

Eurodiaconia response to the European Commission’s consultation on Modernising social protection for greater social justice and economic cohesion: taking forward the active inclusion of people furthest from the labour market COM(2007) 620 final

We welcome the package of policies proposed in the Active Inclusion Communication and we support such an integrated approach as this is necessary for effective inclusion policies. We would like to stress, however, that active inclusion understood as the policy combination referred to in this Communication¹ is a means, and not an aim. The aim should be social inclusion, and in general this should not only be for those furthest from the labour market, but for all.

We refer below to specific sections in the Communication.

2.4 Participation and integration of all relevant actors

Service providers, including NGOs, not only “*play a key role in implementing these policies at local level*” but also can and should play a key role in assisting the design of policies as they have much valuable experience and expertise on the ground, including in labour market integration. We would also like to point out that civil society organisations, including many of Eurodiaconia’s members, are providers *and* advocates.

4. Envisaged EU action

We appreciate the opportunities offered by the OMC for consultative social policy making, but agree that it is necessary for the process to be strengthened, and for Member States to be better held to account, for example through well-targeted evaluation and recommendations. We agree that principles would help this process but that commitment by Member States to fully engage with the process is more important.

4.1 Income support to avoid social exclusion

In discussing minimum income we would understand social inclusion also to comprise the ability to participate in social and cultural activities. We appreciate the commitment to develop common indicators.

We welcome the strong commitment made in the 1992 Council recommendation but point out that there are many countries that do not have a minimum income scheme allowing people to live in dignity. Member States must also commit to funding such schemes as a priority to ensure that they achieve their aim.

4.2 Link to the labour market

We would like to stress the importance of coordination with the Employment guidelines, but welcome the potential of additional guidance in this area. We call for strengthened interaction with the Open Method of Coordination on social protection and social inclusion and for the monitoring of the social impact of reforms. We also stress the need for policies that assist and support those who

¹ Comprising income support, a link to the labour market and better access to quality services

will not be able to enter the labour market. The designing of active inclusion policies should be done in consultation with those these polices should help.

4.3. Link to better access to quality services

As explained in our joint response to the 2006 consultation on social services, “statutory and complementary social security schemes” are not in themselves “social services”, but social security schemes are implemented by social services².

We welcome the recognition of the importance of social services here but stress the need for a coherent approach by the Commission so that the importance and the specificities are also taken into account in other areas such as the application of state aid and internal market rules.

We welcome the emphasis on quality services, but stress that quality should lead to improvements in the lives of those who use the services. In some instances integration policies are more important than quality, such as in the area of homelessness.

We expect that the principles developed will be taken into account in the formulation of the “*voluntary EU quality framework providing guidelines on the methodology to set, monitor and evaluate quality standards*”.³

Accessibility of Services

Access to social services is a fundamental right – specifically as seen in Part 1 article 14 of the European Social Charter and Article 34 1 of the Charter of Fundamental Rights.

“*Equality both in recruitment policies and in service provision*” are also rights guaranteed by anti-discrimination legislation.

As life risks are often structural and not individual, public responsibility, and therefore financial commitment, is necessary at all levels of government to ensure access – that service providers are able to provide quality services. It must be recognized that improving the quality of services will usually lead to an increase in cost. Everyone should have the right of access to quality services. Therefore the scenario in which a two-tier care system develops, whereby in some areas only low-quality care is accessible because quality services are not affordable should be avoided by sufficient funding. The Lisbon Treaty states with reference to services of general interest that “*The Union and Member States...shall take care that such services operate on the basis of principles and conditions; in particular economic and financial conditions, which enable them to fulfill their missions*”.

Health and social services are not provided within a ‘normal’ supplier/consumer relationship and often those with the least financial means have the most needs. Therefore it is essential to ensure social and health services are provided on the basis of solidarity, as market mechanisms would not guarantee access to services for all⁴.

We welcome the recognition of accessibility as comprising both spatial (we understand this to mean geographical) and physical accessibility.

² See: [Joint response to the Social Services of General Interest Questionnaire](#)

³ COMMUNICATION Accompanying the Communication on "A single market for 21st century Europe" Services of general interest, including social services of general interest: a new European commitment

⁴ See also: [Joint response to the Consultation from the Commission regarding Community action on health services](#)

To guarantee users' rights we would propose these measures:

- That staff are trained in human rights issues
- That users are informed of their rights
- That there are procedures in place to ensure user protection and that complaint mechanisms are easily accessible

We also call for the monitoring of the impact on service users of the increasing number of unqualified care workers.

Quality of services

User involvement;

To involve and empower users we would propose these measures:

- Freedom of choice of providers
- That users are informed of the services available (especially those who are less capable of informing themselves); and that an easy comparison of services is possible, including quality
- That users participate in creating, evaluating and where relevant in carrying out or assisting in carrying out the service

Monitoring, performance evaluation; sharing of best practice;

We would add *Partnership*: the involvement of all stakeholders in social planning, formulating and evaluating of services, particularly through the OMC, and that coordination of local authorities with and between providers is facilitated.

Working conditions –We agree that this is an important issue that deserves much attention and feel that it should be perhaps dealt with separately.

We call on Member States to close legal loopholes that allow the exploitation of migrant workers, such as when employers overcharge for workers' accommodation, and for the Commission to assist Member States in this work.

Investment in human capital – this should include Life Long Learning and skills development, if this refers to staff this is part of good working conditions. We would welcome the identification of career pathways which allowed care workers to move between care and support disciplines becoming multi-skilled.

coordination and integration of services

We understand this to mean that services are person-oriented

- That the individual's needs are catered for through comprehensive, personalised services
- That the services are flexible and responsive to new needs
- That integrated provision of services should include health services.
- That there is human interaction with the service provider
- That there is respect for and that services cater to the individual's culture and faith and help people to live in dignity
- That there is continuous, uninterrupted provision of services to avoid the negative impacts of disruption

adequate physical infrastructure

We would see this more as a question of access – a prerequisite – than an element of quality.

5. A supporting EU framework

We refer to EAPN's response as a member of this network and reiterate their call for the EU level to ensure that detailed guidance should be given to the Member States and that the implementation of the common principles is driven by a clear and consistent commonly-agreed vision, by means of guidance, reviews and exchanges. It is essential that such a vision be mainstreamed in all EU policy for it to be effective, particularly in the Lisbon Strategy.

As well as monitoring the principles to be drawn up, policies and rules that affect or regulate the functioning of social services should also be carefully assessed and action taken to address negative impacts if necessary, through for example the biennial reports. We call for close coordination of these processes. We would also welcome the development of a social impact assessment mechanism within the Commission.

We agree that the network of local observatories could function well as stakeholder forums for monitoring and exchange including forums of service users, and should allow exchange on both a national and European level.

We stress the need for a stable and supportive operating environment at both EU and national level that enables providers to provide quality integrated services that meet differing needs, ensuring sustainability of the services and that the general interest can be upheld in procuring and providing the services. We would recommend that quality criteria be made mandatory in tenders for social and health services to ensure that this is taken into account, by amending the Directive 2004/18/EC.

Eurodiaconia welcomes the possibility of using EU funds to work on integrated social inclusion measures, but there is a need for effective monitoring at national and EU level of member states' use of funds such as the ESF to ensure that projects benefit those they are meant to target. We call on the Commission to take action where there is evidence of discrimination against faith-based service providers who seek EU funds to provide services for social inclusion.

Brussels, February 2008

Heidi Paakjær Martinussen
Secretary General
Eurodiaconia

martinussen@eurodiaconia.org

Tel: +32 2 234 38 60

www.eurodiaconia.org

***Eurodiaconia** is a federation of 34 members - churches, non-statutory welfare organisations and NGOs in Europe - operating at national and international level. Our members are rooted in the Christian faith within the traditions of the Reformation as well as in the Anglican and Orthodox traditions. We network diaconal and social work of institutions and church communities and co-operate with civil society partners*

***Our Mission:** We link our members to serve for solidarity and justice. Our strategic aims are to ensure quality of life for all in a social Europe, to link institutions of diaconia, social initiatives and churches in Europe, to be and to enhance a network of competence*