

Combating Poverty:

identification and evaluation of the mediating factors.

Research Briefing

Why did the research take place

The experience of disadvantage often occurs from one generation to the next, making it very difficult for families to emerge from the cycle of poverty. Although there may be many reasons why this happens, gathering information or evidence about the exact experiences of people in poverty, particularly families who are unable to break the cycle, will help us understand their lives more clearly and find better ways to help those suffering disadvantage. Hence support given by the St. Vincent de Paul may be more effectively targeted as we will have a greater understanding of the experiences of clients in all aspects of their lives. In addition, we will build a strong argument through evidence collected in the research that can be presented to government departments with responsibilities across all areas of public life.

In particular we wanted to:

- find out in more detail about the social needs of SVP clients
- provide evidence for strategies relating to care and support;
- provide effective social and health support for clients;
- find out about the perceived and real barriers to doing well in education;
- find ways of increasing the motivation of client group and build positive attitudes and awareness among client group.
- enable the Society to devise and implement a strategy for directly assisting clients to improve their situation.

How did we do the research?

There were different stages in the research beginning with planning and deciding how the research would be done. At all stages, the Social Policy Committee of SVP guided the research team from the University of Ulster to ensure that the research was a collaboration between the members of SVP and the researchers. The research had two main parts:

Stage 1: A detailed questionnaire filled in face to face with the selected client

Stage 2: An informal interview with a smaller number of clients who also completed a questionnaire at Stage 1.

A questionnaire designed by this committee was used to explore the nature and extent of disadvantage by asking questions about: income and employment status, housing, transport, the social environment, access to services, education and health. In addition, the impact of disadvantage on health and self-esteem was examined. The support received from the Society was also explored to determine the nature and type of support accessed by the sample and how the service might be improved for those who are currently accessing help from SVP.

Who took part in the research?

The 19 areas of the Northern Region took part in the research, which involved a total of 360 clients from different conferences within each area council. Members were asked to select families who were 'typical' of their workload within a conference; therefore, if a conference mainly worked with clients who were retired, they would not be expected to complete a questionnaire with other categories of client. Larger area councils with a greater number of conferences were asked to complete more questionnaires, than smaller area councils that had fewer conferences to draw from.

How was the information collected?

Trained SVP members followed a detailed set of instructions on each occasion at both stages of the research process. The coordination of the research by the research team and staff at SVP head office in Belfast ensured that confidentiality was foremost throughout the data collection process.

Key Findings

Who took part in the research?

A total of 360 SVP clients participated in the first stage of the research, while 22 of this original group took part in the second stage of the study.

Table 1: Details about the sample group

Gender 86% female and 14% male

=Age Between 18-70+ years of age

Religious denomination 81% Roman Catholic, 12.3% Protestant, 3.1% mixed religion, 2.5% 'none' and 1.1% other denomination

Marital status 22% are married, 21.7% are single parents, while 19.5% reported to be single, 13.9% are separated, 11.1% divorced, 7.8% widowed and 3.9% cohabiting

Ethnic origin 97.5% were white, while Chinese, Black, mixed ethnic origin and Irish Traveller represented the remainder of the sample

Family type

The majority of respondents reported having dependants (individuals who are financially dependent upon the respondent) (76.3%), ranging from one dependant to nine dependants, who have an average age of 12.74 years. In terms of foster care, 18 clients (6.6%) have had children in foster care, ranging from a two week period to 16 years in care.

What does transgenerational mean?

“A client with other family members who have got support from the Society”

One of the main reasons for carrying out the research was to identify clients who have had other family members who access support from the Society and to explore the characteristics of a ‘transgenerational’ client in order to be able to understand more fully which individuals are caught in a family cycle of poverty and to suggest ways in which this pattern may be broken.

Profile: A transgenerational client

Information from the interviews and questionnaires has been summarised below to provide an overview of the main findings relating to persons who was identified as transgenerational. These persons were likely to report the following circumstances or characteristics.

- ◆ A 22-40 year old female, either married or is a single parent with dependants who has been accessing the Society for an average of 7.4 years for financial assistance or friendship and support. Female relatives accessed support in the past, primarily their mother, with 18.4% having more than one family member involved with SVP. Of this group the pattern of support sought is mainly financial across different family members.
- ◆ Unemployed and in 54% of cases have been out of work for more than 10 years, living on an average income of £130 per week derived predominantly through state benefits. They are likely to have had a social fund loan from the Social Security Agency and are repaying at least one debt, on average £67 per week.
- ◆ Living in a terraced or semi detached house owned by the Housing Executive, but are likely to experience fuel poverty, with 71% reporting to be living in poor housing. In terms of transport and driving, 76.3% have no driving licence and 68.9% have no access to a car, with walking as the most common method of moving about.
- ◆ Have themselves or their family suffered a serious illness in the last five years (60.7%), with 64% currently attending a GP, hospital or clinic, 46% of this group reporting depression or other mental health problems as the reason for their attendance. They are taking medication, primarily antidepressants for an average of 5 years.

- ◆ Experienced at least one crime (40%), either criminal damage or violence against the person (e.g., intimidation or harassment). Speeding traffic, bullying or harassment and child safety are concerns the transgenerational persons have about their environment.
- ◆ Reported that access to an A&E hospital, public phones and a community centre are poor, while there is greater access to a church, a primary school and a pharmacist.
- ◆ To have accessed the G.P., Social Worker and Health Visitor most often, although improvements to public transport.
- ◆ The majority did not pass the transfer test and those who progressed to FE after leaving school were more likely to obtain qualifications. 54.4% have no qualifications. Boys who are absent from school at least once a month or more often have parents with no qualifications, while girls absent from school may have parents with and without qualifications.
- ◆ To aspire to better health, happiness, financial security, improved housing, to return to work and improve their current situation either through employment or education. They hope their children stay at school, obtain qualifications, progress to FHE, get a good job and avail of opportunities missed by the respondent.

Key findings for overall group of 360 clients

Theme 1: Support received from SVP

It was important to explore the relationship between SVP and the respondents by asking questions such as;

- How long they have been involved with SVP?
- How they found out about the Society?
- How they first made contact?
- What services they access from SVP
- What family members also get support from the Society
- Have they had an emergency visit?

Key findings

SVP services have been accessed by respondents in this sample for an average of 6 years, ranging from 3 months to 26 years and they were made aware of SVP services mainly through a family member or the church, although other statutory providers, such as health and social services suggested that individuals contact SVP. Contact with the Society itself was made mostly through a friend, while writing a letter to the Society or making contact through the church were also used to get in touch with the Society.

“I am very grateful to SVP especially for their friendship, to have the knowledge I could call on someone and it would be in complete confidence is very reassuring”.

Financial assistance followed by friendship and support represented the key services accessed predominantly by respondents, with many receiving support on a number of levels.

Figure 1: Types of support sought by respondents from SVP

Marriage related problems	Bereavement	Alcohol/substance misuse
23.3%	21.7%	13.9%

The above figure illustrates the levels of support received by clients. It emerged that 92.6% obtained financial assistance, 75.1% sought friendship, 36.7% wanted help with form filling, 24.1% received advocacy and support, while 23.3% got marriage guidance for marriage breakdown, 21.7% sought support for bereavement and 13.9% got help with alcohol and substance misuse problems.

Individuals with single or single parent status requested more help with form filling than any other group. Respondents with dependants were more likely than those without dependants to seek support for marriage breakdown and financial support. Retired or incapacitated respondents were more likely than employed or unemployed individuals to get help with form filling from the Society.

43% have received an emergency visit from a Society member, for food, fuel or financial assistance in a time of crisis over the last 2 years.

Clients who had other family members accessing or who previously accessed SVP services were most likely to be mothers and sisters, followed by husbands.

Theme 2: Income and employment information

Clients were given the choice to answer questions relating to their employment and income status. Some of the questions asked:

- Were they employed, unemployed, retired or incapacitated?
- If they were employed, what job did they have, how long have they had that job, their income level, how they travel to work, how long it takes and the distance they travel.
- If they were not employed, what was the last job, what were the reasons for leaving?
- What benefits did they receive, how much was received and how long were they getting each benefit?

Figure 2: Clients' employment status

Unemployed	Employed	Incapacitated	Retired
67.9%	13.5%	9.5%	8.6%

As the above pie chart shows, 68% of the sample are unemployed, 13.5% are employed, while 9.5% are incapacitated and 8.9% are retired.

Employed respondents

Employed respondents tend to be female aged 31-50, either a single parent or are of single status and have dependants. 38.3% are in permanent part-time posts, followed by permanent full-time (25.5%). The mean number of hours worked in this job is 22.56 per week with 5.5 years representing the mean length of time in the post. The average net salary is reported by respondents to be £118.95 per week, while the average income per week for permanent part-time positions is £80.63 and £168.33 for permanent full-time.

Respondents travel on average 5 miles to get to work and most often get there on foot, in their own car or by bus, taking on average 18 minutes to travel to work.

52.1% of employed clients declare being in receipt of at least one state benefit; the most commonly reported to be child benefit, followed by income support and housing benefit. 45.6% of the employed group get working families tax credit as part of their income.

Unemployed respondents

An unemployed person in this sample is most likely to be female in the 22-40 age group, be married, separated or single and have dependants. Geographically the area with the largest number of unemployed respondents is Derry City, followed by Mid Ulster.

The average number of years being economically inactive is 10, ranging from 5 months to 40 years. In addition, 13.3% have been unemployed for 20 years or more, 33.1% have had this status between 10 and 19 years, while 53.4% have been out of work for a lesser period (5 months-9 years). The most recurring reported reason for leaving work is family commitments followed by illness.

It also emerged that unemployed respondents are more likely than employed individuals to have family members who have accessed support in the past.

Incapacitated respondents

66.7% are female and 33.3% are male, mainly aged 41-60 and of single status, with 50% having dependents. Mid Antrim (15.2%) and West Belfast (12.1%) are the two area councils with the largest number of respondents in the incapacitated group.

Retired respondents

This group comprises 63.3% female and 36.7% male, with 60% in the 70+ age group. Most are either single or widowed with 14.4% stating that they have dependants. In terms of location, East Down (20%) and West Belfast (13.3%) have the largest percentage of retired respondents in the sample. Friendship more than other services is the main type of aid retired respondents receive from SVP.

Income derived from State benefits

319 respondents (88.6%) reported being in receipt of at least one State benefit. Of this group 19.4% receive one benefit, 32.9% receive two, 33.5% receive three, while 11.6% are in receipt of four, 2.2% receive five and only one person reported receiving six different state benefits.

Unemployed and incapacitated groups contain a larger number of respondents who receive two, three or four benefits, than individuals receiving only one benefit. The retired and employed groups have a greater number receiving one or two benefits than multiple benefits.

Income Support is a dominant benefit across all groups, followed by Housing Benefit, Child Benefit and DLA. The mean amount of benefit received is highest for the unemployed at £141.50 and for incapacitated groups it is £142.50, with employed respondents having the lowest average amount of benefits at £87.51.

Theme 3: Expenditure and debt

A set of questions explored the type and amount of weekly expenditure clients and their families were spending alongside specific debt commitments that were also trying to be met. The questions included:

- A list of weekly expenditure items, such as housekeeping, transport costs, bills, fuel costs etc
- A list of debt types were given, such as catalogues, arrears, Credit Union loans, other loans etc.
- The amount of the debt and outstanding amount on that debt were also requested.

Taking the average amounts given, electricity (£12.07), house keeping (£58.80) and telephone bills (£8.73) were reported by the largest number of respondents as the most costly items in terms of weekly expenditure.

The overall average of the total expenditure for respondents indicates that the employed group have the highest expenditure levels at £201.48 per week, with less difference noted between the unemployed £134.38 and incapacitated groups £128.51, while retired respondents have the lowest overall average expenditure at £85.09.

Fuel expenditure

Fuel costs (i.e., coal, electric, gas, oil) account for 10-30% of total weekly expenditure;

An average of £27 per week is spent by households on fuel, with more money being spent on coal by households per week than other fuel types. The average being paid out by clients each week on the different fuel types were: (**coal**=£17.55); (**oil**=£12.52), (**gas**=£7.97) and (**electricity**=£12).

Fuel poverty

79% of respondents who gave complete information relating to income and fuel expenditure spend 10% or more on fuel, i.e., experience fuel poverty.

All of the 19 areas have respondents who are in fuel poverty, all but two areas (North and S&E Belfast) have 50%+ of clients reporting fuel poverty;

The majority in fuel poverty are Housing Executive tenants (83%), followed by homeowners (77%), private tenants (29%) and housing association tenants (50%);

Of those experiencing fuel poverty:

94% have no central heating;

81% have no insulation;

70% are awaiting repairs to be completed on their property.

Debt “Sometimes I don’t sleep well because I put myself into debt with HP and that, so especially at Christmas when I do this,

I wouldn’t sleep well”.

61.4% of all respondents report having at least one debt commitment. The most common forms of debt are catalogue repayments (42.8%), Credit Union loans (42.8%), and Social Fund loans (37.1%).

Respondents in the unemployed group had the highest mean score for reported debts, followed closely by the incapacitated group and then the employed group. Payment to catalogues is the primary form of debt for the employed, retired and incapacitated groups, while repayment for a Social Fund loan is the main debt reported by unemployed respondents.

Furthermore, support received by these clients from the Society is primarily financial, with three out of the four groups (employed, unemployed and incapacitated) seeking financial help more than any other kind from the SVP.

Theme 4: Housing

Under this theme, the type of house a person lived in, who owned the house, its state of repair and any other housing problems were explored.

The majority of clients are Housing Executive tenants living in either terrace house or semi-detached houses. The largest percentage living in detached dwellings are owner occupiers. Overall:

- 81.7% of homes have central heating / 18.3% without central heating;
- 76.3% are insulated / 23.7% without insulation
- 86.9% have a garden / 13.1% without a garden
- 32.5% are awaiting repairs to be completed to their property;
- 13.1% of Housing Executive tenants reported an absence of central heating in their home which represented the largest percentage of clients without central heating;
- Housing Executive tenants were also the largest percentage of clients without insulation, lacking a garden and awaiting repairs (average length of time for repairs is 15 months, with 32% of this group waiting two years and more to have these repairs completed).

Regional housing differences

The largest percentage of owner occupied houses in the current sample can be found in Mid Ulster, West Belfast, Derry City and Strabane;

Strabane is the only area where there are more individuals living in homes awaiting repairs than in houses where no repairs are needed. Houses without central heating were most likely to be in Mid Ulster and East Down.

Theme 5: Transport

Questions in the transport section looked at whether or not the client had a car or access to one, whether they held a driving licence or were part of a motability scheme (linked to DLA), the types of transport they used and how often they used these and how they rated public transport provision. It emerged from the responses that:

- 67.7% do not have a driving license;
- 31.6% of the sample have access to a car;
- 19% are car owners (either themselves or their partner);
- Having access to a car was associated quite often with being part of a motability scheme. This linked to the finding that incapacitated respondents were more likely to have a driving license and have access to a car, as were employed clients.
- Homeowners and males were more likely to hold a license;
- Lack of access to a car referred more often to tenants, predominantly Housing Executive tenants;

- Housing Executive tenants were also more likely not to have a driving license;
- 5% of respondents' income is spent on public transport costs, which accounts for 7% of their total weekly outgoings.
- The most common forms of transport used on a daily basis are travelling by foot, family car, bus or taxi;
- On a weekly basis, the most common forms of transport are getting a lift with someone, a taxi or taking the bus;
- Cost of public transport was viewed more negatively by respondents than other transport issues, such as frequency of service, convenience of services, access for the disabled and personal safety;
- 42.2% of the sample stated how much they spent on public transport per week, on average £8.67, while 17% reported expenditure related to private transport which on average was £18.53.

Regional differences

Areas that rated transport more negatively ('poor' and 'very poor') than positively ('good' and 'very good') included; Mid Ulster, East Tyrone and Fermanagh (these are all represented in the Omagh District Council area, with both Fermanagh and Mid Ulster classified under two District Councils);

Mid Ulster and East Antrim had a higher percentage of respondents rating frequency of service, cost and convenience of service more negatively,

Clients from East Antrim also viewed personal safety as poor.

Theme 6: Health

This theme looked at both physical and psychological well-being. Questionnaires were used which have been used with many other groups throughout the world and have proved to be very valuable and reliable at providing information on health (The General Health Questionnaire – GHQ) and how we feel about ourselves (The Rosenberg Self-Esteem Scale). In addition, the family background or patterns of health within families was also looked at. Some of the findings show that:

- 54.4% of the sample have experienced a serious illness in the last five years, referring to either themselves or their family;
- 55.4% have a history of illness in their family, ranging from heart related problems, cancer, asthma to diabetes;
- Heart related problems, incorporating angina, high blood pressure and heart disease were reported most frequently by respondents in terms of family history of illnesses, followed by cancer and asthma;
- Currently, 50.8% report experiencing a physical or mental health problem, which relates to themselves or their family;
- 63.8% stated that they are attending a doctor, hospital or clinic for their condition. Current medical problems tend to relate to either depression or other mental health issues, which includes alcoholism, anxiety, schizophrenia and Obsessive Compulsive Disorder (OCD);

- 65.5% are taking medication for their complaint, mainly anti-depressants, followed by other tablets, inhalers and painkillers. The average length of time that medication has been taken is 5.8 years, ranging from 2 months to 50 years;
- 92% of clients are registered with a dentist.

“You would think it would only be stress during the day but I go to bed and lie there worrying so it is a constant stress, you don’t have a night’s sleep”.

Information gathered from the General Health Questionnaire (GHQ12)

This is a widely used questionnaire designed to assess mental health problems and an individual’s psychosocial well-being.

- Results showed that only 23% of the total SVP sample had a good psychological health;
- A substantial proportion of the SVP sample (approximately 9%) scores the highest possible value on the GHQ12, which indicates extremely low levels of psychological health;
- Following the classification used with the GHQ12, the largest percentage of this current SVP sample are defined as ‘depressed’, with the lowest percentage of the current study’s respondents appearing in the ‘happy’ grouping;

Local and national comparisons

Comparisons between the SVP sample and the Northern Ireland sample indicate that in relation to the ‘Depressed’ grouping, twice as many respondents from the SVP sample occur in this grouping compared to the Northern Ireland sample. Also it was found that:

- Less than half of the SVP sample are classified as ‘Happy’ compared to the percentage for the overall Northern Ireland sample.
- A greater percentage of females than males are present within the ‘Depressed’ category. Overall suggesting that females from the SVP sample are perhaps suffering disproportionately when compared to males in terms of their psychological disposition.
- Compared to the results from national surveys, GHQ12 scores for the SVP clients are high. Both male and female SVP clients got scores GHQ12 almost double that which would be expected in the general population.
- In general, a substantial proportion of SVP respondents report GHQ12 scores that are in a range indicative of mental health problems such as depression and anxiety.

Self Esteem – How we feel about ourselves

Using the Rosenberg’s self report measure of self esteem, SVP respondents mainly report a slightly favourable score, although these scores did tend to be towards the lower end of the scale.

In comparison to other similar studies the SVP sample is slightly lower than other typical values found. This indicates that this sample of clients have reported a lower self esteem than people from other similar research studies.

Theme 7: Educational achievement

Questions under this theme wanted to look at the level of qualifications clients had and that of their immediate family (mother, father, offspring, client's parents and partner's parents). As well as this, we looked at attitudes to education, what people did after leaving school and what their immediate family did when they left school and whether or not they passed, failed or did not sit the Transfer Test (11+ exam). In relation to their children we asked about attendance at school and expulsions from school. The findings showed that:

- 46.4% reported that they did not have any qualifications;
- A number of 18-30 year olds had qualifications but were not in employment. Reasons given were pregnancy, family commitments and child care costs;
- Individuals who were 50+ years of age were more likely than younger age groups to report having no qualifications.
- In terms of current status, married or widowed respondents were more likely than any other group to report not having qualifications.
- Clients without qualifications were more likely not to have taken the transfer test.
- Those with qualifications were more likely to have passed the transfer test.

Patterns of progression and participation

- Individuals who have qualifications were more likely than those without qualifications to have progressed to Further Education;
- 94% of respondents who are currently employed and went to Further Education, have qualifications;
- Individuals who have been to Further Education after leaving school, are currently in employment and have qualifications, tend to be female aged 31-40, single with dependants and geographically spread across 9 areas of the Northern Region.

Educational achievement and employment status

- No individual in the 18-30 age group without qualifications are employed;
- 18-30 year olds represent 25% of the sample, but only 11% are employed; 64.8% have qualifications and 35.2% have no qualifications;
- Employed clients without qualifications are all 31 years of age or over;
- 93% of respondents in the employed group who progressed to Further Education after leaving school have qualifications;
- 84.6% without qualifications in the employed group went straight to work after completing compulsory education;
- Individuals with qualifications were more likely to rate the value of education as either 'quite important' or 'very important';
- 82.2% recognised the importance of education and its role in getting a job;
- The incapacitated group was more likely than employed, unemployed or retired respondents to rate the value of education as not very important in terms of their family's employment.

“I know a job with low pay is not the answer so I want to go to night classes to get some qualifications so I can get a better paid job”.

Attendance and absenteeism

- 23% of households with dependants report absences from school of at least a few times a month (18% of boys and 21.9% of girls).
- 58% of absenteeism which occurs at least a few times a month, refers to one dependent households, 26.9% relates to 2 dependant households, 11.1% refers to 3 dependants, 2.6% to 4 dependants and 7% for households with 5 dependants.
- 95% of these households have Free School Meal entitlement.
- 5 children have experienced exclusion from school in the last two years, with 3 currently excluded. One child who is currently excluded has 10 previous exclusions.
- Boys absent from school at least a few times a month are more likely to have parents with no qualifications, whereas girls with this rate of absenteeism are more likely to have parents with qualifications.
- Absenteeism may be related to employment status as children absent at least a few times a month are more likely to come from households that are unemployed.

Family patterns of educational achievement

- Sons and daughters of respondents are the most likely family members to have obtained qualifications, predominantly at GCSE level.
- 24% of respondents with no qualifications reported that at least one family member has qualifications.

Family patterns of progression

- 16.7% of the sample progressed to Further Education after leaving school.
- 2.2% of respondents' mothers and 1.3% of respondents' fathers went to Further Education, while 10.2% refer to sons' involvement and 9.4% refer to daughters going to Further Education college.
- 28.3% of the progressing group passed the transfer test as did 23% of family members.

Theme 8: Access to services

Respondents were asked about the types and services they accessed from the statutory area and how often they used these services. They were also asked about how they accessed them in terms of transport or whether they received home visits. It was found that:

- Services accessed most frequently were a GP, a health visitor and a social worker;
- 31% who indicated they accessed a GP surgery did so fortnightly or more often;
- The most common transport method of accessing statutory services was by foot, by car or through a home visit.
- Within the items used to assess geographical access to services, access to a pharmacist had the highest percentage ratings for 'very good'.
- Access to an A&E hospital or a museum were rated most frequently as 'very poor'.

Regional differences

Respondents from Derry City and North Belfast (SVP area council classification) and Derry, Belfast or Antrim (1982 district council classification) accessed these services most frequently;

Respondents from area councils such as North Antrim, Mid Ulster, Mid Antrim, North, S&E and West Belfast and Derry City used at least two public transport connections/systems to reach their destination (Antrim, Ballymena, Belfast, Coleraine, Derry and Lisburn district council areas).

Mid Ulster and North Belfast were SVP areas where respondents had to make 3-4 connections to access statutory services by public transport (Belfast and Cookstown were the district council areas where this occurred).

Respondents from areas such as Mid Antrim, North Antrim and Derry City reported a lack of service provision in relation to the key indicators of deprivation for geographical access to services.

Within the 1982 district council classification, respondents from Ballymena, Derry and Coleraine repeatedly report absence of significant services.

Theme 9: Social environment

This theme was concerned with how clients view their local area and what their attitude was to issues that affected them living in their local neighbourhood. Clients were asked to rate how concerned they were about a number of key issues such as speeding traffic, child safety, crime and the state of houses and gardens.

- Respondents had greatest concern about speeding traffic, child safety and crime in the their local neighbourhoods.
- Individuals were less concerned about scruffy/neglected buildings or gardens and the absence of pavements.

“...there is also living in the middle of the town with all the noise, windows getting smashed and places getting broke into, worrying if your pram is going to be stolen as you have to leave it downstairs”.

Experience of crime

Clients were asked if they had experienced any crime or crimes. A number of categories were listed in the questionnaire which followed the same categories of crime used by the PSNI. It emerged that:

- 62% have experienced at least one crime, mainly violence against the person, criminal damage or burglary.
- 26% of the sample have endured two or more crimes.
- Mid Antrim, S&E Belfast, Omagh, North Belfast, West Belfast, Kilmegan and Derry City have clients represented in 7 or 8 of the crime categories listed.
- Unemployed people were more likely than employed, retired or incapacitated to have experienced criminal damage.
-

Individuals waiting for repairs to be completed on their homes are more likely to have experienced criminal damage, with the highest percentage comprising of Housing Executive and private rented tenants.

Theme 10: Aspirations

This theme explored the aspirations or wishes that clients held for their future, in terms of not only themselves or their career/job, but also the aspirations they held for their children and their partner.

For respondent: better standard of living, employment, better health, housing, education, environment and peace and happiness;

For their career/job: return to work or secure employment, improve current work situation, return to education, continue with education, improve income standards, no aspirations for career/job;

For their children: better education, secure employment, better standards of living and opportunities, happiness and peace, health;

For their partner: better employment prospects, improved health, happiness, better standard of living, no aspirations/negative aspirations.

“The stress works on your body, taking the cold spots...It comes out in bad temper also. I think stress is a killer. It leaves your body open to everything. To have a helping hand and every now and then...Nobody can guarantee anything but someone to sort out the monsters...Somebody who will say you are ok, there are others like you. Stigma is something you fight all the time. It is something I have had to work at since becoming a single mother, you don't have anyone to discuss things with”.

Conclusion

The study has shown that, in order to address transgenerational poverty, it is necessary to begin by seeking the views of the poor and those who are close to them. There have been improvements over the years in the lives of clients and their families in terms of educational achievement and potential for accessing health services. It has been claimed (National Children's Bureau, 2003:1) that "poor education is the key vehicle through which poverty is passed on from one generation to another and good education can be the most effective means of helping to counteract the damaging effects of poverty". Respondents in this study are aware of what it takes to improve their lives and they aspire to better education for themselves, their children, improved health and better accommodation. The barriers they face are debt, social isolation, lack of services and poor health, particularly depression and mental health problems. The long terms of use of medication, while reducing stress may hold back people from reaching their potential.

The members of SVP have, through a wide network of volunteers and clients, identified patterns of social need that may not have been as noticeable to others. In particular, members have noted the needs of families who are working but earning a low income, most likely noticed through close links established within communities. In Northern Ireland, telling someone about financial hardship is not easy, nor is seeking support for the hardship experienced. Major changes in the economy in recent years and the disappearance, for example, of many skilled industries are factors that have affected the entire population but particularly males.

The history of SVP gives evidence for its staying power and flexibility both in terms of working across and within cultures and communities and its response to changing times in society. Despite recent forms of economic development in the UK, equality among people has tended to increase rather than diminish. The spread of car ownership, alongside the decrease in public transport for example, has created problems for families and individuals living in areas where access to services is poor. While the development of technology and networked services such as the internet have proved to be beneficial resources for many, those who cannot use this resource may find themselves unable to take part fully. In addition, as financial and shopping outlets (particularly fresh food shops) move away from poor communities to locate in areas where they can take better advantage of profits, there are additional costs to be met by the remaining people in the communities deprived of these important services.

The costs are being met in many instances by agencies and groups like SVP, through the provision of transport, introductions to bodies that can offer affordable credit, giving advice and support in relation to government organisations and offering financial assistance. The question that arises is to what extent SVP can work together with government to reduce the effects of exclusion and deprivation and how their resources can be best targeted. In addressing this question, it is important to acknowledge that one of the strengths of SVP has been independence from government and recognition by communities that they can be trusted.

Collaboration can, however, take many forms. One form is that of advocacy or support which the respondents in this study have found to be extremely helpful as it has been based on the long term experiences of members, their knowledge of statutory services and the contacts they have built over the years. There is also the recognition by government bodies of the creditability of SVP within communities and the capacity of SVP to gain access and acceptance across different communities. Central to the role of advocacy is the establishment of an effective communication network to take account of the work of the advocates for the poor. Other examples where SVP has been working on joint projects with government bodies and other organisations include projects such as the provision of day centres, home heating installation, breakfast clubs for school children and supporting clients to join Credit Unions.

The research has shown that lack of education is preventing clients from being in a position to gain satisfactory and reasonably paid employment or, in the case of younger clients obtaining work of any kind. It is clear, then that any assistance that can be provided to clients to help parents and children to improve their education will be very important in terms of improving life chances.

Overall, however, clients were at pains to point out that current levels of benefit were inadequate to meet their needs and any solutions to poverty must incorporate recognition at government level of this view.

Recommendations

The problem of social isolation is felt by many and the personal support that is given should, where possible be supplemented by activities designed to enable lone parents to become engaged in social networking; this feeling was all-pervasive and was cited as a central reason for feelings of helplessness and depression; it indicates that the social support role of SVP is crucial and that members should recognise that the personal interaction with clients, in many cases, is as important as other forms of assistance.

The recommendations are presented under headings relating to the government departments that have the relevant policy responsibilities:

Department of Social Development (DSD) including Northern Ireland Housing Executive (NIHE) and Northern Ireland Electricity Board (NIEB)
Department of Health, Social Services and Public Safety (DHSS&PS)
Department of Education (DE)
Department for Employment and Learning (DEL)

Department of Social Development

There is an expressed need for access to leisure facilities and opportunities for exercise and this may be supported by offers of transport and entrance fees; consideration should be given to negotiation with the local councils and other providers to determine whether further concessions on entry can be made available. Since there are health benefits to be achieved and gains in social networking and child development, this issue should be addressed by statutory bodies as well as SVP.

Department of Social Development

Where it is possible to assist the provision of services that enable the clients to connect to communities, to have increased personal and social mobility and to develop networks and friendships, this should be encouraged. Again, this may mean identifying barriers to participation in the facilities available and informing statutory bodies of the opportunities for addressing gaps in provision. Equally, it may mean examining how SVP facilities and resources can be best used to enhance the personal support provided so effectively by members at the moment.

Department of Social Development and Northern Ireland Housing Executive

Respondents have serious debt problems that are accentuated by the Social Fund loan system and the existence of 'catalogue' sales which carry a very high rate of interest. It is clear that many respondents have recognised the value of Credit Unions and SVP should continue to support Credit Unions. The SVP policy of providing guarantees for clients so they can join Credit Unions should be supported and encouraged.

There is a role for SVP in informing statutory agencies of the benefits of this form of community credit and suggesting that there is statutory support for enhancement of the service for clients. This support could take a number of forms. In one area the Northern Ireland Housing Executive has made available a small dwelling in an estate so that outreach premises can be provided for Credit Union clients in this area. Since there are resource limits on the ability of SVP to guarantee Credit Union loans, there is a role for statutory agencies to support SVP in this role.

Department of Social Development and Department of Education

There should be an examination of the financial implications of school policies, particularly in relation to clothing (eg school uniforms for primary school children), sports equipment and other items that may involve expense for parents. While schools often do not require that pupils participate in external activities (e.g., visits) that involve costs for parents, there is a risk that the self esteem of pupils will suffer as a result of being perceived as different by other pupils. The National Children's Bureau (2003: 3) has noted that "Poor children can be denied access to school trips; they can face problems in affording school uniform; they can suffer stigma from insensitive approaches to school meals; they can feel socially excluded". In addition, it is important to consider the provision of school meals during school holiday periods since disadvantaged children may benefit both in relation to nutrition and in maintaining a positive, stable and continuing relationship between the school and the pupil.

The type of support provided by SVP through breakfast clubs, homework clubs and community facilities offers opportunities for children to relate to education in a context where they can receive additional attention. This facility should be further supported and extended by the statutory bodies in collaboration with SVP.

Department of Social Development and Northern Ireland Housing Executive

Concern about the perceived high level of crime suggests that the fears of the respondents need to be addressed through an investigation into the reasons for this perception. It may be that the official reporting categories need to be reconsidered since problems involving harassment may not be fully reflected as respondents may not be aware of the legal status of the events. Fear can restrict movement and can contribute to social isolation and lack of confidence and it may be as important to examine the expressed fears as the actual reported incidences of alleged offences. The fear of crime is likely to lead to further isolation as people are concerned about leaving their home. Supporting clients and assisting them to deal with their fear of crime may be an important aspect of dealing with the problem.

Department of Social Development, Northern Ireland Housing Executive and Northern Ireland Electricity Board

Many households (mostly NIHE tenants) have been identified as suffering from fuel poverty and also require house repairs, central heating and insulation. Since clients in fuel poverty are in the position of having to purchase the more expensive types of fuel, it is recommended that these clients should be prioritised in terms of the provision of efficient energy systems.

Department of Health and Social Security and Public Safety

A defining characteristic of respondents has been the feelings of depression that have been articulated and the resulting threats to mental health. The use of medication is widespread and there must be a concern that purely medical solutions to the problems experienced by the respondents may not be sufficient and that respondents may become dependent on medication. This is a sensitive area involving serious ethical issues. The knowledge that depression and mental health are pervasive can serve to inform SVP policy and practice through the provision of a service that enable clients to become more autonomous and feel more in control of their lives.

Department of Health and Social Security and Public Safety

The evidence of high levels of medication from respondents may assist health professionals and SVP members in recognising that they may often be interacting with clients whose words and actions have to be considered sympathetically and sensitively in the light of this information.

Department of Health and Social Security and Public Safety

established by statutory agencies to provide support for abusers but the extent to which these new forms of provision have penetrated the communities most in need is questionable. There is a role for SVP to consider in directing providers to areas of need and collaborating in the design of a programme intended to effectively target

persons at risk. The problem of alcohol abuse is not new and, possibly because of this, tends, perhaps to be ignored, in the context of other substance abuse problems that have arisen. It is a serious problem, however, for the person concerned and for their families and impacts on family income, mental health and the abuse of partners and children. While it is a problem which is interrelated with a range of issues, it needs to be addressed especially given the rise of a generation with new demographic trends in relation to abuse (e.g., more women and young people becoming involved). A number of new initiatives, such as substance abuse centres have been

Department of Education

Bullying and harassment is a serious problem for the respondents and lone parent families may be particularly vulnerable in this respect. The origins of the problem need to be further explored but there is a need for schools to ensure that poverty does not become a reason for being bullied.

Summary

The scope for collaboration between the statutory and voluntary sectors should be investigated in order to enhance the delivery of services and assist access to services. Collaboration should be targeted to reflect the need to support voluntary organisations that are actively and intimately involved with people in communities in areas where there is acute poverty. It will be important that co-operative methods of working are carefully developed to take account of possible community suspicions regarding statutory intervention and to preserve the confidentiality that is so closely safeguarded by bodies that are working at the cutting edge of poverty.

Acknowledgement

The researchers wish to acknowledge the strong support for the research provided by the Society of St. Vincent de Paul and for the commitment shown by members assisting with the carrying out of the research. Our thanks are also due to the clients who gave so much of their time and whose voices we hope are fully represented in this report.

K. Collins

G. McAleavy

G. Adamson

B. O'Reilly

C. O'Hagan

University of Ulster