

---

# **The Role and Responsibility of Diaconal Service provision in a Changing Social Europe**

**A Study by Eurodiaconia**

---



This publication has received support from the European Community Programme for Employment and Social Solidarity (2007-2013).

This programme was established to financially support the implementation of the objectives of the European Union in the employment and social affairs area, as set out in the Social Agenda, and thereby contribute to the achievement of the Lisbon Strategy goals in these fields.

The seven-year Programme targets all stakeholders who can help shape the development of appropriate and effective employment and social legislation and policies, across the EU-27, EFTA and EU candidate and pre-candidate countries.

To that effect, PROGRESS purports at:

- providing analysis and policy advice on employment, social solidarity and gender equality policy areas;
- monitoring and reporting on the implementation of EU legislation and policies in employment, social solidarity and gender equality policy areas;
- promoting policy transfer, learning and support among Member States on EU objectives and priorities; and
- relaying the views of the stakeholders and society at large.

For more information see:

[http://ec.europa.eu/employment\\_social/progress/index\\_en.html](http://ec.europa.eu/employment_social/progress/index_en.html)

This publication reflects the views only of its authors. The Commission cannot be held responsible for any use which may be made of the information contained therein.

## Contents

Executive Summary .....	4
Introduction.....	5
The Purpose of the study .....	5
The Background.....	5
The European Social Model.....	5
Challenges to the European Social Model.....	6
Demographic Change.....	6
Economic Change.....	7
Conclusion.....	8
Methodology .....	8
Main Findings .....	8
1) Changes in demands and needs.....	8
2) Finances and funding .....	9
3) Regulations and standards .....	10
4) Challenges as faith based organisations .....	11
5) Staffing .....	11
6) Expectations of Eurodiaconia.....	12
Conclusions and recommendations .....	12
ANNEX 1 - Recommended Reading .....	15
ANNEX 2 - The Interview Questions .....	16

## Executive Summary

The European Social Model as we know it is currently under threat as a result of demographic and economic change. Increasing life expectancy, declining birth rates, migration, the shift to a knowledge-based economy are among some of the biggest trends that will inevitably affect social and health provision in Europe. Furthermore, global competition has created fears that Europe will not be able to afford the luxury of its welfare state. Eurodiaconia's members, as providers of social and health services, are already witnessing the effects of such trends and the challenges they bring. Through this study, Eurodiaconia has sought to provide its members with a platform for exchange about these common challenges, and will endeavour to bring them to the attention of the European institutions. From qualitative interviews and questionnaires, members have been able to share their challenges with Eurodiaconia, and some of the ways in which they are already dealing with these challenges.

Several conclusions can be made from the findings. Firstly, it is clear that members are under great pressure to keep up with increasing demand of services, and it is also clear that service providers are having to evolve their services to adapt to the changing needs of users. This requires extensive training and retraining of staff, more individual and specialised care, and in some cases requires new models of care. Costs are rising due to both these rising demands and inflation. However, some members say that diminishing funds from their national governments is having a negative affect on quality of services and is creating difficulties for recruiting and maintaining well qualified staff. Members are beginning to make strategic plans for finding funding elsewhere and speak of taking on a more business-like approach. Members would like to see more grants and funds available for the social sector from the EU, but they need knowledge and information about EU tools, which is an area they wish to be addressed by Eurodiaconia.

Members feel that the quality of their services is generally improving, although maintaining it whilst keeping costs low is a major challenge. External quality standard systems are being used in many cases, and are generally found to be useful, although there is suspicion regarding possible EU quality regulations and standards, as external regulations often stir anxieties over burdening paper work and unreachable standards. There is also concern that reaching such standards and keeping strict regulations can hinder the work of diaconal services, which should be characterised by individual, case by case evaluation, and one to one attention and care. Members also mentioned the challenge of finding staff that are professional and at the same time possess the necessary spiritual values. This topic is also linked to the imminent issue of ant-discrimination laws which are already seen to be a serious challenge to faith based organisations. Difficulty in motivating people to get engaged in volunteering is also a matter of concern.

Finally, members would like to receive more information from Eurodiaconia about possible funding available from the EU, and training on how to apply for it. They would also like Eurodiaconia to facilitate networking with more organisations and social partners in the new Member States and Eastern European countries. Members would like more opportunities to meet and share innovative ideas on fundraising and best practices. They also see Eurodiaconia as having an important role in advocating Christian values and representing the Christian voice in the EU.

## Introduction

Reformed in 2005, with its focus on employment and growth, the Lisbon Treaty has a new strategic goal aimed at making the European Union the most competitive and dynamic knowledge-based economy in the world, with more and better jobs and greater social cohesion. The European Social Model is now intended to be one shaped by the pursuit of social justice, but which also contributes to growth and competitiveness. However, with both opportunities and threats posed by globalisation, demographic change and the transition to a knowledge-economy, the social Europe as we know it is changing and the strategic challenges involved become increasingly evident. As key players in the social and health sector, Eurodiaconia and its members are forced to question the role and responsibility of Diaconia in Europe. What is the current reality of the local or national settings of Diaconia? What are the major challenges we face as faith-based organisations? How can we ensure the sustainability of social and health services in the future? In order to answer some of these questions, Eurodiaconia initiated a short study about the role and responsibility of diaconal service provision.

## The Purpose of the study

The following study provides a platform for sharing common challenges experienced by Eurodiaconia's members and their organisations. In this way, Eurodiaconia is fulfilling its role to facilitate networking and communication between its members, enabling them to focus on and share their collective experiences as diaconal service providers. Through this study, we hope to provide a starting point for discussion on how on a European level, Eurodiaconia can help its members with the challenges they face. By identifying and evaluating its members' needs, Eurodiaconia can also better plan its future agenda, targeting specific common problem areas where its capacity allows. This paper should point to issues to be discussed in various working groups and at the May 2008 Annual General Meeting, and then used to bring common problem areas to the attention of the European Commission and other European institutions.

This report consists of a brief background of the issues related to globalisation and demographic change, a methodology, explaining how the study was carried out, followed by the main findings of the study and finally the conclusions and recommendations.

## The Background

### The European Social Model

Although the institutional systems are evolving and are subject to change, the European Social Model is distinctive from other world models in terms of values, governance, objectives and outcomes. A distinctive feature of the European Social Model is the predominant role that the welfare state plays in ensuring the provision of public goods. Accordingly, the public sector and social public spending are larger than other world regions. This feature of the model reflects the strongly held belief in Europe that high quality public services should be accessible to all for the fulfilment of fundamental rights. Within the European Social Model there are five different institutional models recognized; the Continental, the Anglo-Saxon, the Nordic, the Mediterranean, and the Central and Eastern European model<sup>1</sup>. There are key differences between the countries of each development path, but despite national differences, social

---

<sup>1</sup> For further reading on the European Social Models see recommended reading list in Annex 1

policy remains as a key facet of European identity. According to the definition offered by the Nice European Council,

*“The European Social Model, characterized in particular by systems that offer a high level of social protection, by the importance of social dialogue and by services of general interest covering activities vital for social cohesion, is today based, beyond the diversity of the Member States’ social systems, on a common core of values.”*

So what role does Diaconia, specifically as providers of services (since Diaconia has major facets other than service provision) play in the European Social Model? Its role in the social model varies between countries, whereby in some countries Diaconia acts as a trustee of the state, and in other countries it fills gaps where the state is unable to or is unwilling to provide services. Recognition and support from the state therefore varies throughout Europe, and if state financed, services Diaconia can offer also vary according to the governance of social services, for example whether social services have been decentralized or remain under central government control. These are national/local realities which are liable to change which will have their own effects.

## **Challenges to the European Social Model**

Although it is widely believed that maintaining social policy as an integral part of all policies is essential for achieving sustainable development in Europe, European societies are inevitably going through a transition process in which reform of social systems is often slow. In this next section, we look more closely at some of the major demographic trends that will impact on the social and health services and therefore undoubtedly affect the work of diaconal services.

### **Demographic Change**

#### ***Increasing Life Expectancy***

One major demographic change that will affect European societies is the stretching dependency ratio between the retired and the working population. The baby boom generation is soon reaching retirement, and will bring a major shift in the balance of the active and retired population. Life expectancy has also significantly increased due to improved public health measures, again meaning that today’s baby boom cohorts will make up a large proportion of the older and very old people in the total population. This trend also inevitably puts pressure on extended family as the demand for care grows, and children of the elderly will be expected to stay in work longer to improve pension sustainability. However, with more mobility, children are less likely to be living near elderly parents. Therefore, issues are raised about the sustainability of pensions and the rising cost of health and care of the elderly and the increased pressure for public spending in such areas.

#### ***Declining Birth Rates***

Another factor contributing towards this imbalance in population structure is the fall in the birth rate. It is estimated that the current fertility rate is below the population replacement level. There are a variety of reasons why fertility is so low in Europe, such as difficulties in finding a job, job instability, the cost of housing, lack of incentives, the older age of parents having their first child, changing family life and work life choices. Such life choices are also the result of changing values and the changing role of women. Across the EU, the gender employment gap is narrowing and the dual earner household is now the norm. And although surveys show that women want to have more children, they are not having as many as they

would prefer because of economic pressures. This fall in birth rate again creates an imbalance between the young working population and older retired generations.

### ***Migration***

Migration has also changed the dynamics of many European cities, as societies become ever more diverse, multiethnic and multi-religious. This reality brings with it challenges of social integration and inclusion. And as societies become more diverse, questions arise about the sharing of rights and responsibilities in the pursuit of ideals of social cohesion and strong community. Whose responsibility is it to ensure that migrant communities integrate? Is it the duty of the state or civil society? Who is dealing with this reality?

## **Economic Change**

Demographic change is putting pressure on pension and social protection systems and many European countries face a growing number of excluded people (high rates of unemployment are a major concern in many European countries as well as countries which are failing to protect people who are not in paid employment). These trends are only accentuated by globalisation. Furthermore, the shift to a knowledge-based economy, rising expectations and materialism are other trends which are already creating ripple effects in the social and health sphere. Such changes, if not accommodated for, threaten peace and justice in European societies.

### ***Globalisation***

The European Social Model will inevitably be affected by the phenomenon of globalisation which is intensifying competition for markets around the world. This means that Europeans will be exposed to both threats and opportunities from this change in the global economy, and it will be those countries with the right technology and skills that can benefit from those opportunities. Global changes have also stirred fears that Europe will no longer be able to afford the 'luxury' of strong welfare measures in a more competitive environment. It is argued that in order to compete with developing economies like China and India, the EU will have to cut spending on social protection and ease regulation for business.

Globalisation has also had the effect that capital has become mobile. With global communication and technology transfer, managers now organise supply chains in global terms, which means disaggregating tasks and outsourcing highly skilled ones that can be filled cheaply and efficiently in other parts of the world. However, competitive advantage has become about making a commercial success of innovation at the technical and knowledge frontier, focusing on profit at the expense of job security and long term commitment to its employees. Furthermore, formerly prosperous industrial towns and cities have lost their economic base and struggle to adjust to a changing economy, resulting in increasing regional inequalities. Globalisation is also accentuating some internally driven key trends, for example the transition to post-industrial and knowledge based jobs, new geographic income inequalities, mass migration and the vital need to create a more environmentally sustainable economy.

### ***The shift to a knowledge based economy***

In the last decade, job growth in the 'knowledge based' sector has outperformed the rest of the economy. In 2005, over 40% of the EU 15 workforce was employed in this sector. However such a development in the economic structure will require a significant amount of adaptation. Firstly, adapting to this new economic structure implies high levels of cognitive, personal and IT skills, yet many young people are leaving school without qualifications, and skills learnt at school and in further education are not always in

line with the requirements of the knowledge society. Furthermore, young people are not equipped to adapt to changes in the labour market as the demands of the market change.

### ***Rising expectations and materialism***

Economic pressures on families are linked to an ever growing consumer culture, where the need for two incomes is fuelled by a new set of demands in a post-materialist society, again contributing to the low fertility rates. It is believed that the consumption race in turn fuels psycho-social problems among those who are unable to keep up, explaining the rise in the so-called “diseases of affluence”, for example the rising number of people with mental or emotional health problems. Mass affluence has also meant that as European societies we are becoming more individualistic, with many rejecting the traditional conformities of family, class and religion. This rejection of traditional family structure means that on the whole, the ‘family’ today in Europe is less strong than in the past.

## **Conclusion**

Having an overview of some of the trends we are witnessing in Europe, we can see that the need to modernize the European Social Model is unquestionable. However, such a process will entail slow reforms in many sectors, and as the EU focuses on growth, employment and flexibility, there is a risk that the social Europe as we know it will become unsustainable. Eurodiaconia’s members are already witnessing the effects of these trends. Therefore Diaconia must better position itself to evaluate and overcome the challenges and identify where the European Union and Eurodiaconia can be part of the solution.

## **Methodology**

The research carried out consisted of 6 qualitative interviews and 4 written questionnaires. Participants were personnel of Eurodiaconia’s member organisations who had firsthand knowledge of some of the challenges in their provision of social and/or health care. The interview questions (included in annex 2) sought to find out about the current reality of the local and national setting of Diaconia, the major challenges Diaconia is facing as faith based organisations and the ways in which, on a European level, Eurodiaconia can be of service to its members in order to overcome some of these challenges. The interviews lasted about 30 minutes and contained structured questions, but participants were able to answer freely and were asked if they had any additional comments to make. The interview questions are the same as the questionnaires but interviews allowed for more detailed answers and follow up questions. Questionnaires however were used for participants who felt more comfortable with written English. It is to be noted that this small study cannot provide quantitative data; rather it is intended to be a directional piece of research that could provide a basis for further extensive research. Despite the small number of participants involved in the study, answers were consistent enough to produce interesting and useful results.

## **Main Findings**

In the following section, we discuss the findings grouped by the following themes: changes in demands and needs, finances and funding, regulations and standards, challenges as faith based organisations, staffing, and finally expectations of Eurodiaconia.

### **1) Changes in demands and needs**

Demand for social services is undoubtedly growing, in many cases however, without an associated increase in government funding to pay for it. The change in types and the degree of services required is being witnessed by several members. For example the **ageing population** was named as one trend that was putting great pressure on the capacity of elderly homes. Whilst some organisations said they were able to expand their services, others were not, and were having to refuse users. Not only are elderly services in demand, the elderly are increasingly old and frail as life expectancy increases. Members say that this requires adaption of the types of services and activities the homes and institutes can provide. The elderly of today also prefer to stay in their own homes and communities, meaning in some cases that home care and support is increasingly in demand, and in turn, less money is being invested in residential care homes.

Members have also observed more elderly people with **mental health** needs, for example an increase in people with dementia. They are also seeing more adults and children with mental health problems and in some countries, more abused women and children who require care and homes.

Members have also noticed the growing numbers of **unemployed people**, but point out that there are now more people who have no work experience at all. They have also observed that the number of *long-term* unemployed is increasing. This means that members of staff have to become better acquainted with and knowledgeable about the situation of the labour market and the barriers that exist which prevent citizens from entering the labour market.

According to members, these trends and changes mean that the services must continually adapt and evolve to meet the needs of users and in some cases they are looking to provide new services or different models of care. Members said that these changing needs require expensive, labour-intensive services, new kinds of specialists, staff trained in gerontology and more individual, one to one care.

## 2) Finances and funding

Although financial sources vary nationally, most diaconal organizations are part funded by government, and often have services entrusted to them by the local authorities. However, according to members, national or local government funding hardly ever reaches 100% cost recovery and is seldom sufficient. They are therefore dependent on donations and fundraising to cover other expenditures. However, we also spoke to organizations with services completely financed by the users themselves, in which case, concerns were less strong regarding public spending. Some members were from organizations that receive money from tax contributions made by citizens who chose to give to specific social or health institutes (e.g. Italy). Such a system was said to ensure transparency of the institute and good communication and public relations.

As expected, costs are rising for providers, driven by both inflation and increased demands. However, whilst government funding is often stagnant or diminishing in some old member states, government spending has increased in some of the new Member States benefitting from EU funds for the first time. Other Member States felt that inflation had caused the quality of services to decrease and that financial help was being continuously cut resulting in the availability of services becoming more difficult. The challenge for all is to keep the costs low but to maintain the quality. When asked about diminishing public funds, all members said that they need to find new sources of funding. In particular, they would like Eurodiaconia to provide networking and training opportunities in EU funding, new fundraising methods, and new business models. Members would like to access EU funds, but feel that EU grants come with too

many restrictions or require mastery of complex rules and mechanisms. They would like to learn what grants are available and how to apply for them. There is also the general impression that EU funds are 'unreachable'. In addition, becoming part of the EU has meant that in some Member States, donors have stopped their funding activity.

Another challenge mentioned was that although short-term government funded projects were in themselves good, members stressed the need for stable core activities that need constant and steady funding. Short term projects often result in the continuity of a service being disrupted, meaning that the quality inevitably suffers. On the whole, members would like to see more grants and funding available from the EU for social services.

Members also felt the need to look elsewhere than government/EU funding, by turning to a business-like outlook and mentality as a solution to sustaining the future of their services. They emphasized the need to find more privately financed initiatives or money from donors in order to maintain the quality. Several members mentioned ideas and plans to start non-profit companies, to sell more products and to provide more commercial services. On the whole, it was acknowledged that there is a need for social and health care providers to restructure their financial systems. Members said they would like to receive training in the more financial aspects of their work. In this way, Eurodiaconia could be a platform for the exchange of such initiatives and innovative ideas for commercial activities. Some also pointed out their ideas and strategies to develop partnership working with local authorities and other agencies, joining forces for finances and funding.

### 3) Regulations and standards

On the whole, members felt that the standard of care quality in their organisations had improved in recent years. However, most members spoke of regional disparities in quality and access to services. One member pointed out that in the context of migration, many people expect to find the same standards cross border in Europe, which isn't the case, and suggested some kind of concordat on national standards that would be acceptable for all of Europe, which would help to reduce inequality of standards in the EU and regionally. Improved quality was also seen as a benefit of market competition, which is on the whole seen as a positive thing if channelled correctly.

*We are under market pressures, we are supposed to offer services in competitive markets and that is going to change our attitude and will affect the delivery of our services – some will be negative, but competition can also bring quality if channelled properly. (Interview)*

When asked about a possible European framework for principles of quality standards, most members said that they would be interested to read such principles and that they might be useful if they contained principles which were supplementary to the framework they were already using, but they also expressed some hesitation, fearing more bureaucracy and complicated procedures. Some members felt that some strict regulations and standards tied to funding actually do more harm than good. It is a real challenge, they stressed, to maintain the human factor and the family feel of homes for example, (characteristics that make diaconal services unique and special in society) whilst abiding by all regulations and standards. Many participants of the study stressed that their unique and highly individualized approach to social services was hindered and threatened by the rigid application of some external regulations. Some mentioned the possible worries and anxieties generated by external regulations, such as the feeling of loss

of control and more unwelcome bureaucracy. Others felt that EU standards were out of reach. Some also stressed that quality criteria should not be a legal Directive lest it become an exclusion mechanism.

Although some EU quality standards were found difficult to apply to individual cases, and the bureaucracy that comes with general laws, privacy codes, food, health and safety regulations were often burdensome, some external quality systems were found to be helpful in clarifying what has to be done and were thought to provide a means of ironing out regional disparities in quality and access to services. Such external quality systems were also found to be useful for increasing transparency and initiating dialogue about the structure of work and the quality of service delivery. In sum, most felt that the EU was useful in introducing standards and securing user's rights.

#### **4) Challenges as faith based organisations**

One major challenge members had observed was knowing how to present Christian values as an integrated part of their services. Several members also mentioned the challenge to integrate professionalism and spirituality regarding recruitment of staff; finding employees equipped with both the necessary professional skills and a commitment to user's spiritual needs. Some members have already experienced that other secular organizations have challenged them for being faith-based and have been accused of discrimination regarding employment policy and new laws on genuine occupational requirements (GOR for example in the UK). Some organisations felt that they needed to raise their political and professional profile to better communicate to the public who they are and what they do. For those organizations receiving public tax contributions, communication and transparency has become a requirement. Members also talked of the need for better cooperation with other actors in society and the local authorities.

#### **5) Staffing**

It was noted that the increasing creation of specialists and the centralization of certain roles, for example training experts in quality, was also an effective means of lightening the burden on employees in the sector, but at the same time, it creates a need for investment in time and training, which it was pointed out, is costly. One major concern regarding employment was that members could not offer competitive salaries, resulting in a growing number of well qualified, experienced staff members leaving for higher-paid jobs elsewhere. Such high fluctuation of staff was found to negatively affect the quality of services. (On the other hand this was seen by some as a positive thing if skills were transferred to state run services). Members fear that motivating and keeping people employed in the social and health sector will be very difficult when the salaries are so low.

They also pointed to the need for constant training and retraining of staff as the models of care change. As pointed out earlier, there is greater need for specialists in mental health and gerontology. Also as mentioned earlier, the diaconal services are challenged to find staff members who are spiritually motivated and at the same time well qualified professionally. Language barriers were also mentioned as a difficulty when staff members are not native to the country they are working in, (which will be increasingly the case as migration increases), therefore language training is very important, but implies extra costs. Members also cited the challenge to motivate people to be involved and engaged in voluntary work, which if used to its potential, should provide great support to social and health services.

## 6) Expectations of Eurodiaconia

Members see Eurodiaconia as primarily a source for networking, information and training. They also look to Eurodiaconia to represent and advocate the Christian values perspective in their approach to social services and to be a strong voice for Christian values in the EU. They want Eurodiaconia to fight for common interests in the EU and represent the Christian faith and principles. The opportunities to meet, learn from, and share knowledge with other social service organizations in Europe are clearly a key membership benefit. As indicated before, members want to learn from others about innovative approaches to funding, service provision and best practices for example. They would also like Eurodiaconia to collect and publish good methodologies and materials (it is not certain how technical these materials and methodologies are desired to be). Given the increasingly limited funding for social services from traditional government sources, members are particularly keen for Eurodiaconia to help them learn about EU funding opportunities, other fundraising practices, and new business models for social service organizations. In terms of EU funding, they'd like to learn what is available and how to apply for it.

Members also look to Eurodiaconia to inform them of and interpret EU policies that impact their work. They would like concise, easily understandable explanations of policy proposals and an explanation of what this would mean for them at national level. Currently, there is limited understanding of how EU instruments work, and particularly how regulations filter down to national level. They also want Eurodiaconia to be a resonating body for positions and political lobbying, feeding back to the European Commission what it has learnt from its members.

Members felt that it would be useful to facilitate dialogue not only between *members*, but also between other actors in civil society to help exchange views and best practice models “to feel part of the EU as European citizens”. They want to network more strongly on the EU level with actors and identify other European players in order to get an overview of those networks “to see who our allies are for the positions we need to bring to the forefront”. Some mentioned the desire to make more contact with social partners in the new Member States, where there seems to be information lacking about the social services in these countries.

Some members said that working across national borders is a good way to understand demographic needs of other countries and as a means of benchmarking in terms of quality of care provision, standardization, communication, social enterprise, and social inclusion. Discussions on topics such as social inclusion were also cited as helpful, as they encourage members to reflect upon their own understanding and allow members to evaluate and analyze what is happening around Europe.

Other smaller member organizations would like to receive more help from Eurodiaconia, having the impression that Eurodiaconia's bigger organizations seem to benefit more from its work because of their larger number of staff and because they have more time available.

## Conclusions and recommendations

### *Finances*

The greatest challenge for our members is clearly financial. They are concerned that if government funding is continually cut, salaries will have to be reduced, certain services will have to be closed and the quality of service provision will be adversely affected. The likelihood of public spending cuts and inflation mean that members are starting to look for new sources of funding and looking to take a more business-like approach. Most saw the EU as beneficial for funding opportunities, which Eurodiaconia

must identify and better communicate with its members. In this way, Eurodiaconia can be of service by providing information about European funding programmes and grants, and connecting them with other social partners around Europe. It is recommended that Eurodiaconia arranges a practical training session specifically on the topic of EU funding. They should also organize specific training sessions and workshops where members can share fundraising ideas and experiences. It is also important to lobby to the European institutions however, for core stable funding, and to insist that short term projects alone are not sufficient.

### ***Staffing and volunteering***

Funding is also essential regarding salaries. The social services must be able to offer competitive salaries if they want to motivate well qualified staff to work in the sector. In this way Eurodiaconia must lobby on behalf of the service providers to the European Institutions to bring to their attention the increasing demands for workers in this sector, and to bring to their attention the difficulty of competing with the rest of the labour market, which offers better salaries. Eurodiaconia should organise a seminar for its members about the promotion of education, training and career development in Diaconia. Increasing the number of people engaged in voluntary work is also one way the work load for the services can be made lighter. Therefore, Eurodiaconia should work more closely with European volunteer services to promote and support the voluntary work in social and health services of all citizens. This is a subject which could be addressed by the Volunteering Working Group, who should make strategic plans to promote volunteering in the social and health sector, and more specifically, in Diaconia.

### ***EU developments: Regulations and the changing European Social Model***

A European quality framework was on the whole thought to be useful for benchmarking and evening out regional, national and European standard inequalities. However, fears of bureaucracy and strict regulations made some cautious about more standards, especially if they have successful quality standards systems already in place. Standards should not become so strict that they prevent service providers from achieving their original goals and fulfilling their unique purpose in society that distinguishes them from state run services. Therefore Eurodiaconia should encourage the European Institutions to respect and recognize the risk they run with the creation of such strict regulations. In addition, Eurodiaconia must better communicate European policy developments to its members and if possible, interpret how changes will affect and filter through to the services implied. Eurodiaconia must also facilitate networking between its members and other key players in the European social field, particularly with social partners in the new Member States and in Eastern Europe.

In terms of anti-discrimination policy, it is the responsibility of members to be informed about related policy in their own country, however, Eurodiaconia must keep updated on all European policy and news regarding developments in anti-discrimination laws and regulations and must communicate this to its members. It is recommended that Eurodiaconia organize working group meetings (e.g. Theological) and conferences where the subject of values and spiritual issues can be discussed in the light of European law and Lisbon Treaty objectives for full employment. Eurodiaconia must continue to represent and advocate the Christian voice, and must continue to build alliances on a European level with partners who share positions with Eurodiaconia.

On the whole, members would like Eurodiaconia to provide more training, seminars and methods of collecting and sharing best practices. It is therefore recommended that Eurodiaconia ask its members to specify on which subjects and topic areas they would like to receive/give training, and to specify where

they lack knowledge of the EU so that they can become more knowledgeable about the instruments and the workings of the EU. One educational topic for example could focus on the barriers that prevent people from entering the labour market. Seminars should be supplemented with materials that representatives can take back to their organisations and use in their own staff training. It is hoped that as a result, members can feel more confident to use the tools of the EU to their advantage and that they will have a better grasp of current discussions happening in the EU. This will also help members to have better informed opinions when Eurodiaconia asks for their responses on specific policy positions.

# ANNEX 1

## Recommended Reading

### **The European Social Model**

Esping-Anderson, G. *The Three Worlds of Welfare Capitalism*, Polity Press, 1990

Nyrup Rasmussen, P. & Delors, J. *The New Social Europe*, Party of European Socialists, 2007

Kvist, J. and Saari, J. *The Europeanization of Social Protection*, The Policy Press, 2007

Giddens, A., Diamond P. & Liddle, R. *Global Europe, Social Europe*, Policy Network, 2006

Diamond, P. et al., *The Hampton Court Agenda: a Social Model for Europe*, Policy Network, 2006

# ANNEX 2

## The Interview Questions

### **1) What is the reality of the local/national setting of Diaconia?**

*Interview questions (some info can be sent afterwards if not known)*

- a) What is the legal status of your organisation (NGO/private institution)?
- b) What services do you provide?
- c) What role does your organisation play in the welfare system? Has the role changed in recent years?
- d) How is your organisation financed (% donors, government funds etc)?
- e) How are diaconal services in your country/region/organisation financially reliant upon support from the local or national authorities?
- f) Do the local/national authorities recognise and accept the work of Diaconia?
- g) Does public spending vary regionally?
- h) Are you aware of regional inequalities in social and health care standards?
- i) Has public spending changed in recent years? Has this affected your spending or the services you provide? Or what effect has this had on your services?
- j) Have your client groups changed in recent years?
- k) What other significant changes or trends has your organisation experienced in recent years?

### **2) What are the major current challenges that the members face?**

*Interview questions*

- a) What are the major challenges you face as a faith-based organisation?
- b) Are you observing the effects of the demographic changes?
- c) In what ways is your organisation responding to these major trends?

- d) In what ways are you aware of the government responding to issues of demographic changes in the social and health sector?
- e) In which areas of your work are you feeling most pressure to sustain or develop and why?
- f) How do you think the major difficulties and challenges that you have mentioned could be overcome?
- g) If national/local public spending on social and health care is cut in the future, in what ways will your work be challenged?
- h) Do you have a plan to deal with this possibility of cutting back on public spending?
- i) Has your organisation made contingency plans?
- j) In what ways are you asking local/national government to help deal with the effects of a changing society? Are you cooperating with other actors in society?
- k) In what ways do you feel your services are meeting needs in society that the state is not meeting?
- l) Do you feel that there is a change taking place in the role and responsibility of charitable organisations and the state? If so, what do you think the consequences will be for the diaconal service providers in your country?
- m) What are your current greatest needs? Are they changing in nature or growing?
- n) Are you carrying out market/user surveys?
- o) What are the future challenges that you foresee for your organisation and other (charitable?) social and health services?

### **3) Quality**

- a) Are you currently working with a quality standards system? If so, what kind of system is it? (Internal/external?)
- b) How do you find working with this system?
- c) The EU is proposing to draw up a voluntary quality framework which will provide guidelines on the methodology to set, monitor and evaluate quality standards. Do you think this will be useful to your organisation's work or to the quality of services in your country in general?

### **4) What are the future implications for Eurodiaconia and its members?**

*Interview questions*

- a) What role do you see the European Union playing in overcoming the challenges you mentioned?
- b) How do you think Eurodiaconia can help the service provision of your organisation specifically when it comes to overcoming challenges posed by demographic changes and globalisation?

**5) Do you have any other comments to make regarding this subject?**

About Eurodiaconia...

- a) As you know, Eurodiaconia is a European network and lobby organization based in a small secretariat in Brussels, linking 19 countries and 34 members... What are your expectations from a European network like Eurodiaconia?
- b) How can a network like Eurodiaconia be of service to your organization?
- c) What are your recent experiences with Eurodiaconia if any?

**A study written by Catherine Storry**

**[catherine@eurodiaconia.org](mailto:catherine@eurodiaconia.org)**

Eurodiaconia – European Federation for Diaconia

Rue Joseph II, 166

1000 Brussels, Belgium

Phone: +32 (0)2.234.38.60 (direct)

Fax: +32 (0)2.234.38.65

E-mail: [office@eurodiaconia.org](mailto:office@eurodiaconia.org)