

## 6.0 Monitoring Progress against Targets

Many high level government targets and policies aim to improve the most deprived areas and/or decrease the inequality gap between the most and least deprived areas in NI.

For example the Northern Ireland Executive set out 23 Public Service Agreements (PSA) in its Programme for Government 2008-11<sup>1</sup>. Included are targets to address the barriers to employment and provide effective career advice at all levels, and to achieve measurable reductions in health inequalities.

**The NIMDM results can be used to identify the most deprived areas in NI, while a relevant indicator is chosen to monitor the progress in the most deprived areas.**

### Case Study 1 – Improving the Most Deprived Areas

*Target: PSA 3 INCREASING EMPLOYMENT* aims to increase employment levels and reduce economic inactivity by addressing the barriers to employment and providing effective careers advice at all levels. The associated targets include:

*'Increase the proportion of FE enrolments from the more deprived Northern Ireland regions, as defined by the Northern Ireland multiple deprivation measures, from 22% in 2005/06 to 24% in 2010/11'*

DEL define the 'more deprived regions' as the 20% most deprived areas as per the Multiple Deprivation Measure 2005. The results show that the proportion of FE enrolments from the more deprived Northern Ireland regions has remained fairly constant over recent years, illustrated by the table below.

Table 1: Percentage of FE Enrolments from the 20% most deprived areas in NI, 2005/06 to 2009/10.

Year	Percentage of FE Enrolments from 20% most deprived areas
2005/06	22
2006/07	22
2007/08	23
2008/09	23
2009/10 (snapshot)	23

1 (<http://www.pfgbudgetni.gov.uk/psaframework241007.pdf>).

**Inequality gaps can be monitored by identifying the most deprived areas in NI and measuring the difference in a given indicator between the most deprived areas as a group and the NI average.** Alternatively the difference in a given indicator between the most and the least deprived areas in NI can be assessed if a clear gradient exists with the indicator decreasing or increasing as deprivation levels increase.

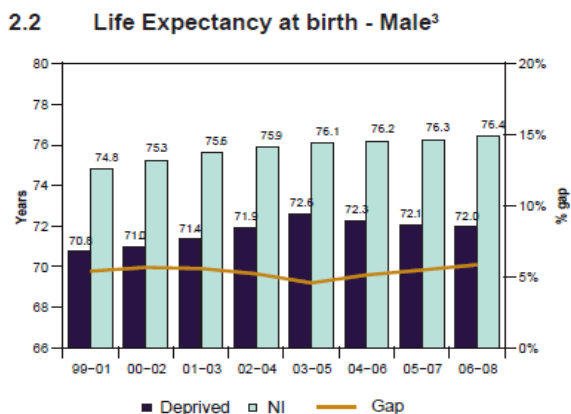
The number of areas included in the analysis as the ‘most’ deprived areas will depend on the specific policy interest. In addition the robustness of indicator data when grouped for sections of the NI population should be considered i.e. the size of the deprived population base should be large enough to ensure the estimates have a level of precision that would allow meaningful comparison between the deprived group and the NI average.

### Case Study 2 – Monitoring Inequality Gaps

The Department of Health, Social Services and Public Safety monitor the gap in health outcomes between the most deprived areas in NI and the NI average, for a set of indicators measuring mortality, morbidity, utilisation of and access to health and social care services in Northern Ireland. The Northern Ireland Health and Social Care Inequalities Monitoring System Third Update Bulletin 2009,<sup>2</sup> reported on 24 separate indicators.

To monitor the life expectancy gap, the 20% most deprived Super Output Areas were identified according to the NIMDM 2005 multiple deprivation measure. Life expectancy for males (and females) was calculated for these areas between 1999-2001 and 2006-2008 and compared to the NI average for male life expectancy in the same period. The difference in years between the life expectancy in the most deprived areas and NI as a whole (the inequality gap) was then assessed.

Figure 1: Male Life Expectancy at Birth 1999-01 to 2006-08



Source: General Register Office / Project Support Analysis Branch

<sup>2</sup> [http://www.dhsspsni.gov.uk/inequalities\\_monitoring\\_update3.pdf](http://www.dhsspsni.gov.uk/inequalities_monitoring_update3.pdf)

Analysis from the third update bulletin showed that male life expectancy increased between 1999-01 and 2006-08 in both the most deprived areas (from 70.8 to 72.0 years) and NI overall (74.8 to 76.4 years). There was little change in the male life expectancy gap remaining around 4 years (and between 5% and 6%) across the whole period.<sup>3</sup>

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<sup>3</sup> [http://www.dhsspsni.gov.uk/inequalities\\_monitoring\\_update3.pdf](http://www.dhsspsni.gov.uk/inequalities_monitoring_update3.pdf), Pg 4.