

Breakthrough Northern Ireland

September 2010



THE CENTRE FOR
SOCIAL
JUSTICE

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Introduction



Northern Ireland is a country of great natural beauty, with a diverse social landscape and, at least until 2008 an expanding economy. In terms of social policy, it boasts the advantages of a devolved legislature and a comparatively small population just under 2 million people. Its devolved governance facilitates localised decision making across Northern Ireland, autonomy to identify the most appropriate policy areas for development and the delivery of public services at arm's length from Westminster.

Northern Ireland's capital Belfast, a modern, bustling city, is behind only London and Edinburgh in the UK in terms of Gross Value Added (GVA) per head¹ and is, at first glance, unrecognisable as the place whose Troubles once dominated our TV screens. However, dig deeper and you find a city where deprivation, family breakdown and educational under-achievement characterise a new generation increasingly lost to gangs, addiction and crime. These deep-seated issues are compounded by the legacy of conflict and social division which still affect many parts of Northern Ireland society today.

The political system in Northern Ireland was primarily concerned with the necessity of delivering political stability. However, now it must begin to provide answers to these severe social problems, and begin to reverse the impact of intergenerational social breakdown.

Legacies and Breakdown

The significance of the peace process in Northern Ireland, culminating in the formation of a devolved government – the Northern Ireland Executive – is important in assessing the effectiveness of the delivery of social policy. The structures put in place brought together conflicting national ideologies in an attempt to resolve years of crisis, generated by the lack of a shared national identity. Yet these structures deliver vital services to the most disadvantaged people in Northern Ireland in a way that focuses on treating the symptoms of

¹ Excluding Extra-Regio - off-shore contribution to GVA that cannot be assigned to any region (see background note 7). Cities only (excludes Berkshire). Statistical Bulletin: Regional, sub-regional and local GVA Page 3. NUTS3 local areas: Top five and bottom five GVA1 per head, 2007. Office for National Statistics (2009)

social breakdown. A social justice approach at the heart of politics emphasises the need to tackle its underlying causes.

Over the past year, we have spoken to hundreds of poverty fighters across Northern Ireland at hearings, visits and events. We have established connections with a variety of grassroots voluntary and community organisations who have conveyed to us the complexity and deep-rooted nature of poverty in Northern Ireland. *However, for too long, Northern Ireland's social problems have been addressed only through the lens of the legacy of conflict and sectarian divisions.*

While the hallmarks of conflict remain important factors in social breakdown in Northern Ireland, many people face issues entirely in common with social problems across the UK as a whole. Increasing family breakdown, third-generation educational underachievement, perpetual and widespread worklessness, cycles of addiction and serious personal debt are often entrenched in our poorest communities and trap some of our most vulnerable people.

The work of the Centre for Social Justice recognises these five key 'pathways to poverty', and aims to reverse the ingrained and cyclical social breakdown they generate:

- family breakdown
- educational failure
- economic dependency
- addictions
- indebtedness

These pathways are all interrelated. Children from broken homes are twice as likely to have behavioural problems, perform worse at school, become sexually active at a younger age, suffer depression and turn to drugs, smoking and heavy drinking.²

A large body of research has informed the work around these five pathways to poverty and many of the policies from *Breakthrough Britain* and other Centre for Social Justice publications are presented here as effective solutions. These need to be locally grounded in the economic, social and political climate of Northern Ireland and implemented urgently.

Although social breakdown may be more pronounced in a society marred by a legacy of social division and inter-community conflict, the fundamental need to tackle the underlying drivers of poverty and interrupt cycles of intergenerational social exclusion remains the same.

² The Centre for Social Justice Green Paper on the Family. (January 2010). The Centre for Social Justice. See www.centreforsocialjustice.org.uk

CHAPTER ONE

Economic Dependency and Worklessness in Northern Ireland



The long-term male claimant count has more than doubled to over 11,000 in the last year.³

1.1 Introduction

Work is a good thing: beyond the obvious gains of long-term provision and independent financial stability, employment contributes to healthier living, the development of social networks and the promotion of the essential link between effort and reward. The consistent benefits of gainful employment and earned income are simply unavailable to those whose primary source of income is found in state welfare.

This chapter looks at the scale of worklessness in Northern Ireland. It then demonstrates the link between worklessness and entrenched poverty, ill health and family breakdown. It investigates the root causes of the problem and the impact of recent labour market policy on worklessness. The chapter ends with policy recommendations for the future.

1.2 Scale of worklessness in Northern Ireland

Northern Ireland suffers from the second highest claimant count (6.2%) and the highest levels of economic inactivity in the UK.⁴ In common with the rest of the UK, the problem is concentrated in deprived areas.

- Unemployment has reached 56,000 in 2010, growing from 25,000 at the start of 2008⁵
- Long term unemployment is estimated as 40% of total unemployment

3 The Northern Ireland Claimant Count, 2009 -2010. Department of Enterprise, Trade and Investment Northern Ireland (DETINI). Claimant Count Trends, Long-term Claimant Count. Table 3.5

4 <http://www.northernireland.gov.uk/finalbudget.pdf>; p.14: 2.40

5 http://www.pwc.co.uk/pdf/nieo_july_2010.pdf; P.3

- The total cost of social security administration in Northern Ireland was £228m in 2009-10⁶
- Over half of those claiming Income Support (IS) have done so for over five years⁷
- Experiences of worklessness and poverty are usually (and understandably) interlinked: 72% of workless households in Northern Ireland are in the bottom quintile for household income before housing costs (BHC)⁸
- 14% of all children in Northern Ireland are living in workless households⁹

“If you’re on benefits people are looking down on you. Think you’re sponging off them and stuff. We’re not doing it through choice we’re doing it because we have to.”

Witness at Centre for Social Justice hearing (2010)

The prevalence of long-term unemployment (those who haven’t worked for over 12 months) is particularly concerning because it reveals how difficult it is for many people to escape the cycle of worklessness.

Juxtaposing neighbourhoods

The coexistence of the five pathways to poverty – family breakdown, educational failure, addiction, indebtedness, and worklessness and economic dependency – can be seen as they occur in certain geographical areas. Whiterock in south-central Belfast is the most deprived ward in Northern Ireland; about five miles from Whiterock is an area called Knockbracken, which is the 5th least deprived ward.

Whiterock¹⁰

- Worst employment rates in Northern Ireland: one in ten people are unemployed
- Lowest household incomes in Northern Ireland: over a quarter of households in Whiterock are in poverty according to official measures
- Low educational attainment: 80% of individuals have no or low qualifications
- Worst levels of health and disability in Northern Ireland: nearly one in three people are suffering from a long-term illness
- Widespread family breakdown: lone parent families make up over 27% of households in Whiterock and over 80% of births are to unmarried mothers

6 <http://www.northernireland.gov.uk/finalbudget.pdf> p.112

7 Income Support claimants by duration of current claim: August 2003 to August 2009. Table 3.1.Income Support - Summary of Statistics (DSDNI, ONS)

8 Table 4.1(AHC): Quintile distribution of income for children by various family and household characteristics. Northern Ireland Labour Force Survey (LFS). Department for Social Development (DSDNI) 2006/7

9 Ibid

10 Northern Ireland Neighbourhood Information Service (NINIS). Northern Ireland Multiple Deprivation Measure (NIMDM) 2010. SOA Whiterock 2

Knockbracken¹¹

- In the least deprived 4% wards in Northern Ireland for employment
- 90% of births to married mothers
- Lone parent families make up only 4% of households in Knockbracken
- Only 4% of households in poverty – less than half the national average (8.1%)
- Less than half the rate of long-term illness of Whiterock

Only five miles from each other, the areas of Whiterock and Knockbracken reveal huge levels of disparity, pointing towards the interrelatedness of pathways to poverty, and the entrenched and intergenerational cycles of family breakdown, educational failure, worklessness and ill-health.

Worklessness was the subject of two reports by the Centre for Social Justice. In *Breakthrough Britain*, we argued that economically inactive people needed access to personalised support to overcome employment barriers and move into the workplace. The *Dynamic Benefits* publication reviews the benefit system in the UK benefits system and proposed a radical recasting of state support for the jobless and low-paid. Both reports made a number of policy proposals that have been implemented or are currently being actively considered by the coalition Government.



Source: Barnardos Northern Ireland

Both reports are important because of the impact of worklessness on our society, and the failure of the existing system to address the problem. Worklessness is devastating for the individual, damaging for the economy, and severely detrimental to the next generation. The interplay between long-term economic dependency and worklessness traps people in material poverty and, commonly, in a state of intergenerational social immobility and exclusion. Those who have experienced years of worklessness and economic dependency are more likely than others to suffer severe poverty and therefore to face significantly lower life chances. The intergenerational nature of the problem has implications for children growing up in workless households; a child who grows up without a working role model is far less likely to be in work themselves as an adult.

A note on the economic downturn

The recent economic downturn is affecting people from all kinds of backgrounds and income levels. However it must be noted that long-term

¹¹ Northern Ireland Neighbourhood Information Service (NINIS). Northern Ireland Multiple Deprivation Measure (NIMDM) 2010. SOA Knockhaven

worklessness is not an expression of cyclical unemployment and redundancy. A significant proportion of Northern Ireland's worklessness and economic dependency is not a product of the recent economic downturn but of long-term social exclusion and the inadequacy of current welfare policy to facilitate transitions to work. Many of those trapped by worklessness have been so for longer than there has been a recession. Nearly half of those claiming Income Support (IS) have been doing so for over five years – way before the beginning of the downturn.

The benefits system is in place to help the poorest people in Britain, whether by 'topping up' lower-end incomes, facilitating difficult transitions to work or in cases of redundancy. In reality, too many people find themselves wholly dependent on state welfare as a main source of income. The design of

current welfare does not enable these people to escape entrenched economic dependency, and so it becomes long-term. Long-term worklessness and economic dependency affect the most disadvantaged people in Northern Ireland, who are more likely to experience other 'pathways to poverty'. Family breakdown, the severe restriction of educational failure, and often the chaos of addiction and indebtedness exacerbate existing problems. Current policy is failing to reverse cycles of social breakdown in Northern Ireland, and many thousands are entrenched in worklessness and perpetually dependent on the state for their household income.

1.3 Barriers to labour market engagement

1.3.1 WORKLESSNESS AND FAMILY BREAKDOWN

Today, one in five households with children in Northern Ireland is a single parent family and children of single parents are overrepresented in statistics on workless households (where there is nobody in work):

- Over 100,000 children are in lone parent families in Northern Ireland, nearly two thirds of whom (61%) are in workless households¹²
- There are around 63,000 children in poverty, with around 75% of lone parent households experiencing poverty¹³
- Fathers are likely to be absent from nearly 25,000 economically vulnerable households receiving income support (IS) in Northern Ireland¹⁴
- Those living in households where there are no working adults are nearly ten times more likely to be below the poverty line than households where both adults are in work.¹⁵

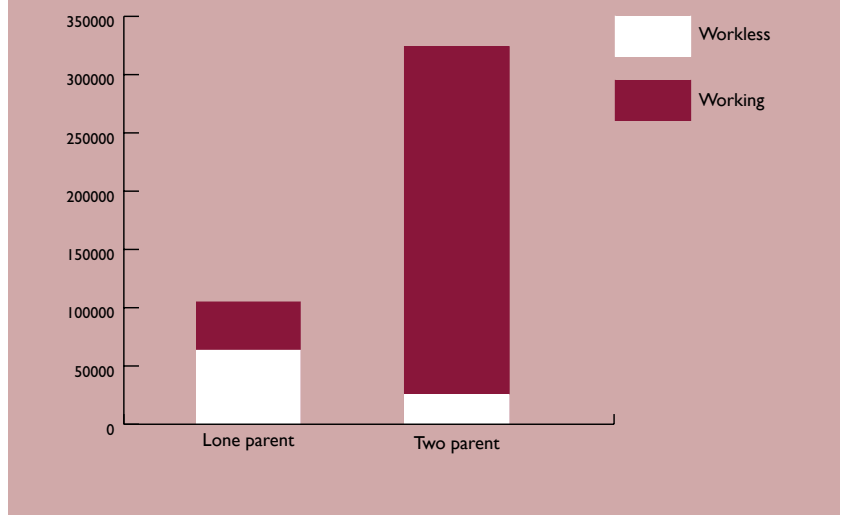
12 Northern Ireland Labour Force Survey (LFS). Chapter 4: Children (DSDNI) 2006/7

13 DSD STATISTICS AND RESEARCH BULLETIN: 5. April 2008: Poverty in Northern Ireland. DSDNI

14 Income Support: Summary of Statistics (DSDNI, ONS) 2009

15 Department of Work and Pensions, Households Below Average Income 2003/04, table 5.7

Figure 1. A greater proportion of children in lone parent families grow up in a workless household



As a result, children in workless households are far more likely to experience social breakdown. They are likely to do worse in school, experience worklessness themselves, earn less if they do enter employment, and become parents during their teenage years. They are also more likely to experience poverty and social exclusion than children raised in a two parent household.¹⁶

The correlation between worklessness and single parent families is unmistakable, as indicated by the proportion claiming Income Support (IS) in the table below.

Table 1. The proportion of single parent families is unmistakable, as indicated by the proportion claiming Income Support (IS) in the table below

Family Type	Numbers Claiming IS ¹⁷	Household projection count (May 2009) ¹⁸	Estimated proportion claiming IS
Single without dependents	48,000	215,000	22.3%
Single with dependents	32,000	43,000	74.4%
Couple without dependents	5,000	188,000	2.6%
Couple with dependents	6,000	177,000	3.3%

¹⁶ A better way to help the low paid, US lessons for the UK tax credits system, Rupert Darwall, Centre for Policy Studies, 2006, p.5

¹⁷ Income Support: Summary of Statistics (DSDNI, ONS) 2009

¹⁸ Northern Ireland Household Projections, 2006-2031. NISRA Archive

Nurture versus work

Many single parents struggle to meet social and personal expectations both to work for a living and to care for children. Without a partner with whom to share the work, many find themselves struggling with an awareness of the prime importance of intensive parenting in the early years and the benefit for a child of having a parent in the workplace. A survey conducted by the charity Employers for Childcare among unemployed women in Northern Ireland found that 50% of those surveyed felt that lack of suitable childcare was the most significant barrier to employment.¹⁹ While affordable statutory childcare could allow parents to work more hours, it does little to increase choice for parents who want to spend more time with their children, and risks undermining the importance of nurture and the role of a parent during the early development of a child.

The struggle for many single parents to meet their family's competing financial and nurturing needs is expressed in the following accounts:

"You can't take time off for your kids or you'll lose your job, but you can't work full time when you've got kids."

Witness at Centre for Social Justice hearing (2010)

"I haven't been able to work because [my kids] are still young and there's nobody else to mind them."

Witness at Centre for Social Justice hearing (2010)

"We're not [on benefits] through choice, we have to do that because we're on benefits looking after our children...I think it's nice to have children and look after them."

Witness at Centre for Social Justice hearing (2010)

"You need a babysitter. If you work part-time, you lose so much on your heating and the lot. So, you could get a part time job and make £50 a week. But, overall, you could've lost £100 a week! On babysitters and that. That's what's happening up here, young mothers are staying on benefits."

Witness at Centre for Social Justice hearing (2010)

The cost of securing appropriate childcare is considerable and many single parents find that employment provides inadequate financial benefits – and

¹⁹ Kinnear, H. (2003). The Childcare Barrier: Is childcare the most prohibitive factor for women in Northern Ireland who want to work? Employers for Childcare

often requires working inconvenient hours. A child growing up without a parent in work is more likely to adopt an apathetic approach towards earnings than they would otherwise have and thus to repeat the cycle of worklessness and ‘going it alone’ on benefits:

“It’s just the way it is, you don’t have to get married, you don’t have to get a job, and young kids are hearing that and they think that’s the way it is, oh I have a single mum, and it’s just the normal thing.”

Witness at Centre for Social Justice hearing (2010)

“Nobody’s giving us any incentive, or the kids any incentive to go to work full time, instead of being on benefits. They can afford to pay rent and everything else [unless] it gets paid for them, again with young children”

Witness at Centre for Social Justice hearing (2010)

Single parents in Northern Ireland are more at risk of economic disadvantage, worklessness and economic dependency than other household types.

The safety of a life on benefit combined with an ineffective benefit system fosters a dependency mentality among the poorest. It can also result in an uphill struggle to foster paternal responsibility when families separate:

“If a fella goes out to work, he has to pay his wife and family a fortune... if they go on benefits they have to pay, like, £5 a month, but if they’re earning maybe £1000 a month, up to £200, £300 could come out of their wages so that’s why a lot of men don’t work.”

Witness at Centre for Social Justice hearing (2010)

1.3.2 WORKLESSNESS AND YOUTH UNEMPLOYMENT

The disillusionment surrounding worklessness among young people has become a critical problem in Northern Ireland. Indeed, young people aged between 16 and 24 are particularly affected by worklessness:

- Nearly one in ten young people are not in education, employment or training (NEET) in Northern Ireland²⁰
- About 20,000 young people in Northern Ireland are economically inactive but not in full or part time study²¹
- 20,000 young people are unemployed in Northern Ireland;²² both the

20 Breakdown of economic activity by age bands (16+ and working age) from the Labour Force Survey in Northern Ireland. Datasets October-December 2009. Department of Enterprise, Trade & Investment (2010)

21 Ibid

22 Labour Force Survey: Unemployment by Age (Table 2.9) DETINI 2010

number and the rate of young youth unemployment has doubled in three years²³

- Indeed, youth unemployment has increased from just over one in ten (11.6%) in 2008 to one in six (17.4%) in 2010²⁴

“I’m working hard to keep myself from doing something stupid because I’m that bored...I’ve been doing a lot of volunteer work, as I can’t seem to get a job anywhere, and – discouraged I can’t seem to get a job anywhere, I’ve tried I don’t know how many times”

James (20), ex-convict at Centre for Social Justice hearing

“I’ve applied for loads and there’s not much out there, like. We don’t have the grades to get work, I’ve been trying. I only went for jobs you don’t have to read and write in. Jobs you don’t have to have much education for, if my education was better, I’d be able to get [jobs where you take] qualifications and courses”

Brian (19), FASA. Centre for Social Justice hearing

“I went on to do mechanics. After a couple of weeks they were supposed to get me a placement. But they couldn’t get one, so I had to give the mechanics up and sign on the dole.”

Witness (21)²⁵

While the high levels of worklessness present a major frustration for some young people, others become entirely demoralised. Indeed, figures indicate that at least 12,000 young people²⁶ who are not in work or study do not want a job – revealing alarming levels of low aspiration among young people in Northern Ireland today. Very often, low levels of activity among young people in Northern Ireland lead to an increasing likelihood of anti-social behaviour. This phenomenon was supported by a significant body of anecdotal evidence amassed during hearings in Northern Ireland:



23 Ibid

24 Ibid

25 Childhood in Transition Experiencing Marginalisation and Conflict in Northern Ireland Siobhán McAlister, Phil Scraton, Deena Haydon. 2009

26 Breakdown of economic activity by age bands (16+ and working age) from the Labour Force Survey in Northern Ireland. Datasets October-December 2009. Department of Enterprise, Trade & Investment (2009)

“My kids are just lying around the house, they don’t go anywhere.”

“[Young people] are lying on their beds all day! They’re getting into problems, lots of problems. Over the last five years, in Northern Ireland here, a lot of young mums [have] nothing to do. They can’t go anywhere – there’s nowhere to go. They’re stuck into the house, in front of a computer, or they’re out in the streets with their friends and they’re drinking, taking drugs.”

“On Sunday night, somebody smashed a window. So away they drive in a car, I caught them up – and they’re all kiddies! I said, why d’ya pick on that for? Bored! And that’s the sort of kids you’re coming in with, now!”

Witness at Centre for Social Justice hearing (2010) (all the above)



The landmark Harland and Wolff cranes stand as a stark reminder of the rise in unemployment in Belfast

Sapped aspiration

Northern Ireland’s industrial roots can be found in the dockyards in Belfast. The famous Harland and Wolff ship yard (which oversaw construction of the Titanic) was one of the biggest employers in Belfast throughout its history.²⁷ However, the decline of the ship building industry left thousands of people in Northern Ireland unemployed.

While industry has moved on, the significance of the decline of the shipbuilding industry in Belfast must not be underestimated because of its significant impact on certain cohorts of the population. The docks were perhaps the most significant source of employment among Belfast’s Protestant working class communities, who would traditionally follow in their fathers’ footsteps. At its peak, the Belfast shipyard employed 42,000 Belfast workers;²⁸ by 2005 this figure had dropped to just 315 individuals, and today the number is too small to record.²⁹ The results were devastating:

“The Protestant working class has been demoralized...with the massive erosion of the industrial base which had provided them with their economic security.”³⁰

27 Public Records Office Northern Ireland: Harland and Wolff Papers. (2007).

28 Hall, M. (1994) Ulster’s Protestant Working Class: A Community Exploration. Ulster University: Island Publications

29 Ibid

30 Ibid

For many in Belfast, intergenerational and long-term unemployment are rooted in this time of economic hardship, due to the abiding legacy of demoralisation. Worklessness has become far more to do with aspiration than with availability of work.

Moreover, the decline of such key industries greatly exacerbates youth unemployment. Dockyards typically provided skilled craft training for young men, which carried significant kudos or status. Without these opportunities this tradition is broken, and young people have nowhere to go except into temporary, low paid and insecure jobs with little access to training - and little status. Wallace explains the problems arising when “subjective perceptions of status do not fit objective labour market conditions.”³⁰ In a culture where it is more acceptable to be dependent on benefits than to take up available low status jobs, many young people prefer to enter the ranks of the unemployed.

1.3.3 WORKLESSNESS AND MENTAL ILL-HEALTH

The link between ill-health and worklessness reveals a serious social issue in Northern Ireland today. There is a positive association between mortality and unemployment for all age groups, and a strong association between deprived areas, poor health, poverty and worklessness. This relationship is even stronger for unemployment and mental health.³² Depression (one of the most common mental disorder in Northern Ireland)³³ can be understood as both a cause – and a consequence – of long-term worklessness.



Mental ill-health leads to worklessness

The majority of people claiming illness-related out-of-work benefits do so on account of mental and behavioural disorders. This includes

- Over 42,000 people claiming Disability Living Allowance (DLA),³⁴ and;
- About 45,000 people claiming Incapacity Benefit (IB)³⁵

This is a vast number of people and demonstrates a significant and widespread problem in Northern Ireland, given its comparatively small population.

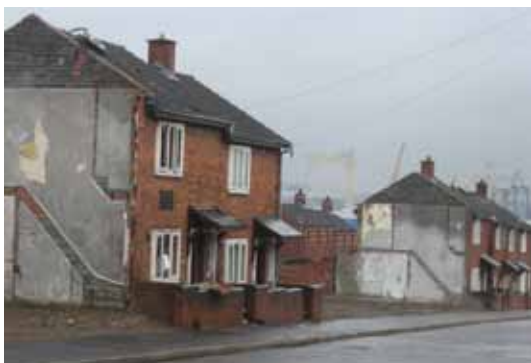
31 Wallace C, 1987, For richer, for poorer : growing up in and out of work Tavistock

32 http://www.nice.org.uk/niceMedia/documents/worklessness_health.pdf

33 The Office for National Statistics Psychiatric Morbidity report (2001). www.mentalhealth.org.uk/information/mental-health-overview/statistics/#maintypes

34 Disability Living Allowance: Summary of Statistics. DSDNI 2009

35 Number of claimants of Incapacity Benefit at 30 November 2009, by Diagnosis Group. Table B7. Incapacity Benefit and Severe Disablement Allowance Summary Statistics. DSDNI (2009). ONS



Worklessness leads to mental ill-health

The Northern Ireland Association for Mental Health (NIAMH) has reported findings from the General Health Questionnaire (GHQ) which measured the levels of ‘psychological morbidity’ across the general population. The survey found that people who were unemployed were around twice as likely to have a ‘potential’ psychological illness as employed people showing that worklessness itself can often lead to symptoms of depression.³⁶ The Northern Ireland Centre for Trauma and Transformation (NICTT) has extensively studied the reality of mental health problems in Northern Ireland, especially those induced by Troubles-related trauma. One case study they conducted with a woman forced to give up work due to a heart attack, indicates the impact of involuntary worklessness:

“I loved getting up in the morning and going to work, now. I really did. And giving that up, I nearly died giving that up. I loved the company. I met that many people...it took me wild long to get over that.”³⁷

NICTT study participant

This shows that the positive benefits of work go beyond those immediately associated with material wellbeing and provision – active engagement in the labour market can promote healthy social and relational interaction and instill a ‘reward for effort’ ethic unavailable to those with long-term dependence on state benefits.

1.3.4 PENSIONER POVERTY IN NORTHERN IRELAND

Much of the commentary on social breakdown and poverty focuses on worklessness in Northern Ireland, and thus on those of working age or the prospects of the younger generation. However it is important not to miss one long-term consequence of worklessness - economic dependency among those of pensionable age. Of the 275,000 pensioners in Northern Ireland, over one in five (57,000 individuals) are in relative poverty in Northern Ireland.³⁸

36 Equality and Inequalities in Health and Social Care in Northern Ireland: A Statistical Overview. (2004). Department of Health, Social Services and Public Safety (DHSSPSNI), NISRA

37 Trauma, Health and Conflict in Northern Ireland: A study of the epidemiology of trauma related disorders and qualitative investigation of the impact of trauma on the individual. NICTT and the University of Ulster (2008)

38 Supplementary Tables (DSDNI) 2007/8 http://www.dsdni.gov.uk/supplementary_tables-4.xls

Table 2. Only ten per cent of pensioners claim the benefit they are entitled to

	Entitled	Currently claiming	Uptake rate ³⁹
All ages	52,818	32,634	61.8%
Working age	34,317	30,930	90.1%
Pensioners	18,501	1,704	9.2%

The Northern Ireland charity, Access to Benefits, has highlighted the difficulty of accessing benefits among older people; a study conducted by them showed 15 of 18 groups found the entire process of claiming additional benefits too complicated.⁴⁰ Over 90% of people of working age who are entitled to it claim Carer's Allowance (CA) in Northern Ireland – but less than one in ten people of pension age who are entitled claim it. The extremely low uptake of CA among those of pension age, however, does not indicate lower incidences of eligibility based on income (i.e. most pensioners do not forfeit this benefit for reasons of incomes which are too high to accommodate state benefits)⁴¹ which means that there are pensioners who need CA but are not claiming it.

It is vital that in policy discourse, we do not omit the needs of the elderly in Northern Ireland.

1.4 The unemployment system in Northern Ireland

Northern Ireland has a highly competitive jobs market, and despite high employment growth over the last decade,⁴² educational failure and other forms of pre-existing social and economic disadvantage have contributed to gaps in skills and employability.

In December 1999 the Department for Social Development was established as part of the Northern Ireland Executive. Benefits are administered by the Social Security Agency (SSA), and it administers the same benefits as in the rest of the UK.⁴³ The Department for Education and Learning (DELNI) administers and funds back to work support programmes in Northern Ireland.

39 Carer's Allowance: Summary of Statistics. DSDNI 2009

40 Access 2 Benefits (2009) Publications <http://www.a2b.org.uk/Publications/tabid/95/Default.aspx>

41 As of April 2008, a pensioner living in Northern Ireland is entitled to £90.70 under the age of 80 and £90.95 over the age of 80 per week – meaning that a pensioner whose main income is their state pension is entitled to Carer's Allowance

42 <http://www.northernireland.gov.uk/finalbudget.pdf>; p.14: 2.37

43 http://www.dsdni.gov.uk/index/ssa/benefit_information/a-z_of_benefits.htm

1.4.1 WELFARE TO WORK

The interrelated problems discussed in the rest of this chapter can engender a significant degree of demoralisation – and disillusionment – among those who face them daily. We argue that unemployed people need personalised support in order to overcome barriers to work.

To its credit, the Department for Employment and Learning (DELNI) has developed specialised programmes ('Pathways to Work' and 'Progress 2 Work') to address the more complex needs of people struggling with disabilities and ex-offenders respectively. This tailored help is critical for people who face major barriers, aside from financial incentive, from entering the workplace.

In section 1.4, we look at barriers to employment for specific groups within Northern Ireland and demonstrate that when these barriers are combined with other social problems and a poorly functioning benefit system, it can serve to further entrench deep rooted and complex social problems.

1.4.2 THE BENEFIT SYSTEM IN NORTHERN IRELAND

Devolution and benefits in Northern Ireland⁴⁴

Although responsibility for social security rests with the Northern Ireland Assembly, and it is administered through the devolved Department for Social Development (DSDNI), there is legislation aimed at achieving single systems of social security, child support and pensions across the UK.

The Parity Principle aims to ensure that people in Northern Ireland pay the same rates of income tax and national insurance as in Great Britain. Similarly, Northern Ireland has the same benefits, available at the same rate as in the rest of the UK.

Our report, *Dynamic Benefits*, identified three main problems with the benefit system, and our interviews with benefit claimants reveal that the same criticisms apply to Northern Ireland.

A lack of financial incentive for moving into work

Benefits are withdrawn when a recipient starts earning through employment. However, the rate at which earnings are withdrawn can make work economically unviable from the claimant's perspective.

Punitive rates of benefit withdrawal, often over ninety pence in the pound, diminish the financial reward from work. Often the meagre increase in income from work for the low-paid does not compensate for the loss of steady, predictable benefit income.

⁴⁴ Explanatory Memorandum to the Northern Ireland Act 1998 (Modification) Order 2009 (No. 885), NIA

It is vital to recognize the nature of claimants' responses to withdrawal rates, and the impact upon their own incentive to work. High benefit withdrawal rates trap millions in worklessness and dependency, often over several generations.

Respondent: *I'm here to build up the skills so I can go out and get a job 'cause that's what I want to do. Other people don't want to do that, and you can't force them to.*

Interviewer: *Why do you think they don't want to do that?*

Respondent: *They're getting more money from being on benefits.*

Witness at Centre for Social Justice hearing (2010)

Complexity

The current benefits system is a product of years of policy additions, amendments and tweaking. These changes have taken place during times of differing social and economic climates and by government of varying principles. It has consequently become extremely complex; bewildering for claimants and baffling in how it is administered.

"My friend went to the job centre to talk about benefits and stuff, and the woman at the job centre actually told her, there's no point in you going to work because you'll end up earning less, if you get a job. And this is someone who is wanting to find work!"

Witness at Centre for Social Justice hearing (2010)

Even employment advisers are left unsure over entitlement, or by how much they will be better off if they take a job. Reporting any change in circumstance to numerous agencies is both time-consuming and perceived as potentially jeopardising the stable payment of benefits. The multiple forms which it is necessary to complete are, in some cases, up to 1,200 questions long.

Discourages positive behaviours

Dynamic Benefits found that the welfare system had a material impact on people's choices. The benefit system discourages couple formation through the couple penalty, penalises savers as those with certain level of savings lose their entitlement to benefit and discourages homeownership, as homeowners or those with a mortgage are not entitled to housing benefit. Each of these actions act as a protection against dependency, and should not be discouraged.

Single parent households are overrepresented among households with no savings in Northern Ireland.⁴⁵ It is important to bear in mind that after a marital split, the income of women with children falls on average by more than a tenth (12%), while separating fathers' available income actually increases – by around a third (31%).⁴⁶

We argue that welfare reform needs to address these failings; it needs to provide effective support to help people to overcome barriers to employment and ensure that the benefit system rewards work.



1.5 Policy Recommendations

The Centre for Social Justice has developed wide-ranging policy recommendations which seek to address the systemic failures of the current welfare system. These recommendations, as well as an in-depth analysis of the nature of worklessness and economic dependency, can be found in full in our range of policy reports. In *Dynamic Benefits*, we propose a redesign of the benefit system so that it relieves poverty over the long-term. We must account for how its shape and structure influence people's movement into and out of work.⁴⁷ People need to be recognised as dynamic, active participants in the economy, not as static, passive recipients of cash transfers – so effective welfare programmes must successfully overcome barriers to work rather than merely financing (and thus maintaining) worklessness. Key considerations of the proposed reforms are as follows:

- The continued relief of poverty
- The reduction of worklessness and benefit dependency
- The support of positive behaviours by reducing the couple, mortgage and savings penalties
- An increase in the affordability of the system to the state in the medium long term

These objectives can be met in a system in which:

- Earned income is valued over benefit income
- Household rather than individual employment to be of greatest concern for policy makers
- The rewarding of decision-making that enhances self-sufficiency
- The reduction of participation tax rates for low earners in a way that the increase in employment makes it self-financing

⁴⁵ Poverty in Northern Ireland: DSD Statistics And Research Bulletin: 5 (April 2008) Statistics and Research Branch, Department for Social Development

⁴⁶ Jenkins S, 2008. Marital splits and income changes over the longer term. Institute for Social and Economic Research, University of Essex

⁴⁷ *Dynamic Benefits: Towards Welfare That Works. A Policy Report by the CSJ Economic Dependency Working Group. (2009). Centre for Social Justice*

- The design of a benefits system that increases the rewards from work and reduces complexity, while minimizing the number of losers and containing costs
- Spending which avoids increasing the generosity of in-work benefits beyond the point of diminishing returns
- Provision of a generous earning disregards for benefits

1.6 Conclusion

This chapter has shown the desperate plight of many workless and economically dependent people in Northern Ireland, trapped by the lack of work. This can contribute to the inherent disadvantages of family breakdown, educational failure, and sometimes addiction and poor mental health that many of them face. This highlights two imperative priorities for policy in Northern Ireland. New and effective approaches need to recognise the underlying social problems which disadvantage so many of the poorest people in Northern Ireland, and aim for prevention as well as cure. They also need to address the failing benefit system which, while addressing surface material need, does nothing to alleviate intergenerational cycles of poverty or promote real independence based upon sustainable routes out of poverty.



Source: Barnardos Northern Ireland

CHAPTER 2

Fragility in Northern Ireland

2.1 Introduction

The history of political conflict and civil unrest in Northern Ireland makes it unique in the UK in terms of its social profile as a region. The legacy of the ‘Troubles’ in Northern Ireland – a phenomenon which has largely characterised much of its history over the past 50 years – has profoundly affected not only its governance, but its communities and individuals. Many of those most profoundly affected by social breakdown have known severe disadvantage and heightened community conflict.

As a result, there exists in Northern Ireland a fragility which can be seen in the high levels of interrelated worklessness, alcoholism and depression.

This chapter will show that the high prevalence rates of depression and mental ill-health in Northern Ireland are associated with problems of worklessness, addiction, and conflict-related trauma. The political climate during times of conflict greatly exacerbated some of these problems – and worsened existing disadvantages for the poorest. As such, it would be irresponsible to overlook the conflict in any social commentary of Northern Ireland and in the development of social policy.

Figure 2.

As we detail later, a significant proportion of problem drug and alcohol users experience worklessness and depression. These three experiences – addiction, depression and worklessness are very often found to coexist for individuals who are ‘socially excluded’. These entrenched cycles of breakdown are further complicated by a history of conflict and insecurity on a national scale.



2.2 A Society Divided: Northern Ireland's Troubles

The devastation wrought by the Troubles is, to an extent, geographically concentrated in areas characterised by social breakdown, as the director of a community-based organisation in the Water Works (one of the poorest wards in the Northern Ireland)⁴⁸ explained:

“For the best part of 30 years, this part of Belfast was traumatised on a daily basis. A huge proportion, about 22% of the deaths were within a mile radius of this building. You could go two miles up the road and talk to people who were relatively untouched by the Troubles”

Bill, Centre for Social Justice hearing (2010)

The 2001 census of the Water Works ward revealed that:⁴⁹

- 77% of births were to unmarried mothers
- 47% of the adult population had never married
- Two thirds had no or low qualifications
- Over a quarter of people had a long-term illness, health problem or disability
- Nearly half of the 8.3% unemployed was long-term unemployed

As well as many deaths in poorer areas, this dataset indicates higher levels of family breakdown, educational failure, worklessness and poverty in the Water Works ward, an area most affected by the Troubles.



Sectarian divides still affect everyday life for poorer young people:

“If young people want to go to a leisure centre, they’ll go to a centre in their own area – in a Catholic area. If they need to travel to get there, they’ll take a roundabout route, rather than travelling through a Protestant area.”

Witness at Centre for Social Justice hearing (2010)

“Working with the grass roots means you must accept you will be defined by the politics of the area in which you are operating.”

Anne Bill (FASA [Forum Against Substance Abuse], Belfast)

48 NI Neighbourhood Information Service (NINIS). Multiple Deprivation Indicators, Results SOA 2010

49 Northern Ireland Neighbourhood Information Service (NINIS) Census 2001. SOA: Water works



It is important that we recognise poverty in its own right. However, Northern Ireland’s history is steeped in a crisis of common national identity which is strongly associated with sectarian divisions often manifesting in violence. This has resulted in huge strains in communities which can be neither underestimated nor ignored. Effective policy solutions – community based and locally relevant – must acknowledge how the Troubles affected and still affect the most disadvantaged people in Northern Ireland.

2.3 Depression and mental health in Northern Ireland

Studies in Northern Ireland have shown that people most directly affected by the Troubles are more likely to experience poor mental health.⁵⁰ One witness explained:

“There’s a lot of boredom and a lot of depression here in Northern Ireland. Especially because of jobs, Troubles, marriages breaking up, kids getting moved from one parent to another parent. Depression. No money and stuff, no jobs and stuff.”

Witness at Centre for Social Justice hearing (2010)

Table 3. Use of Prescription drugs among adult population in Northern Ireland

Used in previous month ⁵¹	Aged 16 – 34	Aged 35 – 64	Adult population ⁵²
Sedatives	2.3%	10.7%	83,100
Anti-depressants	4.2%	10.0%	87,800

Mental ill-health is rife, with nearly 50,000 men and women in Northern Ireland not working on the grounds of mental and behavioural disorders. It has been estimated that around a quarter more people suffer from mental health disorders in Northern Ireland than they do in England and Scotland⁵³

50 Equality and Inequalities in Health and Social Care in Northern Ireland: A Statistical Overview. (2004). Department of Health, Social Services and Public Safety (DHSSPSNI), NISRA

51 Drug Prevalence Survey 2006/7. Ipsos MORI in Ireland and by the Central Survey Unit of the Northern Ireland Statistics and Research Agency (NISRA)

52 Estimate based on a total 15 – 64 population cohort of 1,170,400 taken from using mid-year population estimates, 2007. Rounded to the nearest hundred. Taken from NISRA Source:http://www.nisra.gov.uk/archive/demography/population/midyear/mye_report_2008.pdf

53 McWhirter, L. (2002) Health and Social Care in Northern Ireland: A Statistical Profile. DHSSPSNI

and there is an especially high prevalence of mental ill-health among men.⁵⁴ Much of this is attributable to the turbulent history, but there exists a very real threat that the children in most disadvantaged homes in Northern Ireland – although they have never experienced the Troubles – will inherit the psychological vulnerability of their parents:

*“Mental health is a big problem. There are mothers of children in the school with depression and this rubs off on children...There is no resilience, no bounce back among people living here. Parents can’t work through it and then this affects the children.”*⁵⁵

Stable families are essential in the reversal of social breakdown and mental ill-health. However rates of lone parenthood in the poorest parts of Northern Ireland are up to eight times those in the least deprived areas and children growing up in broken families are themselves more susceptible to mental ill-health:

- Children of lone parents are twice as likely to suffer from mental health problems than those living with two parents⁵⁶
- The prevalence of mental health issues amongst children of co-habiting parents is over 75 per cent higher than amongst those of married parents⁵⁷

The link between poor mental health and family breakdown – especially among the poorest in Northern Ireland – is unmistakable. The policy-making community has been reluctant to ‘grasp the nettle’ of family breakdown as a key issue; a change here is vital so that solutions focus not on management of social breakdown for the most inherently disadvantaged, but for early intervention aimed at prevention of social breakdown – as well as the reversal of it.

Many people in disadvantaged or broken families, trapped in worklessness and impacted by the Troubles suffer from mental health problems. The extent of this is revealed in the alarming numbers of people who use prescription medication – close to 90,000 people are using anti-depressants on a monthly basis, and this is one in ten 35 – 64 year olds. A report on the effect of the Troubles in Northern Ireland explains:

“In one community hundreds of young men went to prison which had a profound effect on family life and on the community, which also sustained a high number of Conflict related deaths and injuries,

54 Ibid

55 Childhood in Transition Experiencing Marginalisation and Conflict in Northern Ireland Siobhán McAlister, Phil Scraton, Deena Haydon. 2009

56 Meltzer, H., Green, H., McGinnity, A., Ford, T. and Goodman, R., 2005, Mental Health of Children and Young People in Great Britain, 2004, Department of Health. Cited in Centre for Social Justice Green Paper on the Family (2010).

57 Ibid

resulting in parental depression and often alcoholism. It has been suggested that, in seeing their parents self-medicate with tranquilisers, children have inherited the trauma of their parents.”⁵⁸

Although the legacy of the Troubles remains an important factor in social breakdown in Northern Ireland, the rest of this report mainly focuses on the entrenched and interrelated social problems which are common to those found in other disadvantaged communities across the UK.

2.4 Addiction in Northern Ireland

Addiction and poor mental health are also interrelated phenomena in Northern Ireland. Drug and alcohol abuse often coexist with poor mental health, though they invariably worsen the situation. Worklessness can be a significant contributory factor for addiction (often due to depression or boredom), and addiction can certainly be a causal factor for worklessness:

- Half of people currently in treatment for addictions in Northern Ireland are unemployed:⁵⁹
- Nearly 3,500 people claiming Disability Living Allowance (DLA) in Northern Ireland cited alcohol abuse as their main disabling condition.⁶⁰

The trend of addiction in Northern Ireland follows three interesting patterns:

- Prescription drug addiction
- Young people and illicit drugs
- Widespread alcohol abuse

2.4.1 PRESCRIPTION DRUG ADDICTION

Legally prescribed drugs are widely available and can be highly addictive – especially with a high frequency of use. We have seen that over 10% of the 35 – 64 year old population use antidepressants on a monthly basis. Many people in Northern Ireland self-medicated during times of civil unrest, as one community worker explained:

“Addiction – particularly to prescription drugs, which is one of those hidden factors...[is] not always, but invariably a woman, trying to hold a family together and without access to other forms of drugs – just asks a doctor to get her a script for Diazepam or something, just to keep medicated – in order to function”

Community Worker at Centre for Social Justice hearing (2010)

58 Childhood in Transition Experiencing Marginalisation and Conflict in Northern Ireland Siobhán McAlister, Phil Scraton, Deena Haydon. 2009

59 Drugs Misuse Database. 2008/9 DHSSPSNI

60 Disability Living Allowance: Summary of Statistics. DSDNI 2009

- The majority (84%) of users take sedatives, tranquillisers or anti-depressants daily or almost daily⁶¹
- Benzodiazepines (prescription anti-depressants) are the second most common substance of referral for people with addictions in Northern Ireland⁶²
- This counts for around one in seven men (14%) referred but nearly half (42%) of all women referred to drug services
- An additional 2.2% of referrals were on account of addiction to codeine and paracetamol⁶³

There is a very high prevalence of the misuse of legally prescribed drugs in Northern Ireland,⁶⁴ in contrast with England, where legal and prescribed drugs as primary drug of addiction count for less than 1% of addictions referrals.⁶⁵ Administration of these substances is largely associated with the management of emotional and psychological issues and as such may be indicative of other forms of breakdown. Higher prevalence rates for users are explicitly associated with

- long-term dependence on the state;
- not being in paid work;
- having no educational qualifications;
- living in Housing Executive/housing association homes; and
- being separated, divorced or widowed⁶⁶

We see here interrelated cycles of social breakdown, mental illness, and chaotic lifestyles associated closely with mis-medication in a way that appears specific to Northern Ireland. Those most affected are entrenched in deeply complex problems and are often socially excluded as a result.

2.4.2 YOUNG PEOPLE AND ILLICIT DRUG USE

As well as prescription drugs, there is a worrying level of illegal drug use in Northern Ireland:

- Up to a quarter of the adult population have used cannabis in their lives⁶⁷

“During the Troubles many women developed addictions to prescribed medication like Valium to deal with the depression they suffered as a result of the men they lived with and knew being killed. Men dealt with the Troubles more with alcohol.”

Witness at Centre for Social Justice Policy hearing (2010)

61 Drug Use in Ireland and Northern Ireland (2002/2003). Drug Prevalence Survey: Sedatives, Tranquillisers or Anti-Depressants Results. DHSSPSNI

62 Drugs Misuse Database. 2008/9 DHSSPSNI

63 Statistics on Drug Misuse: England, 2009. ONS, NHS

64 Drug Use in Ireland and Northern Ireland. 2006/2007 Drug Prevalence Survey: Polydrug Use Results. DHSSPSNI

65 Statistics on Drug Misuse: England, 2009. ONS, NHS

66 Drug Use in Ireland and Northern Ireland (2002/2003). Drug Prevalence Survey: Sedatives, Tranquillisers or Anti-Depressants Results. DHSSPSNI

67 Tackling drugs and alcohol through partnership: EDACT: Statistical Overview (2007/08)

- Around 30,000 people use cannabis on a monthly basis⁶⁸
- Lifetime rates of cannabis use increased by 50% between 2002/3 and 2006/7
- Nearly 12,000 people used amphetamines and ecstasy in the last month
- There are around 3,500 monthly users of cocaine – a highly addictive drug – and the third commonest illegal drug of referral for people who were registered addicts in Northern Ireland last year, after heroin and methadone.⁶⁹

There are an average of 15 deaths per annum due to drug use and 730 deaths per annum associated with excess alcohol consumption.⁷¹ Traffic accidents which were drug or alcohol related caused 643 injuries and 18 deaths on the road.⁷²

Drug Addiction

Drug use has increased in recent decades, with drug-related deaths having risen 100-fold since 1968.⁷⁰ There has been an increase in the rate of problem drug use of late:

- The number of registered drug addicts has increased by 12% since 2007⁷³
- Treatment increased by 10% between 2005 and 2007.⁷⁴
- The number of children in addiction treatment in Northern Ireland has trebled in recent years⁷⁵
- Nearly 6,000 individuals are in addiction treatment in Northern Ireland⁷⁶

Addiction and Young People

The most adverse consequence of substance abuse in Northern Ireland is the knock-on effect it has on the next generation. Various records reveal high prevalence of drug use:

- Nearly a fifth of young people aged 11 to 16 surveyed by the Eastern Drug and Alcohol Coordination Team (EDACT) had taken drugs before in their lives⁷⁷
- In a 2001 survey, 40% of boys and 30% of girls had tried an illicit drug⁷⁸
- Lifetime rates of drug use amongst 11 – 18 year olds increased substantially from 15.8% to 22.3% between 2000 and 2003⁷⁹

68 Estimate from DHSSPSNI Drug Prevalence Survey, 2006/7. Sample of 2,002 people living in Northern Ireland aged 15 – 64. Source: http://www.dhsspsni.gov.uk/bulletin_5_-_drug_prevalence_survey_0607_-_polydrug_use_results.pdf

69 Drugs Misuse Database. 2008/9 DHSSPSNI

70 YouGov Polling for Breakdown Britain

71 Research into Homelessness and Substance Misuse. Northern Ireland Drugs and Alcohol Campaign. DHSSPSNI 2004

72 Tackling drugs and alcohol through partnership: EDACT: Statistical Overview (2007/08)

73 Statistics from the Northern Ireland Drug Addicts Index 2009. DHSSPSNI, NISRA

74 Census of Drug and Alcohol Treatment Services in Northern Ireland. (2007) DHSSPSNI, NISRA

75 Ibid

76 Ibid

77 Tackling drugs and alcohol through partnership: EDACT: Statistical Overview (2007/08)

78 Miller, P., M. Plant. (2001). Drinking, Smoking and Illicit Drug Use Amongst 15 & 16 Year Old School Students in Northern Ireland. Available http://www.dhsspsni.gov.uk/smoking_drinking_teens.pdf

79 Parker, H. (2005). Better Managing Northern Ireland's Alcohol And Drug Problems. A Review of the Northern Ireland Alcohol and Drug Strategies and the Efficiency and Effectiveness of their Implementation. Available <http://www.dhsspsni.gov.uk/drugs-alcohol-report-ni-review.pdf>

This is a fairly recent phenomenon. Today, around 26% of children in Northern Ireland have taken drugs compared with 5% of children in 1987.⁸⁰ Attitudes towards drugs have become more tolerant – especially among boys, a quarter of whom do not disapprove of regular cannabis use⁸¹ and over half of whom say that they believe cannabis to be very or fairly easy to obtain.⁸²

Young people, substance abuse and social breakdown

Nearly half of children interviewed at EDACT had experienced problems due to alcohol or drugs in their lifetime.⁸³ The pattern of this increased drug involvement is more pronounced among the most disadvantaged children in society; 12% of children receiving free school meals are current drug users as compared with 8% of those who are not. 17% of children receiving free school meals have ever taken cannabis compared to 12% of other children.⁸⁴ Research also indicates that there is a strong correlation between drug and alcohol use among young people and their household structure. The table below shows that young people who do not grow up in two parent homes in Northern Ireland are around twice as likely to have taken illegal drugs as those who do grow up in two parent families. The effects of family breakdown are very serious for many children, with children not raised in two parent families 70% more likely to experience drug addiction.⁸⁶

“My dad wound up in prison, and me, my two brothers and sisters moved into a hostel when I was about ten at the time. About one or two years later I ended up in care – and that’s when I started getting involved in drugs and became addicted.”

Witness at Centre for Social Justice hearing (2010)

Around 40% of children on the child protection register and 70% of looked after children were given this status primarily on account of their parents’ substance misuse.⁸⁵

“My mother never drunk before, when they were married, [and] as soon as they split up, she turned quite quickly to drink and drugs. I couldn’t cope with seeing her like that. I think it was the divorce, everything got worse under that, gradually got worse. I ended up going to jail. It affected me and my education, before that my education was pretty good.”

Witness at Centre for Social Justice hearing (2010)

80 *Breakthrough Britain* YouGov polling. Center for Social Justice

81 Miller, P., M. Plant. (2001). Drinking, Smoking and Illicit Drug Use Amongst 15 & 16 Year Old School Students in Northern Ireland

82 Ibid

83 Miller, P., M. Plant. (2001). Drinking, Smoking and Illicit Drug Use Amongst 15 & 16 Year Old School Students in Northern Ireland

84 Equality and Inequalities in Health and Social Care in Northern Ireland: A Statistical Overview. (2004). Department of Health, Social Services and Public Safety (DHSSPSNI), NISRA

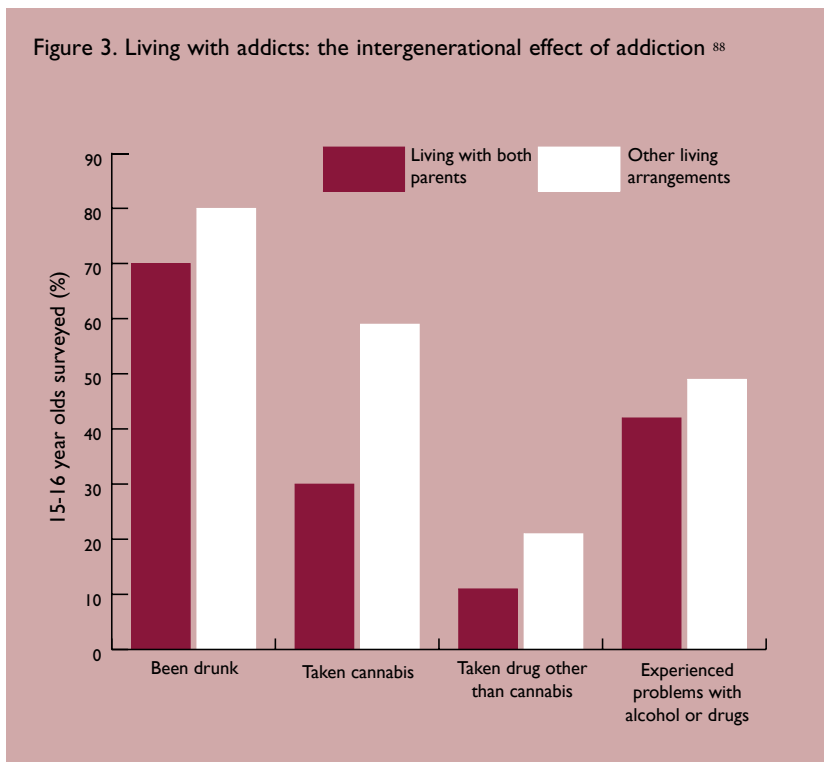
85 Regional Hidden Harm Action Plan: Responding to the needs of children born to and living with parental alcohol and drug misuse in Northern Ireland. October 2008. DHSSPSNI

86 Reference poll 2007

Table 4. Living with addicts: the intergenerational effect of addiction⁸⁷

Family structure	Living with both parents		Other living arrangements	
	Boys	Girls	Boys	Girls
Been drunk	76.0%	64.7%	80.4%	80.2%
Taken cannabis	34.4%	24.7%	59.2%	55.7%
Taken drug other than cannabis	11.8%	8.8%	24.5%	17.2%
Experienced drug problems with alcohol or drugs	46.9%	38.2%	53.1%	43.0%

Figure 3. Living with addicts: the intergenerational effect of addiction ⁸⁸



Of individuals presented for drugs treatment in 2003/4, 22% of people deemed problem drug users (over 400 individuals) were living with children.⁸⁹ The impact of parental drug and alcohol use on the wellbeing of a child cannot be underestimated, and is reported by the Department of Health,

⁸⁷ Miller, P., M. Plant. (2001). Drinking, Smoking and Illicit Drug Use Amongst 15 & 16 Year Old School Students in Northern Ireland

⁸⁸ Ibid

⁸⁹ Regional Hidden Harm Action Plan: Responding to the needs of children born to and living with parental alcohol and drug misuse in Northern Ireland. October 2008. DHSSPSNI

Social Services and Public Safety (DHSSPSNI) to have presented “increasing demands” on Children’s Social Services.⁹⁰ Children are left with deep-seated and adverse effects and their families devastated – and patterns of intergenerational harm are repeated. Children exposed to the chaotic behaviour of addicted parents are usually abused or neglected, and in turn, are themselves propelled into substance abuse. This is likely to trigger truancy, then educational failure, then unemployment – a very high risk factor for increasing substance abuse. Substance misuse appears to be as much a catalyst for family disruption and dysfunction as it is an outcome.

“My father was an alcoholic. My mother and father split up when I was 10. When he finished work he was on the drink, and I always swore when I grow up I don’t drink. There was no way I was going to turn out the same way as him.”

Witness at Centre for Social Justice hearing (2010)

2.4.3 WIDESPREAD ALCOHOL ABUSE

Drinking behaviour varies across different age groups in Northern Ireland: while those aged over 45 are more likely to drink more frequently, younger people are more likely to exceed recommended alcohol limits. Although volume and frequency of alcohol intake are not necessarily synonymous with addiction, available data points towards a potentially massive underestimation of prevalence of addiction in Northern Ireland:

- Nearly one in 10 adults – around 100,000 people – drink every day⁹¹
- Approximately one in six people drink three or more times a week⁹²
- 72% of males and 57% of females aged 18 – 29 are estimated to binge drink at least once a week⁹³
- The number of people deemed to be drinking above ‘sensible levels’ of alcohol has trebled from 6% in 1986 to 18% in 2006/7⁹⁴
- One survey found that over 80% of respondents had exceeded the recommended daily volume of alcohol in the preceding week⁹⁵

These high levels of alcohol use increase the likelihood of the development of addictions – which usually affect the most disadvantaged and those whose lives are affected in some other way by social breakdown. A survey from the DHSSPSNI of adult drinking patterns found that of those who had taken alcohol the previous week, 10% were



Centre for Social Justice ‘Early Intervention’ event, Hopelink Centre, March 2010

90 Ibid

91 Adult Drinking Patterns in Northern Ireland (2008). Central Survey Unit, DHSSPSNI

92 Northern Ireland Health And Social Wellbeing Survey 2005/06 Topline Results - Cigarette Smoking And Drinking. Central Survey Unit

93 Parker, H. (2005). Better Managing Northern Ireland’s Alcohol And Drug Problems. A Review of the Northern Ireland Alcohol and Drug Strategies and the Efficiency and Effectiveness of their Implementation

94 NINIS: Alcohol Consumption Levels (1986-2009) Source: Continuous Household Survey.

95 Adult Drinking Patterns in Northern Ireland (2008). Central Survey Unit, DHSSPSNI

'highly likely' to have an alcohol problem.⁹⁶ Addiction to alcohol is closely associated with depression, due to its strong depressant properties – which is significant given the aforementioned prevalence of mental ill-health in Northern Ireland. It is also associated with the invariably chaotic lifestyles of people struggling with addiction.

Alcohol abuse is devastating to addicts and their families and strong direct links exist between alcohol addiction and poor mental health, particularly among those who are socially excluded.⁹⁷ Alcohol abuse is also destructive at a community level, with many incidences of violent crime (both stranger assaults and domestic violence) alcohol-fuelled. Approaches to licensing law risk ignoring alcohol as a potentially dangerous substance, and this is disturbing from a public health perspective as there are increasing levels of alcohol-related harm. As stated earlier, excessive drinking is more common among younger people,⁹⁸ and alcoholism is daily affecting the next generation of adults in Northern Ireland:

- Over one in ten young people aged 16-24 in Northern Ireland drink three or more days a week⁹⁹
- Over half of 11 – 16 year olds in Northern Ireland have had an alcoholic drink¹⁰⁰
- Between two thirds and three quarters of 15 – 16 year olds have been drunk¹⁰¹
- One in five boys and one in six girls had taken alcohol six or more times during the past 30 days, and over 10% had been intoxicated in that time period¹⁰²
- Children not raised in two parent families are 50% more likely to go on to have an alcohol problem¹⁰³

Costs attributable to enforcement, prevention, treatment and rehabilitation in relation to drugs are estimated at £8 million, while the cost to the economy of excess alcohol use is estimated at over £800 million¹⁰⁴

While the frequency with which young people use alcohol in Northern Ireland is astonishingly high, the number affected by parental alcohol abuse is shocking: approximately 40,000 children in Northern Ireland are living with parents who abuse alcohol.¹⁰⁵

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- 96 Ibid
- 97 Dr Adrian Bonner, Reader and Director of the Addictive Behaviour Group, Division of Psychiatry, Kent Institute of Medicine and Health Sciences
- 98 Northern Ireland Health And Social Wellbeing Survey 2005/06 Topline Results - Cigarette Smoking And Drinking. Central Survey Unit, NISRA
- 99 Ibid
- 100 Equality and Inequalities in Health and Social Care in Northern Ireland: A Statistical Overview. (2004). Department of Health, Social Services and Public Safety (DHSSPSNI), NISRA
- 101 Miller, P., M. Plant. (2001). Drinking, Smoking and Illicit Drug Use Amongst 15 & 16 Year Old School Students in Northern Ireland
- 102 Ibid
- 103 Reference poll 2007
- 104 Research into Homelessness and Substance Misuse. Northern Ireland Drugs and Alcohol Campaign. DHSSPSNI 2004
- 105 Regional Hidden Harm Action Plan: Responding to the needs of children born to and living with parental alcohol and drug misuse in Northern Ireland. October 2008. DHSSPSNI

The costs of addiction in Northern Ireland

Social policy must be driven by the knowledge that destructive cycles of addiction usually affects and further traps the most disadvantaged people in society – those who are socially excluded and often workless or in financial difficulties. Much addiction is preceded by experiences of family breakdown and educational failure. These cycles are devastating: of those who presented for addiction treatment last year nearly 10% were in prison or Young Offenders’ Centres.¹⁰⁶ The costs in terms of social and economic malaise are unsustainable. The costs in terms of human misery are incalculable.



Police Officers in Holywood

2.5 Policy Recommendations

In order to address problems of personal fragility in Northern Ireland – expressed in poor mental health, addiction and significantly influenced by the Troubles – it is essential to implement effective policy solutions to reverse the cycles described here. This chapter has touched upon the severe effect of the Troubles, and we would recommend that public services are sufficiently tailored to meet local needs but do so without making constant reference to the past. Whilst bearing in mind the need to achieve this delicate balance, the Centre for Social Justice recommends that the following principles, developed to address drug and alcohol addiction, inform the design of policy and interventions for similar problems in Northern Ireland:

Putting full recovery at the heart of treatment

Reforming governance at national and local level and integrating policy

As in the rest of the UK, it is vital that Northern Ireland puts full recovery at the heart of its addiction governance structures and their leadership. At a national level this will require fully collaborative and outcome-focused government and clear political leadership to the department(s) that manage addictions systems if genuine progress is to be made.

As health and social care are integrated in Northern Ireland, this should be easier to achieve but key national agencies must also be driven by a full recovery approach, requiring profound reform and replacement where necessary. In the UK we have recommended the abolition of the National Treatment Agency (NTA) and the establishment in its place with an Addiction Recovery Board (ARB) that integrates alcohol and drug addiction policy. This will remove the artificial barrier that has led to ineffective strategy and will make it a far more cost effective body.

106 _____
 Drugs Misuse Database. 2008/9 DHSSPSNI

We acknowledge that in Northern Ireland, the main addiction strategy is coordinated by the Drug and Alcohol Coordination Teams (DACTs), which are answerable to the Health and Social Care Trusts of the DHSSPSNI. Whilst DACTs do partly focus on prevention, methadone is the second most commonly used drug among registered drug addicts in Northern Ireland¹⁰⁷ and there should be a rebalancing towards greater promotion of abstinence-based treatment options. Methadone can have a role in treatment but that role should only be as a bridge to full recovery. Too often addicts are *maintained* on methadone and there is little ambition that they can rebuild their lives and be completely drug-free.

As commissioning decisions can be dominated by an overinvestment in substitute prescribing (e.g. methadone) services, we need to move to a model where DACTs are responsible for the delivery of recovery-based outcomes and incentives established to move local commissioning partnerships to a model of payment by results (PBR) according to agreed Standards of Recovery. We recommended that some form of PBR should be operational within all local partnerships in three years.

Expand the use of third sector solutions such as residential rehabilitation and recovery communities

In order to promote full recovery, we also believe there should be significant expansion of residential rehabilitation provision, supported by the new Standards of Recovery framework. Residential rehabilitation should no longer be used as a last resort, but instead it should be utilised as often as practicable to promote full recovery. In Northern Ireland, only 2% of those in treatment were attending residential treatment services.¹⁰⁸

Recovery communities should also be expanded as widely as possible. These specialise in the rehabilitation and full recovery of individuals experiencing chemical dependency. Using a comprehensive approach to rehabilitation, recovery communities like BAC O'Connor (in Staffordshire) encourage addicts and their family to work towards a more satisfying and healthy lifestyle without dependency or chemical abuse.¹⁰⁹ Effective treatment programmes provide recovering addicts with a long-term plan for how they will re-build their lives.

More use of peer support

Local commissioners should also develop close contact with abstinence-based local peer support groups for both alcohol and drug addicts, such as Alcoholics Anonymous, Narcotics Anonymous, and RIOT (Recovery is Out There) and direct clients to them.

107 Drugs Misuse Database. 2008/9 DHSSPSNI

108 Census of Drug and Alcohol Treatment Services in Northern Ireland. (2007) DHSSPSNI

109 The Centre for Social Justice Green Paper on Criminal Justice and Addiction. (2010). The Centre for Social Justice. See www.centreforsocialjustice.org.uk

Prevention and education

In addition, to recognise the link between alcohol consumption levels and pricing, we have recommended that consideration be given to the introduction of a treatment tax on alcohol. An urgent review of existing prevention and education programmes for young people should also be undertaken. Following from its recommendations policymakers should immediately develop robust and unambiguous interventions within schools and vulnerable groups of young people.



Staff at the 174 Trust

Family Centred Policy Solutions

A lack of family-based services ignores the reality that substance abusing parents are greatly at risk of having their children taken into local authority care, and that these children are, in turn, greatly at risk of becoming caught up in addiction themselves. Any national and local strategy for ‘children and young people’ must have a clear emphasis on assisting those children whose *parents* or households have drug or alcohol problems. An approach that has prevention at its heart makes sure all parents get the support they need from the outset.

There are now 32 Sure Start programmes across Northern Ireland and we have recommended that Sure Start Children’s Centres should be absorbed into Family Hubs to deliver joined-up, *family*-focused services and particularly early years provision, relevant to the needs of local communities. Health visitors in particular are vital for identifying and working in partnership with those families most likely to struggle. In terms of commissioning we need a more level playing field that is outcomes-focused and draws on the strengths of both statutory and non-statutory organisations. These are described in more detail in the next chapter.

2.6 Conclusions

Addiction and mental health are deeply entrenched social problems requiring radical and challenging approaches. The Centre for Social Justice has recently published a Green Paper which brings together all of its work on successful treatment and prevention of both drug and alcohol addiction.¹¹⁰

Policy solutions and interventions to address problematic addiction need to involve treatment reform, a focus on prevention, the third sector and peer support and child protection and to be informed by the underlying reasons for addictions. This chapter has demonstrated that personal hardship, such as family breakdown and dysfunction, depression and worklessness, and the legacy of the Troubles further fuel cycles of addiction and poor mental health which, in turn, act as drivers of social breakdown.

110 http://www.centreforsocialjustice.org.uk/client/downloads/CSJ_Green_paper_criminal_justice_07%2007_WEB.pdf

CHAPTER 3

The Next Generation in Northern Ireland

3.1 Introduction

The work outlined thus far shows that reversing patterns of social breakdown in Northern Ireland will require a prevention approach, rather than one that aims for damage limitation or harm reduction. Children who grow up in



households where they experience family breakdown, educational failure, addiction, worklessness and indebtedness are more likely than other children to reproduce these forms of social breakdown in their own families. In order to prevent social breakdown, some of the most important social interventions need to take place as early as possible in a child's life – an *Early Intervention* approach. This works against the five pathways to poverty by addressing family vulnerabilities and ill-preparedness for school early on, and aims to help parents prevent any escalation of negative behaviour in their children. It is

as simple – and as difficult – as making sure that very young children, aged 0-3 receive nurture, warmth and attention from parents, and that the right resources are made available at the right time for the most vulnerable families and children.

3.2 Family Breakdown

Children's poor outcomes are not simply due to lack of money; so often disadvantage among children stems back to experiences of family dysfunction and breakdown which go on to affect every area of life. Family environment is crucial as this is where most individuals' physical, emotional and psychological development takes place. The absence of a stable, nurturing family environment profoundly damages children – particularly in Northern Ireland's most deprived communities where social exclusion and isolation are most felt.

The last two chapters have demonstrated how patterns of social breakdown in Northern Ireland are invariably linked to, and affect, *families*. Family breakdown is evident in the increased divorce rate, but is also predicted by higher rates of births outside marriage, and high rates of teenage pregnancy

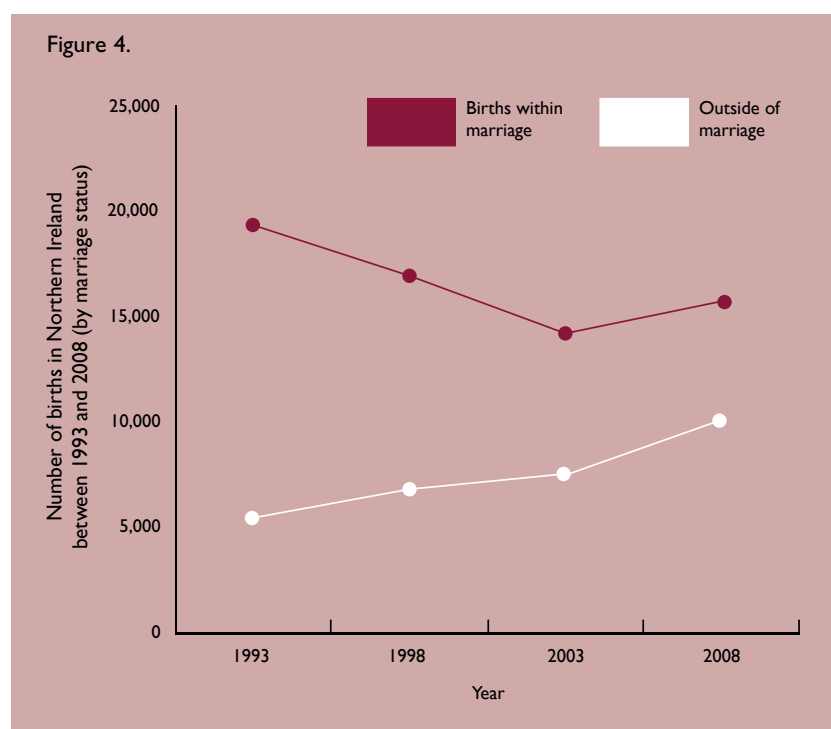
given the much higher frequency with which unmarried and particularly very young parents separate. Family breakdown is the usual route into lone parenthood with all the disadvantages this tends to imply.

3.2.1 MARRIAGE BREAKDOWN

Marriage breakdown is significantly increasing in Northern Ireland:

- While the number of divorces in England, Wales and Scotland fell slightly between 2006 and 2007, the number in Northern Ireland increased by 14% over the year¹¹¹
- The divorce rate is over five times the rate it was in 1973
- The prevalence of married individuals as a proportion of the adult population¹¹² in Northern Ireland has decreased by 40% in 30 years since 1978¹¹³
- The marriage rate among young people (aged 16 – 24) has decreased by between 80% and 90%¹¹⁴
- One in eight people who got married in 2008 were previously married¹¹⁵
- In 2008, nearly 5,000 children were affected by divorce¹¹⁶

3.2.2 BIRTHS OUTSIDE OF MARRIAGE



111 Divorces England and Wales. ONS (2010)

112 NISRA: Mid Year Population Estimates (1961 – 2008)

113 Marriages, by sex and age, 1948 to 2008. NISRA Reports (2008)

114 Ibid

115 Marriages by bride's age and marital status, 1985-2008. NISRA

116 Ibid



Five times as many children are born outside marriage as was the case 30 years ago. Rates of children born outside marriage are especially high among young people aged 16-24, with only one in five babies in Northern Ireland born to young people who are married.¹¹⁷

The decline in marriage is however in spite of consistently high aspirations among adults to marry. Although the phenomenon of ever-increasing numbers of children born to unmarried parents is too often attributed simply to a shift in social norms, the result is a greatly increased risk of family breakdown from the outset of a child's life. One single mother in Belfast commented on a broad undervaluing of the importance of family in Northern Ireland:

“A lot of people are jumping into relationships so quick and, I'm not saying fathers or mothers, but one half thinks it's so easy just to walk away, and then you just meet somebody, start another family, and then all of a sudden, you decide you don't like each other no more, you just wanna walk away, and the kids are left suffering. It's so easy for people just to walk away, and a lot of people aren't married as well. They're just like, what is it called? Cohabiting. They're not married, and if you decide you don't want the children you can just walk away.”

Witness at Centre for Social Justice hearing (2010)

The decoupling of marriage and childbearing is not merely a shift in worldviews but a serious undermining of the family. Married couple relationships are significantly more stable than cohabiting relationships, which are between two and 2.5 times more likely to end than the married couples equivalent in terms of income and education and this is the case across the social spectrum. Fewer than 10% of married couples split up before their child's fifth birthday compared to one in three unmarried couples.¹¹⁸ Children born to unmarried parents are therefore far more likely to experience family breakdown as they grow up, and also when they form relationships as adults.



Oasis Caring in Action, Belfast

117 Ibid

118 Benson H (2009) 'Back off or fire back? Negative relationship behaviours amongst postnatal married and cohabiting couples' In Benson H & Callan S (Eds.), What works in relationship education: Lessons from academics and service deliverers in the United States and Europe, pp. 55-66. Doha, Qatar: Doha International Institute for Family Studies and Development

Teenage pregnancy rates

Northern Ireland has one of the highest rates of teenage pregnancy in Europe,¹¹⁹ and almost all births (96%) to teenagers are to unmarried mothers.¹²⁰ These rates are disproportionately skewed towards those in greatest disadvantage:

- Rates of teenage motherhood among girls aged 13 – 16 are around three times the national average in the most deprived areas of Northern Ireland¹²¹
- Teenage pregnancy rates for female care leavers are seven times the average¹²²
- People from lower socioeconomic groups in Northern Ireland are twice as likely as those from a professional/managerial background to have had underage sexual intercourse¹²³

“[Pregnancy when leaving school] was definitely not planned, it’s one of those things you have to deal with, it’s life...it’s not something I wanted to do, definitely not. I wanted to be a school teacher. That was my plan, all I wanted to do was be a teacher. Unfortunately, you grow up, things change.”

Witness at Centre for Social Justice hearing (2010)

Parenthood is celebrated as the most rewarding of human experiences. However teenage parenthood for many disadvantaged young women in Northern Ireland is often characterised by social isolation and a lack of support:

[A young woman of] 19 years old [was] six months pregnant with her first child at this stage and had no contact with the baby’s father or any family members due to having been in care and all family relationships having broken down. She had cut contact with any friends she had to enable her to distance herself from a previous lifestyle that involved heavy drink and drug abuse. The woman was therefore extremely isolated.



Account from Social Services report, Belfast ¹²⁴

119 Teenage Pregnancy and Parenthood. Strategy & Action Plan 2002-2007. DHSSPSNI (2002)
 120 Equality and Inequalities in Health and Social Care in Northern Ireland: A Statistical Overview. (2004). Department of Health, Social Services and Public Safety (DHSSPSNI), NISRA
 121 See <http://www.poverty.org.uk>
 122 Former Care Leavers in Northern Ireland (2007/08) Statistical Bulletin DHSSPSNI p. 9
 123 Equality and Inequalities in Health and Social Care in Northern Ireland: A Statistical Overview. (2004). Department of Health, Social Services and Public Safety (DHSSPSNI), NISRA
 124 Inner City South Belfast Sure Start: Work Report (2009)

3.2.3 LONE PARENT FAMILIES

- There are around three times as many lone parent households in Northern Ireland today as there were at the beginning of the 1980s¹²⁵
- Today around one in five households with children in Northern Ireland is a single parent family¹²⁶

The result of family breakdown is usually the absence (indefinitely or for significant periods) of one parent from the family home, or the disruption of the original family household. Despite it becoming so regular this does not mean that children are unaffected: indeed, children not raised in two-parent families tend to be at an inherent disadvantage:

- Lone parent families are significantly more likely to live in poverty as two parent families in Northern Ireland¹²⁷
- Children growing up in lone parent families in Northern Ireland are more than three times as likely to live in households with nobody in work.¹²⁸
- Fathers are absent from nearly 25,000 economically vulnerable households receiving Income Support in Northern Ireland¹²⁹

The previous chapters have shown that children raised in lone parent families are more likely to experience social breakdown in the forms of worklessness, economic dependency, mental ill-health and addiction. Family breakdown can lead to other forms of social breakdown – educational failure resulting from chaotic and insecure family situations can, and does, harm work prospects and employment mobility.

2.3 Family Dysfunction

Very chaotic households are often associated with higher levels of domestic abuse, behavioural problems and engagement in offending and substance misuse. Family breakdown is nearly always a precursor to family dysfunction, and children growing up in lone parent or broken families have been estimated to be three to six times more likely to suffer serious abuse than children growing up with both biological parents.¹³⁰

- As of 31 March 2008 there were a little over 2,000 children on the child protection register in Northern Ireland¹³¹

125 Household Trends (1983 – 2010) Central Survey Unit NISRA

126 Household Projections. Central Survey Unit. NISRA

127 Whole Population (statistics) Chapter 3: DSDNI (2010)

128 "Table 4.6(BHC): Composition of low-income groups of children by various family and household characteristics. Family Resources Survey (2006/7) Chapter 4: Children (AHC)

129 Income Support - Summary of Statistics (DSDNI, ONS) 2009

130 Cawson, P., 2002, Child Maltreatment in the Family: The experience of a national sample of young people, NSPCC

131 Publication of 'Children Order Statistical Bulletin 2008: Northern Ireland Executive (2009) see <http://www.northernireland.gov.uk/news/news-dhssps/news-dhssps-march-2009/news-dhssps-02032009-publication-of-children.htm>

- Of those on the Register about a third are under five years of age¹³²
- 20% of children on the register were considered at risk of more than one type of abuse (negligence, physical, emotional and sexual abuse); of the rest
 - A third were considered at risk of neglect
 - A quarter were considered at risk of physical abuse
 - 12% were considered at risk of sexual abuse



2.3.1 DOMESTIC ABUSE

Domestic violence is particularly difficult to address in social policy, not only because of its acutely private nature but also because unreported incidences lead to a ‘dark figure’ – unknown incidences of domestic violence – in the statistics, which makes estimating its scale problematic. The recorded crime figures and levels of incidence therefore, may represent only a fraction of those individuals affected.¹³³

- About 25,000 domestic violence ‘incidences’ (police were alerted) were recorded in Northern Ireland in 2009/10
- There were about 10,000 recorded crimes with domestic abuse motivation in 2009/10
- Both ‘incidences’ and ‘recorded crimes’ increased since 2008/9
- Over 800 under 17 year olds were victims in recorded crimes in 2008/9¹³⁴

Family breakdown in the form of abuse, neglect or insufficient nurture, creates a cycle of psychological distress in which ‘damaged’ individuals go on to create more dysfunctional families which are then subject to further breakdown. Parental conflict, domestic violence, mental ill-health and addictions can also create a severely detrimental environment for children as the following accounts from families in Belfast reveal:

“The mother was a 28 year old single parent who was still in an on-off relationship with her daughter’s father. I became aware that she was depressed and that she had been sexually abused as a child...a few weeks later a referral had come in from a hospital [that] she had made a suicide attempt...the mother had apparently been drinking daily for a few months and it had now become such a problem that she needed a beer before getting out of bed in the morning.”

Account from Social Services report, Belfast¹³⁵

132 Table 1.1: Number of Children on Child Protection Register by Gender and Age. DHSSPSNI (2007)
 133 Domestic abuse motivation1: Incidents, Recorded Crimes and Clearances. Prison Service Northern Ireland (PSNI) (2010)
 134 PSNI Annual Statistical Report. Report No. 2. Domestic Abuse Incidents & Crimes (2010)
 135 Inner City South Belfast Sure Start: Work Report (2009)

“We had a family breakup when I was very young, I was like, 12, a teenager, and my father done something very horrific to my mother and that’s what broke up our family. We had to move out of the family home...up until that point, everything was fine...it opened my eyes to a whole new world.”

Witness at Centre for Social Justice hearing (2010)

3.3.2 CHILDREN IN CARE

In the worst and most tragic cases of dysfunction, children are often taken into statutory state care: Nearly 2,500 children in Northern Ireland were taken into care in 2008, an increase of 3% from 2007.¹³⁶ Most children in care leave at 18 years of age; many are in an intensely vulnerable emotional, psychological and financial state:

- Of all care leavers in 2007/8, 43% had been in care for over one year, while a significant 34% of all leavers had left a placement after just two weeks (or less).¹³⁷ This demonstrates how unstable foster arrangements can be, with children frequently being moved from place to place
- Many children repeat their parents’ patterns of economic dependency and family breakdown – the teenage pregnancy rates for female care leavers is seven times the average for Northern Ireland¹³⁸
- Educational failure affects the majority of care leavers, hugely limiting post-education opportunity and achievement into the workplace

Educational failure isn’t a universally prevalent problem in Northern Ireland. Rates of achievement among pupils at GCSE (including English and Maths) and participation rates among 16-17 year olds entering further education level are higher than in England and Wales.¹³⁹ International comparisons carried out by the OECD (Organisation for Economic Cooperation and Development) show that in sciences, Northern Ireland student achievement was higher than average, and in reading and mathematics slightly above average. However, the OECD report also pointed to a “substantial ‘tail’ of low-scoring students” in Northern Ireland.¹⁴⁰ Educational *failure* most acutely affects a distinct cohort of the population; those whom the Centre for Social Justice would recognise as having been left behind, as a result very often of disadvantaged backgrounds. This is particularly the case for care leavers: Children from all households in Northern Ireland are five times more likely to leave school with five or more GCSEs at grade A* – C than children leaving care:¹⁴¹

136 Publication of ‘Children Order Statistical Bulletin 2008: Northern Ireland Executive (2009)

137 Ibid

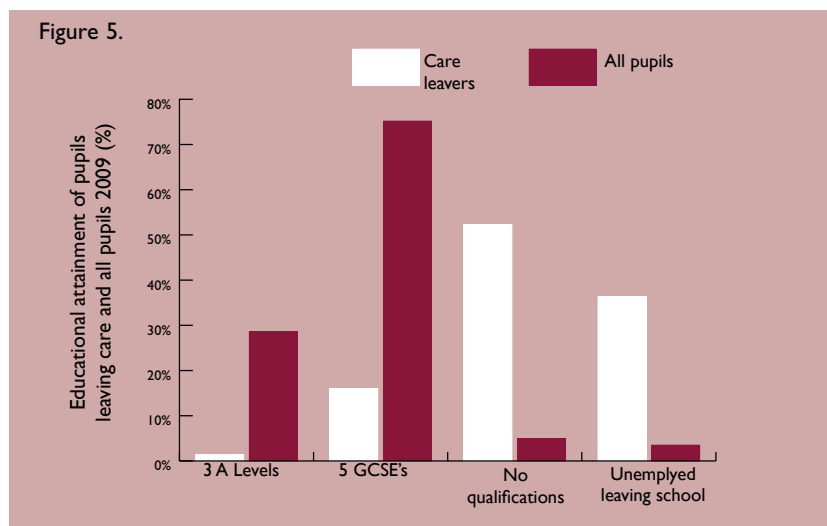
138 Former Care Leavers in Northern Ireland (2007/08) Statistical Bulletin DHSSPSNI p. 9

139 Table 5: Participation in full-time education and vocational training in schools and FE colleges by 16 & 17 year olds, 2001/02 to 2005/06. DENI (2006)

140 OECD – PISA Student achievement in Northern Ireland: Results in science, mathematics and reading among 15-year-olds from the OECD PISA 2006 study. See www.nfer.ac.uk

141 Former Care Leavers in Northern Ireland (2007/08) Statistical Bulletin DHSSPSNI

- Over half (53%) of care leavers had no qualifications whatsoever, this is the case for only 3% of all school leavers¹⁴²
- A huge 57% of care leavers are NEET, (2007/08 figures), an increase of 10% over just a two year period;¹⁴³ (and in contrast to the one in ten of all 19 year olds who are NEET in Northern Ireland)¹⁴⁴



Due to the lack of nurture they have received, care leavers are often a long way behind their peers in terms of being able to take responsibility for their own welfare and to handle well the range of choices independent living entails. Yet paradoxically they often have to make such transitions earlier than their peers and with far less support from family and others.

The issues faced by troubled children and young people who have experience of the care systems are deeply complex and difficult to resolve without properly understanding or acknowledging the root causes. Young people often resolve not to engage positively in school or in seeking employment as a result of their emotional state and mental health. Behavioural change in these areas will be hard to achieve with a target-driven approach and dispassionate programmes. Children and young people need to know that they really matter to other individuals and ideally to members of their families. Policy needs to be more effectively geared towards strengthening families and helping them to resolve dysfunction, with more provision focused on prevention of breakdown in all its forms.

3.4 Policy Recommendations

When designing successful early intervention strategies to protect against behavioural problems and distress in later life, the Centre for Social Justice

142 Ibid

143 Ibid

144 Ibid

Breakthrough Britain: the Next Generation report establishes the following guiding principles:

- The promotion of emotionally healthy relationships
- Aim to be ‘family-centred’ (not just ‘child-centred’)
- Treat all family relationships as important, including that of fathers
- Enable people, building on their strengths as opposed to making them dependent on professionals
- Make effective policy solutions universally available
- Ensure that an early years focus does not disadvantage or exclude the later years
- Prevention

3.4.1 THE SYSTEMS IN PLACE IN NORTHERN IRELAND

Multiagency approaches and emphases on the importance of the *family* – and not just the child – are evident and highly commendable in the ‘Families Matter’ strategy. ‘Positive Parenting’ initiatives in DHSSPSNI work towards facilitating families to be self-supporting and well-rooted in the community. Family cohesion is specifically advocated in Relationship Support and Family Mediation programmes,¹⁴⁵ and the importance of early intervention has been



‘Prisons and families’ event
January 2010

flagged up by the CCEA (Council for the Curriculum, Examinations and Assessment), which highlighted¹⁴⁶ the importance of pre-school education¹⁴⁷ and positive home learning environments for the poorest.¹⁴⁸

The Department for Education’s (DENI) *Every School a Good School* initiative aims to tackle underachievement with multiagency approaches for disadvantaged children. The Centre for Social Justice recognizes these positive aspects of current programmes. Such support must be promoted – and the effectiveness continually monitored.

However, rather than setting endless targets for improvement, the policy recommendations of the Centre for Social Justice recognise the need to address systemic failure and pioneer new ways of doing things, to allow real and long-term change to be achieved. Policies recommended are based on tried and tested models with proven successful outcomes – models whose principles are so desperately needed for the most vulnerable children.

145 Families Matter: Supporting Families in Northern Ireland. Regional Family and Parenting Strategy. (2009) DHSSPSNI

146 Produced in a summary report on the benefits of Effective Pre-School Provision in Northern Ireland (EPPNI), based on an ASPECTS preschool trial conducted by the CCEA

147 Melhuish, E (et al). Effective Pre-school Provision in Northern Ireland (EPPNI) Summary Report. DENI (2006)

148 Ibid

3.4.2 EARLY INTERVENTION POLICY

The Centre for Social Justice has long advocated an early interventionist approach. For disadvantaged children – most of whom are of school age – the typical policy response is to commission schools to do more and more. There needs to be a reciting of responsibility onto parents for their own children’s education. The most consistent educational support comes not from school, but from the home, where children spend the large majority of their time. Parents need to be facilitated to acquire the skills to become the role models they often lacked themselves and to make learning a more positive experience for their children than it was for them. As has been shown, this requires a radical shift in policy approaches to the family. When families are stabilized, then it is far easier to effect positive change for children at risk of disadvantage.

3.4.2 FAMILY POLICY

Family Hubs – as have been previously mentioned – would serve as facilities in the heart of communities delivering joined-up, family-focused services. They would have a particular focus on early years provision, with health visitors working out of them, and an emphasis on outreach. Family Hubs should have three key objectives:

- To strengthen families – focusing particularly on the social and emotional side of a child’s development and the parental relationship
- To prevent family breakdown – by means of preventative relationship support at key points in a couple’s relationship and working, where possible and appropriate, to help families in difficulty resolve conflict and find solutions to challenges
- To support separating families in achieving workable parenting arrangements which are in the best interests of the children

Family Hubs must be relevant to the needs of a local community and therefore locally commissioned from both statutory and non-statutory organizations.

Family Fostering

Where children cross certain thresholds of abuse or neglect they are often taken into care. Yet local authorities typically spend just 10 % of their Children and Family Services budget on prevention.¹⁴⁹ This leads to a general inadequacy – or under-availability – of services preventing the need for children to be taken in to local authority care by supporting entire families. Given the educational and social outcomes for children in care, this lack of preventative action is wholly unacceptable. We believe that much more should be being done to support vulnerable and dysfunctional families to care for their children.

We recommend the implementation of family fostering. These programmes would offer residential support to families with children at immediate risk of

¹⁴⁹ The Future of the Care population Working Group, 2007, *Beyond Care Matters: Future of the Care population*

entering care for preventable reasons. Family fostering facilities would provide intensive round the clock support to address the issues behind the need to take the child/ren into care. Family fostering facilities would initially be located in local authorities with the highest rates of children entering care. For both residential and day programmes, families would be expected to engage for a minimum of six months, but there should be no maximum time limit. Local authorities should, where possible, commission third sector providers to deliver family fostering initiatives.

A full outline of our programme for change can be found in our family reports: volume 1 of *Breakthrough Britain, Early Intervention: Good parents, great kids, better citizens* and *Breakthrough Britain: The Next Generation*.¹⁵⁰ We have also published *Every Family Matters*, the final report from the Family Law Review we established to assess the failings of the legal system and where it disincentivises or prevents cohesive families to develop.

Among the recommendations are included:

- Enhanced role for health visitors in intensive home visiting
- Enhanced support and training for professionals in children and infant mental health services to make services more responsive to emotional needs and motivated to provide greater continuity of care
- General promotion of relationship and parenting education
- Early Years Internet Portal to provide a one-stop-shop for information on funding, training, services, programmes etc
- Genuine choice for families in paid work and childcare

3.5 Conclusions

Those children who are most vulnerable are those most in need of good foundations for the future. A wealth of national and international research demonstrates the devastating and long-lasting impact of family breakdown and the link between social outcomes and family experience, for both adults and children. It is no coincidence that the highest levels of family breakdown are found in our most deprived communities, and that those areas also suffer the highest levels of addiction, worklessness, crime and educational failure. Our family experiences profoundly impact our life outcomes and a negative family experience is a key predictor of these other expressions of social breakdown. If disadvantaged children are to change their course, and break the intergenerational cycle of poverty and social exclusion that they have been born into, then we must invest in supporting and strengthening the institution of the family.

150 All available to download from www.centreforsocialjustice.org.uk

Final comments

As we stated from the outset, the political system in Northern Ireland, primarily concerned with the necessity of delivering political stability, must begin to provide answers to the severe social problems outlined here, with the aim of reversing intergenerational social breakdown. This report is clear that the UK Government faces very similar challenges. Although the hallmarks of conflict remain important factors in social breakdown in Northern Ireland, many people face issues entirely in common with social problems across the UK as a whole.

The work of the Centre for Social Justice focuses on what we have identified as the five main pathways to poverty: increasing family breakdown, educational underachievement, persistent and widespread worklessness, cycles of addiction and serious personal debt. These are often entrenched in our poorest communities and trap some of our most vulnerable people. They are closely related to poor mental health, high rates of criminal activity, domestic abuse and a pervasive sense of hopelessness.

However, our work is driven by a conviction that this loss of human potential is not inevitable and these are not intractable problems. By focusing policy in this way, these five drivers can become routes out of poverty – stronger families, educational success, meaningful employment, recovery from addiction and sound personal finance. Yet it is vital that they are tackled in a coordinated way. The Centre for Social Justice always considers the interrelatedness of these five pathways to poverty and many of the policies from Breakthrough Britain and other publications are presented here as effective solutions. They have been developed by paying careful attention to the evidence from academic research, statistics and the outcomes of current policy. Just as importantly, we always consult extensively with voluntary sector and other organisations who work closely with individuals, families and communities caught up in these interlocking and intergenerational cycles of disadvantage. Many of them are driven by an ambition to interrupt these cycles and see lives transformed. Our policies are always informed by the case studies and real-life examples they bring to our attention.

Given the importance of what is already happening ‘on the ground’, we



cannot overemphasise the extent to which policies need to be implemented in a way that is locally rooted, in the economic, social and political realities of Northern Ireland. Although social breakdown may be more pronounced in a society marred by a legacy of social division and inter-community conflict, the urgent need to tackle the underlying causes of poverty remains the same, it must drive social policy and be its fundamental aim.