

The National Anti-Poverty Strategy & Health

Presentation at Workshop on Demographic
& Socio-economic Data Standards for
Health Systems – NCIS as a case study

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Presentation

Outlines:

- background to National Anti-Poverty Strategy (NAPS)
- Key NAPS Health Targets
- Need for monitoring



Brief History of NAPS

- First National Anti-Poverty Strategy (NAPS) 1997
- Led by D/SFA & D/Taoiseach
- Government wide
- Social Partnership Commitment in 2000 to review NAPS
- Set targets in new areas e.g. health, housing
- Review published March 2002 – *Building an Inclusive Society*



Objective of NAPS

To reduce substantially and ideally,
eliminate poverty in Ireland, and
build a Socially Inclusive Society



The definition of poverty underpinning the NAPS is:

“People are living in poverty if their income and resources (material, cultural and social) are so inadequate as to preclude them from having a standard of living which is regarded as acceptable by Irish society generally. As a result of inadequate income and resources people may be excluded and marginalised from participating in activities which are considered the norm for other people in society”.



Poverty in Ireland

	1994 %	1997 %	2001* %	2003* %
Consistent Poverty (at 60% median income threshold)	15.1	9.7	5.2	9.4
Relative Poverty (60% median income threshold)	15.6	18.2	21.9	22.7

*Sources: 1994 - 2001 Living in Ireland Surveys (LIIS):
2003 EU Survey on Living and Working Conditions (EU-SILC)*

**NB. CSO state figures for 2001 & 2003 not comparable.*

See www.socialinclusion.ie and www.cso.ie



Groups at Greatest Risk of Poverty / Deprivation

- Families with Children especially lone parents and large families on low income
- People with disabilities
- Long term unemployed
- Elderly – especially those living alone



National Action Plan against Poverty and Social Exclusion (NAP / Inclusion) 2003 - 2005

- EU wide initiative under Lisbon Agenda
- EU Member States pledge “to make a decisive impact on poverty by 2010”
- 2 Yearly National Action Plans
- Annual Reporting requirement to EU from 2005 onwards



Key Areas Identified for Action

- Unemployment
- Income adequacy
- Educational disadvantage
- Health
- Housing / Accommodation
- Disadvantaged Rural and Urban areas



Responsibility for NAPS Implementation

- Government Departments & Agencies
 - objectives, implementation measures & development of policies within own remit
- Office of Social Inclusion (OSI) in D/SFA
 - developing, co-ordinating and driving the NAPS / Inclusion process, supports Departments & Others to implement NAPS



NAPS & Health

- Working Group on NAPS & Health established in late 2000.
- IPH provided technical support
- Extensive consultation process
- Report of Working Group on NAPS and Health, July 2001.
- This report with its targets and measures fed into Government's review: – *Building an Inclusive Society*



Poverty and Health

Institute of Public Health (IPH) study: Balanda and Wilde 2001

Mortality Rate 1989-1998 from all causes 3.4 times greater for lowest occupational group compared to highest.

- For cancer - twice as high
- Heart disease - over 3 times as high
- Accidents - 6 times as high



Key NAPS health targets

- Reducing differences between socio-economic groups in
 - premature mortality
 - low birth weight
- Improving Traveller life expectancy



Key Targets (contd.)

- To reduce the gap in premature mortality between the lowest and highest socio-economic groups by at least 10 % for circulatory diseases, for cancers and for injuries and poisoning by 2007.
- To reduce the gap in low birth weight rates between children from the lowest and highest socio-economic groups by 10 % from the current level, by 2007



Key Targets (contd.)

- The gap in life expectancy between the Traveller Community and the whole population will be reduced by at least 10 % by 2007.
- Life expectancy of Travellers & of Refugees & Asylum Seekers should be monitored so that targets can be set for Refugees & Asylum Seekers & revised for Travellers by 2003.



Measures and Actions

- Improved access to services and eligibility for them
- Wider Public Policy
 - health impact assessment and intersectoral work
- Monitoring and Research re. targets and indicators



Policy Measures

Increase equity of access to:

- Primary Care
- Acute Care
- Interventions for CVD and Cancer
- Community Supports for continuing care

Injury Prevention Strategy

Integrating Equality Dimension into health services.

Medical Card – income threshold & barriers to uptake - emphasis on families with children.



Monitoring of NAPS / Health

- DOHC commissioned IPH to undertake monitoring
 - premature mortality target
 - low birthweight target
- All Ireland Study on Traveller Health
- Working Group on NAPS and Health reconvened in consultative capacity on monitoring



Monitoring of NAPS / Health (Cont.)

Need to monitor “upstream”

- Access to Services
- Uptake
- Outcomes

Particularly in relation to major national strategies –
CVD, Cancer, Primary Care



Monitoring of NAPS / Health (Cont.)

Some relevant initiatives

- Steering Group on Social & Equality Statistics – led by Dept. of Taoiseach & CSO
- Living in Ireland Survey – ESRI up to 2001
- EU Survey on Income & Living Conditions (EU SILC)
- NAPS Technical Advisory Group led by D/SFA
- Monitoring responsibility of individual Depts.
- IPH – Public Health Observatory



NAPS Reporting structures

- Cabinet Committee on Social Inclusion
- Senior Officials Group on Social Inclusion
- Annual Social Inclusion Forum convened by NESF with C&V Pillar and other sectors
- OSI prepared Annual Report for Govt. 2004
- Progress reports to EU from 2005 onwards



In Conclusion

- NCIS is an ideal context in which to test demographic and socio-economic data standards which would be useful and feasible to collect in a variety of clinical settings.
- Proposed data standards - a key development with potential to yield significant information for planning and monitoring in relation to health inequalities.
- Important example of collaboration between Units in DOHC, NCIS, IPH & CSO.

Resources

1. Department of Social and Family Affairs. *Building an Inclusive Society: The Government's Review of the National Anti-Poverty Strategy 2002* <http://socialinclusion.ie/publications.html>
2. *Report of the Working Group on NAPS and Health* <http://www.publichealth.ie/news/uploads/145-NAPS%20Working%20Group.pdf>
3. Office for Social Inclusion. National Action Plan against Poverty and Social Exclusion 2003-2005, <http://socialinclusion.ie/publications.html> 2003
4. Office for Social Inclusion. National Action Plan against Poverty and Social Exclusion 2003-2005, <http://socialinclusion.ie/publications.html>
5. *Inequalities in Mortality 1989-1998: A Report on All-Ireland Mortality Data*, Kevin Balanda & Jane Wilde, Institute of Public Health
http://www.publichealth.ie/news_detail.php3?nNewsId=57



List of Acronyms

- **CPA** Combat Poverty Agency
- **C&V** Community and Voluntary Pillar
- **CVD** Cardiovascular Disease
- **D/SFA** Dept. of Social and Family Affairs
- **EA** Equality Authority
- **HIA** Health Impact Assessment
- **IPH** Institute for Public Health
- **NAPincl** National Action Plan against Poverty and Social Exclusion
- **NAPS** National Anti-Poverty Strategy
- **NCIS** National Cardiac Information System
- **NESC** National Economic and Social Council
- **NESF** National Economic and Social Forum
- **NHIS** National Health Information Strategy
- **OSI** Office for Social Inclusion

