusion is about ensuring the marginalised and those living in poverty have greater participation in decision making which affects their lives, allowing them to improve their living standards and their overall well-being. The ongoing development of the FRC network has recently been discussed and approved under the terms of the National Development Plan 2007-2013.

The need for integrated service provision in meeting customer needs is increasingly being focused upon in Ireland. This issue has most recently been brought to the fore in discussions regarding reform of supports to lone parents and low income families, where income supports are just one element of the supports needed by these families – others being education and training, support with accommodation costs and childcare supports.

The whole question of state supports and how they are delivered and perceived in areas of disadvantage is topical. The question of cohesion of state and voluntary services in such areas is being examined.

5. Potential contribution to the objectives and strategy of Ireland's National Strategy Reports on Social Protection and Social Inclusion.

The NAP/inclusion 2007-2013 states that priority in funding will be given to family resource centres which serve those areas where communities are contending with multiple disadvantages. It goes on to confirm that the Family Support Agency will work with County and City Development Boards to ensure a more cohesive approach to the delivery of family focused social inclusion services provided through Family Resource Centres.

The National Report for Ireland on Strategies for Social Protection and Social Inclusion (National Report submitted to the EU 2006) alludes to the difficulties that vulnerable groups can experience in accessing quality services. The National Report contains a commitment to investment in services to improve access to and the quality of services such as health, housing, transport, income support with a particular focus on those who are experiencing poverty and social exclusion.

At national level, a 'joined up' approach is being taken to policy development and policy initiatives of a cross-cutting nature are being promoted. For example, at national level the multi-dimensional approach being taken to tackling child poverty involves increased focus on supporting employment participation for the parents of children combined with appropriate income supports and access to services including childcare, education, health and housing.

At local level, Social Inclusion Units are being established in county and city local authorities. Local authorities are the democratically elected local tier of public service and they have responsibilities in social inclusion related areas such as housing and community development. The main role of the Social Inclusion Units is to tackle social exclusion across the range of local authority activities in a cohesive and focused manner and in co-operation with other relevant agencies at local level.

6. Key issues and main questions proposed for debate at the review meeting.

How ACCESS functions

- The document states that "there is no common set of policies and procedures as each entity responds to a parent company". Is there a reason why the various parent organisations do not agree mutually inclusive policies when it comes to the ACCESS programme? The report outlines that each "parent company is an agency in itself and collectively they might have policies in common". Does this raise difficulties if there are different policies and objectives in place in the context of this 'one stop shop' operation? How are these resolved?
- The document states that "on an informal basis users are often referred to other services by the service provider which is their first point of contact. This is facilitated by the

fact that all entities are based in the same complex". Should there not be an agreed protocol in place to ensure the service provider first contacted by clients refers them onwards to a more suitable service provider, if necessary (e.g. staff providing parenting courses may wish to refer to social worker for assistance). Is there a need for an intake staff to determine the needs of the centre customers and then make the necessary referral?

- The speed at which service users can be involved in the management of the project. The Irish experience is that it is a slow process involving training and support in project management and community development. The results, however, are well worth the effort.

7. Measure of success of policies in Ireland

Each Family Resource Centre prepares an annual report which not only outlines the financial position of the FRC and an overview of the services and supports provided, but also details the numbers of clients assisted by these supports and specifies the likely future challenges to be faced.

The network of Family Resource Centres now has a common electronic reporting tool, focusing on strategic planning, evaluation and knowledge networking, which gives each FRC the capacity to self-evaluate; leading to a comprehensive understanding of the work of the organisation and the impacts of that work, and uses that new understanding to improve strategic and work planning for the organisation.

Information provided through the new computer package from each FRC is collated into a national programme database, creating an information repository of enormous potential to understand the full programme and its impacts, and most importantly to influence the direction of the programme and related areas of policy and practice.

The first report drafted under the new system collated information from 64 Family Resource Centres in 2005 and was published in January 2007. The reporting tool is being rolled out to all 100 Family Resource Centres during 2007.

The key findings of the report for 2005 included:

- That the 64 FRCs surveyed had 968 voluntary committee members (690 female & 278 male). Together their time commitment added up to 18,549 hours.
- More than 136,000 people were advised or given information
- The number of people referred onwards to other services was 31,852
- 15,575 people completed education courses during the year
- 14,490 people completed training courses during the year
- 5,369 people completed self development courses during 2005

The 64 FRCs were asked to rank the key issues they faced in order of importance. The top ranking issues are as follows:

1. Childcare
2. Education
3. Equality
4. Amenities
5. Drug use
6. Employment
7. Mental Health
8. Disability
9. Physical Health
10. Domestic Violence
11. Environment
12. Transport
13. Housing