



COUNTRY FRAMING REPORT
Ireland

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Summary

A search for literature or research on the gender and health implications of extending working life in Ireland revealed little or no research on that topic. In an effort to understand why this was the case, I mapped out the approach to policy on ageing and employment taken in Ireland in an effort to explain its absence and neglect. Overall my review findings indicate that agenda setting on ageing and employment strategies have been initiated in responses to International organisations including the EU, OECD and WHO. Ireland as a member of the EU was expected to respond to an agenda set by the EU. My review showed that it did so in a quite ritualistic manner. Despite continued findings on the low participation rate of women of all ages from the labour force and its direct impact lower employment level among the elderly this matter was never addressed in socio-economic contexts. Active employment policy in regard to women was left in abeyance while a *productivist* EU approach dominated Irish reports by employer and government organisations, a *preference orientation* including individual *choice* was presented by others. A focus on healthy ageing now dominates the Irish research scene which has also revealed the occupational health risks attached to some form of employment.

Agenda setting by intergovernmental organisations and their impact on Ireland

Both the OECD and the EU stimulated a policy focus on older workers among its member states. The French Presidency of the European Council saw the first political declaration at EU level on the need for special actions for older workers and the Resolution on the Employment of Older Workers (European Council, 1995). This proposed that national governments and social partners should take actions to raise awareness about the consequences of making older workers redundant, promote the reintegration of older workers and eliminate legislative barriers to the employment of older people.

The issue came on the Irish agenda in the late 1990s when labour market supply became an issue in economic circles. Different social partners responded to this challenge and a number of reports were commissioned and published over the next few years and these key reports will be examined here to uncover their framings and discourses.

A *productivist approach*: comparing Irish labour force rates to EU norms-The PACEC study

The European Employment Strategy (EES) gave priority to three objectives: raising overall employment rates; extending lifelong learning and strengthening social partnership. The achievement of this was based on commonly agreed targets in the form of European Employment Guidelines targets and benchmarks. The Lisbon strategy launched in 2000 wanted to make the EU “the most competitive and dynamic knowledge-based economy in the world” (Council of Europe, 2000). In response the PACEC (2001) study was commissioned by the Irish National Competitiveness Council and the Expert group on Future Skills Needs. They found that the male activity rate for men aged 55-59 was 72% higher than the EU rate of 69%, and the rate for men aged 60-69 was 55% as contrasted with 33% in EU, and men aged 65-69 had an activity rate of 24% as compared with 9.4% EU. However the comparable rates for women were much lower: aged 55-59 were 34% (EU 44%); aged 60-69 were 19% (lower 15% EU). The overall lower participation rate of women was explained by the lower participation of married women. Not too surprisingly in the Irish context they found that there was much more scope for increased participation by women than by men. They also found that there was a Dublin-rural divide in participation rates.

They explored this issue further using qualitative interviews with 250 people aged between 55 and 69 who were not in full time employment ie retired, unemployed and on home duties to ascertain their interest and preferences with respect to taking up paid employment. A quarter of those over 55 (some retired and some on home duties) were interested in participating in the labour force. The unemployed men were actively seeking work but claimed to be unlikely to find it, while 'early retired' women and women in home duties – who accounted for 70% of the economically inactive over 55, offered the greatest potential to increase labour supply. The respondents identified a number of barriers to their participation in the labour force: lack of flexible or part time hours of work; low take-home pay, concerns about reduction in pensions income and benefits as a result of taking up paid employment; age discrimination ; lack of appropriate skills and education. This data presented in the report clearly identified the gendered exclusion of women from the labour force but their recommendations did not specifically address 'the gender issue'.

The report recommended preventative action on a number of fronts. The first one was to prevent drift to long term unemployment and discouragement by offering tailored assistance to people employed in vulnerable jobs or sectors. The second recommendation to employers was to facilitate downshifting. They found that employers had negative attitudes to recruiting older workers and had not responded to their needs for shorter working hours or reduced responsibilities. Its recommendations included the enforcement of minimum pay and the promotion of *Back to Work Scheme* for returners. It also recommended support for adult education and adult literacy as key elements to help the over 55s in the workplace.

They recommend a review of employment and pension arrangements to ascertain whether they discriminated against women and whether or not returners might be permitted to work longer and add to pensions. They recommended that workers should be informed about the advantages of working for a future pension income. Overall the report took an *economic productive* approach to the employment of men and women.

An individual preferences approach: Study by NCAOP National Council on Age and Opportunity (2001)

Not too surprisingly, a study by the NCAOP National Council on Age and Opportunity (2001) took a less productivist approach. They investigated people's *preferences* for employment and retirement and emphasised the need for *choice* on the part of the 55-69 age group.

They commissioned a survey of 55-69 year olds in 2001. They wanted to find the attitudes towards retirement age among those currently retired and planned retirement of those at work. (Those aged 65-69 who had not yet retired were excluded). While the average age of retirement was 59, people had retired at different ages, 26% retired between the ages of 55-59, 48% had retired between the ages of 60 and 65; with only 6.4 % retiring at over 65 with an average retirement age of 59.

Among those still at work a third said they did not know when they would retire, 37% said they would retire at 65 and 29% planned to retire after 65.

The reasons for retirement among the retirees were diverse, 29% retired due to illness or disability, 13% found work too demanding or stressful ; 27% could afford to retire or were offered a 'good package', 1.7% described their retirement as compulsory while 8% retired because of involuntary redundancy or closure , and 7.5% retired to care for a family member. The

remainder wanted to pursue other interests (9%), spend time with family

/partner 7.5%) or 'other reasons' not specified. However those who had retired noted a lack of part time jobs; a skills mis-match ; they had encountered age discrimination, some older people lacked confidence and had low levels of participation in training.

Over a third of those at work wanted to retire while 29% of the retired would like to take up some kind of work. Retirees who did work did so for an average of 16 hours a week with 10% working more than 35 hours.

Over 70% said they enjoyed life more since they retired , while 77% said it gave them time to do things they really wanted to do. 55% missed the social contact of work. Those in employment anticipated both positive and negative aspects of retirement, with 68% saying that it would give them an opportunity to do things they want to do, while 57% said they would miss contact with co-workers. Those at work were somewhat more pessimistic in outlook. 70% of the older workers who were interviewed said they would prefer to have a more gradual retirement , reducing the number of hours or days worked per week before completely stopping. Those already retired agreed that in retrospect they would have preferred a more gradual retirement. A quarter of retirees would have continued to work if their employers were more accommodating.

So overall a gradual reduction of work over time was the preferred option. The study which implicitly *takes a preference approach* reveals that taking a *productive framing* of ageing which assumes continued employment neglects other individual and structural aspects of decision making, such as being unable to work on health grounds and neglecting the negative stresses and strains of a working life. By focusing on older workers themselves it revealed their preferences on the management of ageing in the workplace. Many older workers suggested a more *gradual reduction* in their working hours, such as part time work which revealed the value of work as a source of identity and company with a realisation that full time work could become more challenging. The framing in terms of choice was effective in revealing the heterogeneity of the experiences of both who had retired and among those in the workplace.

An prospective active ageing approach: National Economic and Social Forum (NESC)

The National Economic and Social Forum (NESC) had to consider the issue of older workers , as a follow-up to the productivist issues raised in their 2000 report *Alleviating Labour Shortages*. Its terms of reference for the study were equally productivist i.e. *“to focus on mobilising the participation /continued participation of older workers in the labour market”*(Forum Report no 26; 110) in their deliberations on *Labour Market Issues for Older Workers* whose findings were reported in 2003. The Forum included a broad range of *‘social partners’* who took a broader more active ageing approach to framing the issue.

The Forum identified four main policy issues. The first issue was the future *“demographic crisis”*. This emanated from an predicted “ageing” of the European population which would led to an unfavourable ratio between the number of workers and the number of pensioners. This was a European issue not an Irish one as at that time the ratio was favourable with 5 people of working age to every pensioner. This however was expected to fall to 3:1 by 2025 so it was seen as a future threat in Ireland. The ageing of a society raised questions about the sustainability and future costs of pensions and other health and social service provision for future retirees. However they too adopted a preferences/choice framing of the issue of extended working life.

“We will review ways in which older people can be encouraged, where they so wish, to extend

their working lives without financial penalty and in conditions which suit their personal lifestyle wishes”.

The second issue was a decline in the number of younger people entering the labour force and the emergence of a shortage of labour so older people were seen as a reserve army of labour. In Ireland this was exacerbated by the high level of “inactive women” who had left the labour force when they had children, as already identified in the Expert Skills Report.

The third issue related to the promotion of human capital potential of workers in their mid- life and to the promotion of life long learning to increase the quality of labour.

The fourth element noted was the European Commission’s new emphasis on *Active Ageing* which raised the quality of individual lives and at the same time at a societal level contributed to higher growth, lower dependency and cost saving in pensions and health.

They also noted the UN World assembly on Ageing (April 2002) which adopted a plan of action on ageing built on three policy directions; the need for societies to adjust their policies and institutions to promote the growing older population ; advancing health and well-being into old age and promoting policies oriented towards family and community to provide the basis in caring for the ageing population. (Nesc 2003:6).

However the NESC report – decided to focus on those aged 45 years and older –hoping to identify early life phases for later employment opportunities. It was a *prospective study* set within a *life course model* where they wanted to identify factors which played a part in later life decision making on retirement. The four key issues for the study were:in –work training and skills development; work life balance (flexible hours, downsizing), attitudes to older workers and financial incentives and disincentives to work. By focusing on on those in work they hoped to raise possibilities for early interventions aimed at *improving retention and employability*. The report recognised the heterogeneity of older workers in terms of education, skill development and discouraged workers who might with the right supports be encouraged to return to the labour force. They also recognised that from age 55 factors related to pension provision, gradual retirement and flexibility in the workplace might become more relevant. The key emphasis was that workers should have a *Choice* about when to retire, about flexible working arrangements the development of a more supportive environment and employment practices and increasing opportunities more training and progression at work.

The broad recommendations of the report and the discourse in which they were framed were very much *in aspirational terms*. The broad composition of the Forum meant that each of the social partners made their contributions. They were subsumed under four headings .

(1) *Employer Attitudes to Older Workers*

The report recommended that the Department of Enterprise, Trade and Employment should be charged, with the employer organisation (IBEC) and trade unions (ICTU), to “*more actively explore avenues to promote the benefits of in-work training and retraining , particularly for older workers*”. IBEC and ICTU ‘*should disseminate good practice in the provision of support for older workers in relation to flexible working, reduced working hours and retraining*.

(2) *Life long Learning*

The Department of Enterprise, Trade and Employment should implement the recommendations

of the Task Force on Lifelong Learning and draw up a framework for delivery of in work training , carry out surveys on in-company training on a regular basis and the Department of Education and Science should give greater consideration to the specific needs of older workers , extending Vocational Training Opportunities to the unemployed.

Return to Learning should be promoted, *Fast Track to IT* should be geared to needs of older workers and Employment Action Plans extended to women over age of 55. All of these were broadly directed towards a greater skilling of those over 55.

(3) Work Life Balance

Under the heading Work Life balance , it was recommended that a dissemination strategy on the guidelines for worklife balance be put in place and that opportunities for downshifting should “be considered for older workers”. The National Framework Committee on Family Friendly Policies should broaden its remit to include older workers , and the department of employment, health and social affairs should collaborate more to streamline and integrate their work on older workers.

(4) Incomes and pensions

As a large number of women and some men are in receipt of a means tested carers allowance, they recommended that its earning disregards should be calculated using net (after tax) rather than gross weekly income. This would provide an incentive for more carers to take up part time work.

Their recommendation on pensions were especially poor: “*Given the limitations that apply to pension benefits in Ireland , there are few options to encourage people back to work or to remain in work longer, using pensions as a policy option, apart from raising the low maximum age limits for retirement that apply to certain groups of workers in the public sector, e.g the Gardai.*”

Overall despite the broader agenda their recommendations were related to economic productivity and supporting older workers by training and retraining, and flexible working hours in keeping with EU agenda expectations.

The Equality Office Labour Market Inequalities for Older People in Ireland (2002)

The imperatives of the EU also set the agenda for the Equality Office .The Equality Office is funded by the Irish government and part-financed by the European Union under Employment and Human Rights Development Operational Programme of the National Development Plan to examine labour market inequalities for older people. As such it investigated the *labour market aspirations of older people*, wanted to identify the barriers to their accessing the labour market and to outline the solutions to address these barriers. It used a qualitative research design based on ten focus groups. In addition it conducted interviews with selected programme providers who were involved with the delivery of EHRDOP measures. The study found seven key barriers to the labour market: the emphasis on qualifications and the lack of any value attached to the experience of older people, a mismatch between their skills and those required in the modern workplace. Thirdly their opportunities for access to training were limited , the type of training offered was not attractive and there were cost implications. Fourthly the quality of jobs on offer were not attractive . Fifthly the compulsory retirement age was a structural barrier and sixthly there were financial barriers associated with pensions which penalised their return to work . The seventh one was a feeling that there were cultural barriers arising associated with the attitudes of younger people towards older people.

The report recommended a series of actions on all the key issues identified as follows: (1) the

experience of their experiences should be valued using the Accredited Prior Learning programme and the promotion of more encouragement by employers to welcome job applications etc. from older people. They recommended strategic initiatives on enhancing training opportunities for older people. In terms of fiscal policy they recommended a review of taxation and benefits to promote work. On a more innovative level they suggested that work practices should be challenged and unsuitable manual work and inflexible working hours were an issue that could be addressed. Flexible employment was not seen as a universal feature of the Irish labour force. They also advised the promotion of *age awareness*.

The latter was one of the few new recommendations coming from the report. The discourse in general was a *descriptive account* of the real challenges experienced by older people who wanted to return to or enter the labour market. The report did not identify any of these barriers as forms of indirect discrimination and it is not surprising that despite their descriptions of such, the focus groups themselves did not describe their experiences in terms of age discrimination. Their problems could be solved by a number of adjustments made to training and work opportunities.

Interim conclusion: descriptive realism and policy abeyance

This discourse analysis reveals that each organisation identified the same issues, made gentle recommendations on future policies without any setting of clear targets. By doing so they all made claims to an identification of a problem. At an opportune moment they could return to it and seek funds to rectify some identified element. The discourse is based on descriptive realism and allowing the facts to 'speak for themselves'. There is a sense that as Ireland was not in a crisis the reports were somewhat ritualistic and had to be done but with no energetic sense of a need to advance the rights of older workers.

This apathy might explain the lack of funding for any academic research on the topic on working life and extended working lives. However, a subsequent focus on ageing and health led to studies on older adults and the pension crisis.

Ill health and Retirement and the demographic crisis

The focus on *health related aspects of ageing* in Ireland was influenced by SHARE a European survey. The Survey of Health and Retirement in Europe has provided Irish data which was analysed by Cullinan and Gannon (2009). The study findings were framed in the context of the *aging demographic crisis* with the introduction predicting a huge growth in Irish population and a decrease in the ratio of people of working age to people over the retirement age to 1: 8 in 2061 (Green Paper on Pensions, 2007). Cullinan and Gannon examine the role of health status on labour force participation and retirement decisions, given that health status is a significant determinant of whether people are in employment or not. They were specifically interested in understanding the effects of ill-health on early retirement decisions, given that current policies seek to develop policies that will incentivise people to work longer.

They begin by noting the wide disparity between the labour force participation of men and women over 50 in which they estimate that 42% of males and 28% of females in 2008 were in employment. In addition an estimated 47% of men compared to 28% of women were retired. 35% of women report themselves as homemakers compared to 1% of males. Long term sickness accounts for 5.9% of males and 6.0% of females, with unemployment at low rates of 2.5% and 2.4% respectively. The main object of their analysis was to understand why significant proportions of both men and women retire earlier than at 65 years. Overall 37% retired because

they were eligible for a pension but this was the case for 45% of men and only 24% of women. 20% retired because of their own ill health, this was slightly more pronounced among men (21% versus 19.5%) while almost 4% due to the ill health of others (5.7% women versus 2.5% men). An option for early retirement was cited by 10.7% men and 8.8% women. Redundancies were cited by 8% of women and 4% of men. 21% of women retired to 'spend more time with their family' as compared to only 5% of men. Women were slightly more likely to retire (3%) when their spouse retired than men (2%). The sample of homemakers were also asked why they had ceased work and 57% of them had done so to care for children, and 12% due to health problems. Current workers were also asked in relation to their future plans and 43% thought that they would seek early retirement, while 26% were afraid that their health would limit their ability to continue to work before regular employment. They conclude that *ill health is an important determinant* of the transition from employment to retirement and to a much smaller extent to homemaking. Slightly more than 20% experienced ill health which had a negative effect on their labour force participation. Their report noted the huge burden of child care and of caring for the ill that falls on women.

The report illustrated that a focus on retirement and extended working lives revealed the underlying issue of low participation of women in the labour force. Yet the authors do not analyse the latter in terms of the traditional patriarchal structures of the Irish taxation and welfare system or the lack of affordable childcare.

A productivist approach to the ill health and participation in the labour market

A follow up comparative study (Gannon and Roberts 2011) between Ireland and Britain found that while the percentage of older people in part time work had increased over time, it remained lower in Ireland than in Britain. They noted that in both countries health problems increased the likelihood of retirement and lowered the probability of full time work. However having a health problem did not always impact on retirement, instead many people worked part time. The authors suggest that incentives to work among older people with disabilities, do not exist in Ireland (as in UK) and as a consequence they leave the labour force, with a deterioration of their skills. In the context of extending the working life the authors suggest that part time work might be an alternative and better option.

A small study by Kelly (2013) revealed that older workers were not defined in current health and safety legislation as a "sensitive risk group" and only 28% of employers were prepared to deal with an aging workforce. Only 7% of health and safety management within organisations took age and capacity into consideration when doing workplace risk assessments and 60% did not take age and capacity into account when determining the root cause of accidents.

A feminist political economy of ageing and a life course analytical approach

Ni Leime's work adopted a *feminist political economy and a life course approach* to ageing which recognised the gender gap that characterised the Irish labour force. Adopting this approach she is able to identify the impact legislation, policy and economic conditions have on older women's work-life choices and the role of a gendered welfare state. Her study of older workers in the Civil Service revealed considerable variation between workers as her sample of 57 aged between 50 and 64, was composed of four distinctive groups: (1) long term workers – not in senior grades, (2) senior managers (3) returners and (4) late entrants to public sector work. Her life-course perspective revealed that group 1 who had long continuous careers, had much more control over their retirement timing as compared with those who had the interrupted careers -

returners and late joiners. A lack of financial provision restricted the retirement options of the latter as they had not built up adequate pensions. Many would like to work beyond the age of 65 (to enable them to do so). They also enjoyed work itself and its social interaction. Among the first group their long tenure, adequate pensions and the desire to retire while healthy outweighs the attractions of interesting work for managers, though some single career centred women regarded work as a source of identity and viewed retirement with “some trepidation” (Ni Leime 2016). Many women managers saw retirement as “well earned leisure”, and many expressed a desire to retire while they and their partners “were still healthy”. This study and its approach reveals the heterogeneity among older workers and the distinction between chronological age and years of paid work as women whose life courses were greatly influenced by structural factors beyond their control. Her study also offers some explanations as to why the current labour force rate for older women in Ireland has improved – not characterised as “returners”. The removal of an age barrier to employment in the Civil Service played a major role in making this possible.

Longitudinal study on ageing TILDA ; impact of employment on quality of life

TILDA is the major Irish longitudinal Study on Ageing in Ireland. It is a *prospective study* on ageing which includes the assessment of social economic and health circumstances of community residents older people in Ireland (Barrett et al 2011). The first baseline study started in Oct 2009 and interviews with 8000 participants were completed by Feb 2011. In addition to one face to face interviews, respondents had to complete a self complete questionnaire and were invited to participate in a health assessment component. The respondents are reinterviewed every two years with a follow up medical examination every four years. This data will be analysed over time and has already delivered two major reports and several articles.

Chapter 6 of TILDA (McCorry et al 2014) report looked at the factors which were associated with change in older people’s quality of life- though there was not focus on employment or work per se. Self –reported quality of life peaked around 65-67 years and declined rapidly after the age of 80. However between the two waves of TILDA quality of life declined for all with the highest of decline for those aged 75+, .

Only 27% of men and 22% of women in TILDA were classified as ‘most socially integrated’ and 8% of men and 9% of women classified as ‘most isolated’. Participants with strong social networks, who engage in various types of active social relationships and who volunteer regularly have a higher quality of life than those who are less socially active. Only 35% of the participants looked after their children for at least one hour a week and those who do so have a higher quality of life than those who do not.

However participants who were employed at both waves had the highest quality of life score 44.3 (but it could be explained by the fact that they are younger and in better health). Participants who were unemployed in both waves had lower scores on quality of life (41.7) than the employed. Those who were retired at both waves had slightly measures of quality of life (42.9) while the permanently sick had the lowest level 35.5. Quality of life declines at a faster rate for those who were retired at both waves when compared to those who are employed – but this may be attributed to their being older and in worse health according to authors.

Quality of life and caring. 10% of Tilda participants provided care to their parents, 24% to their children and 35% looked after grandchildren. The proportion of respondents looking after others declined with age.

Occupational health, work and retirement in Ireland

Work related ill-health THOR-ROI (Health and Occupational Research) collects data from a number of surveillance schemes in which key medical personnel report work related diseases which occur in their clinical practices. Money et al (2015) compared incidences of key work-related disease between the North of Ireland and the Republic. The key diseases identified in the ROI were Contact dermatitis (348 cases) chest related diseases included 43

cases of asthma and 69 other forms of work related diseases. The second highest illness was 'work-related stress' (336) anxiety (120) ; musculoskeletal diseases (367) were included in total 1488 cases. Contact dermatitis was more commonly found among women in health and social care sector and in hairdressing and other beauty services. Respiratory illness were more commonly found in men in construction and manufacturing industries. In other returns from Occupational physicians noted high incidences of work related stress, anxiety and depression and musculoskeletal illnesses – upper limb and spine/neck disorders in the Republic of Ireland. These are not broken down by gender but the overall report indicates the relationship between work and illness and draws attention to different occupations and their health risks. These findings suggest that sector of employment is a key variable in examining the merits and disadvantages of extending working lives.

Conclusion

This review indicates that there has been little literature relating directly to the gender and health implications of extending working life in Ireland. This is especially the case for women as they have traditionally had a low participation rate until the recent expansion of the Celtic Tiger. The focus on the need for older workers was raised but resulted in little action to get women into the workplace and the void was filled by migrant workers – many of whom were women. The recent emphasis on ageing in Ireland has been dominated by academics in health-related research which has yielded some interesting material on employment related illnesses. There is scope for independent research on the health implications of extending the working life.

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