

# **NATIONAL CHILDREN'S ADVISORY COUNCIL**

## **REVIEW OF 2002 MONITORING REPORT ON IMPLEMENTATION OF THE NATIONAL CHILDREN'S STRATEGY**

### **1. Background**

The terms of reference of the National Children's Advisory Council provide for the Council to have a role in monitoring the implementation of the National Children's Strategy. A Monitoring Report on the Implementation of the National Children's Strategy was produced by the National Children's Office at the end of 2002. This report has now been reviewed by the National Children's Advisory Council. A Monitoring Subgroup was established to compile this information. All members of the Council were invited to submit their views on the Monitoring Report, in the following format:

1. General comments on the implementation of the Strategy, including progress made and deficiencies that have arisen;
2. Views on the Monitoring Report itself in terms of the information contained in it and its structure;
3. Suggestions about how to improve the monitoring of the Strategy and the measures which could be utilised to achieve this;
4. Experienced disparities between what is stated in the Report and what is happening on the ground;
5. Gaps or duplications in the services covered by the Report;
6. Priorities which should now be addressed.

It should be noted that the views contained in this report represent the views of the Council as a whole.

### **2. General Comments: Progress**

While substantial progress has been made in many areas of the Strategy, overall progress has been inadequate to meet the commitments and to achieve the goals of the Strategy. At the present rate of progress, the goals of the Strategy will not be achieved.

### **3. General Comments: Deficiencies**

The National Children's Strategy is Ireland's implementation plan for the UN Convention on the Rights of the Child. The Council noted that no link between the two is made in the Monitoring Report, nor is there any indication that the Strategy's implementation has been assessed in relation to the Convention

#### *(i) Evaluation of progress on the Strategy:*

It is the view of the Council that an implementation timetable for the Strategy needs to be put in place. Costed, timetabled and measurable action plans need to be developed and agreed in relation to each of the Strategy's specific commitments. It would also be helpful if implementation of the Strategy were linked with implementation of other key strategies and conventions.

The National Children's Office must seek methodologies for monitoring the delivery of the Strategy. The National Children's Office accepted that the 2002 monitoring report, which was the first such report, was mainly descriptive, and that there would be a need to adopt a more evaluative approach with future reports. The Council agrees that future reports must assess, evaluate and comment on progress. Blockages and barriers to implementation must be identified. Information contained in the Monitoring Report must be both qualitative and quantitative, outlining what has been developed and its effectiveness.

The Council commented on the fact that the level of detail supplied by the Government Departments varies considerably. In some cases the information contained in the Report was vague, aspirational and lacking in evidence. The data provided by Departments and included in the Report often covers periods commencing years prior to the launch of the Strategy. In many cases no detailed breakdown of specific progress made corresponding to the period under review is given. A further point made was that the breakdown of information into progress under individual actions means that the report is very fragmented and it is difficult to get an overview of the implementation of the Strategy as a whole.

#### *(ii) Awareness of the Strategy:*

In relation to awareness of the Strategy, while awareness of the Strategy is high within the child care sector, there is a lack of awareness of the Strategy in the Health Boards and among the general public.

*(iii) Role of the National Children's Office:*

The Council identified a need for the role and responsibilities of the National Children's Office to be strengthened and more clearly defined.

**4. General Comments: Goal 1**

The Council commented favourably on the detail of the information supplied in relation to Goal 1, for which the National Children's Office takes the lead role. It expressed disappointment that integration of the voice of the child in planning and policy development has not been progressed. The passing of legislation on the Ombudsman for Children was welcomed but it was noted with great disappointment that the Ombudsman has yet to be appointed. It was also noted with great disappointment that there has been no progress on the issues of the European Convention on the Exercise of Children's Rights, medical consent and children's constitutional rights. In relation to the Comhairle na nÓg, it was the view of the Council that these should be independently evaluated. The Council was disappointed with the lack of progress made in relation to training and education of statutory and non-statutory personnel in relation to the entire body of children's rights, including but not limited to participation. The lack of progress in promoting awareness among children of their rights under the UN Convention was also noted.

The establishment of the children's news programme on Network 2 is welcomed.

The Council noted that the Monitoring Report contains no substantial information about the Review of Guardian-ad-Litem services or family conferencing.

**5. General Comments: Goal 2**

The Council was disappointed with the lack of progress in relation to Goal 2. By end 2002, there has been no progress on child impact studies/statements, the development of child well-being indicators, the State of the Nation's Children Report, the National Children's Research Dissemination Unit, quality standards or better information systems. There has been limited progress on the National Longitudinal Study and the Children's Research Programme. The Council expressed the hope that the recent appointment of research staff in the National Children's Office, in early 2003, meant that these issues could now be progressed.

In relation to the implementation of Goal 2, the Council agreed that a need exists for timely research. It is suggested that evaluative research be a component of all initiatives.

## **6. General Comments: Goal 3**

The Council was generally of the view that the quality of information given about actions under this goal was mainly descriptive. The absence of any action plans or effectiveness indicators means that it is difficult to measure actual progress.

The Council is of the view that some of the Health Boards have yet to fully commit to the Strategy. The delivery of the Strategy at local level is not examined in the Report, in terms of either the City and County Development Boards or the Health Boards. This is a major deficiency in the Monitoring Report.

In terms of progress in particular areas of the Strategy, the following areas of particular concern were identified:

- Representation and complaints procedures for children in care are not in place and no deadline has been given;
- In relation to the Youth Homelessness Strategy, there are difficulties with information and the establishment of multidisciplinary teams. There is also a lack of a coherent aftercare strategy;
- The current level of funding for IAYPIC is not sufficient;
- Family Welfare conferencing is not in place across all of the Health Boards;
- Budgetary support for the commitment to eliminate child poverty has been inadequate;
- Action to progress the commitment that "children will have access to accommodation appropriate to their needs" has been inadequate, particularly in relation to children in B&Bs and Traveller children;
- Action to progress the commitment that "children with a disability will be entitled to the services they need to reach their full potential" has been inadequate;
- No information was provided regarding the treatment of unaccompanied children seeking refugee status.

## **7. Suggestions about how to promote the implementation and improve the monitoring of the strategy and the measures which could be utilised to achieve this**

The 2002 Monitoring Report covered an indeterminate period until the end of 2002. In contrast, in the 2003 Report, progress made on the implementation of the Strategy will be clearly linked to the specific 12 month period under review, i.e. the year 2003. The

following specific suggestions are made to improve the quality of the Monitoring Report:

- The Child Well Being indicators should be integrated into the monitoring process;
- An action plan needs to be developed in relation to each of the 211 commitments in the Strategy; such plans to be timetabled and costed;
- Effectiveness and performance indicators should be developed and utilised to measure progress;
- Criteria used to measure progress should be incorporated into clear and concise memoranda of agreement (MOA) to be agreed by the NCO and the relevant Government (or non-statutory) bodies; and copies should be provided to the Department of Finance;
- The Monitoring Report should identify priorities and set out a timetable for developments;
- The Report should differentiate between planned and existing initiatives;
- The process of compiling the Monitoring Report should be outlined within the Report;
- The National Children's Office should make critical comment on the progress or lack of progress and should hold the Government Departments responsible for implementation;
- Government Departments should be asked to clearly specify progress in terms of outputs and outcomes;
- Detail on the implementation process within the various Departments should be included;
- The statutory body/Department, optimally at the unit or division level, responsible for leading the effort to reach each commitment must be explicitly identified.
- The National Children's Office should require all Government Agencies to demonstrate measures being taken to implement the Strategy and organisations in receipt of public funds should be required to demonstrate commitment to the Strategy: there should be a mechanism for evaluating such evidence and imposing sanctions where appropriate;
- The Report should examine delivery of the Strategy at local level, including CDBs and Health Boards;
- The strategies of the CDBs should be examined by the NCO to further delivery of the Strategy;

- The NCO should commission research focused on the difference the Strategy is making at local level and examine the experience in a number of local areas in detail;
- The Monitoring Report should provide a commentary on progress and identify difficulties and barriers to implementation;
- Summaries of progress under the 3 National Goals and under the three categories of need under Goal 3 should be considered;
- At the three year stage, the National Children's Office should commission an independent evaluation of how the Strategy has been implemented, following the model of the reviews of the National Development Plan;
- Departmental estimates and budget submissions should include requests for funding to support the implementation of the Strategy's action plans as developed by the National Children's Office for which the Department has any responsibility;
- The annual budget should contain a section devoted to implementation of the Strategy that details specific expenditures to be made to advance the Strategy's action plans and that provides year-to-year expenditure comparisons.

### **8. Experienced Disparities between what is stated in the Report and what is happening on the ground**

The Council is of the view that on the basis of a descriptive report, it is difficult to estimate disparities between what is claimed and what is happening on the ground, as there are no measures of how effective initiatives actually are. As stated above in paragraph 7, the National Children's Office should commission research focused on the difference the Strategy is making at local level and examining the experience in a number of local areas in detail. It is the experience of some organisations that their staff at local level find children's services patchy, under-resourced and lacking in integration.

### **9. Gaps or duplications in the services covered by the Report**

As stated above, the Monitoring Report fails to examine delivery of the Strategy at local level. The Report does not refer to the key role of the City And County Development Boards and does not explore the role of the Health Boards in implementing the Strategy.

## **10. Priorities which should now be addressed**

### *(i) General:*

Many of the priorities have been addressed above, and the following is a summary:

- An implementation timetable should be drawn up that includes measurable, costed action plans for each commitment in the Strategy;
- Evaluative components should be built into each initiative;
- Government Departments should be made accountable, retaining overall responsibility for the implementation of the Strategy;
- There is a need for the National Children's Office to develop a watchdog role;
- The Monitoring Report needs to be more detailed, analytical and critical.

### *(ii) Goal 1:*

The following priorities under Goal 1 of the Strategy have been identified:

- The Ombudsman for Children should be appointed and adequately resourced;
- There should be further development of Dáil na nÓg and Comhairle na nÓg;
- All organisations should be required to have a policy for children's participation with annual reporting mechanisms;
- The issue of children's constitutional rights is a priority.

### *(iii) Goal 2*

While noting the particular importance of child well being indicators and child impact statements, the Council considers that progress on all of the actions under Goal 2 is a priority.

### *(iv) Goal 3*

The Council believes that progress must be made in relation to all of the commitments and Objectives under Goal 3 of the Strategy. Specific actions should be prioritised within the implementation timetable for each commitment's action plan and for the Strategy as a whole. Particular attention should be given to advancing those measures that promote the rights and meet the needs of the most vulnerable children, recognising that these are the children most likely to be materially affected by the success or failure of the

Strategy. The Council noted that such measures include the following:

- Safeguarding children from abuse and exploitation through full implementation of Children First Guidelines and Garda vetting;
- Provide support to children with behavioural problems by adequately resourced and trained staff in appropriate and least restrictive settings;
- Providing rights-based services to children with disabilities;
- Implementing the Report of the Task Force on the Travelling Community;
- Providing children with the financial supports necessary to eliminate child poverty in line with the agreed timetable and across the spectrum of health, education, accommodation and income adequacy;
- Treating unaccompanied children seeking refugee status in accordance with best international practice and providing them with a designated social worker and guardian ad-litem;
- Making the necessary statutory changes to ensure adherence to the principles and provisions of the UN Convention on the Rights of the Child.

## **11. Conclusion**

The Council has reviewed the 2002 Monitoring Report, and urges that the recommendations made by the Council will be taken on board to achieve the shared objective of promoting the rights and improving the quality of life of all children in Ireland.

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