



Poland

## Tackling child poverty and promoting the social inclusion of children

A Study of National Policies

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*Disclaimer: This report does not necessarily reflect the views of either the European Commission or the EU Member States.*

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## 1. Preface

Poland is the country with the highest percentage of children living in poverty among the Member States. According to the latest data published by Eurostat <sup>1</sup>, 29 % of children and young people under 18 live below the poverty line equal to 60 % of national median equalised income. Furthermore, the relative poverty gap experienced by children and youth in Poland is the deepest for all the first 25 EU Member States.

Significant poverty risks for children and dimensions of social exclusion that affect children in Poland are a long-lasting phenomenon. Among factors which lead to poverty, we can find such as low education and low occupational activity of parents, a large number of dependent persons and living in rural areas which have remained invariable for many years. However, new factors have appeared, leading to an increased poverty risk for families with children. High unemployment, which had prevailed particularly during the years 1999-2005, contributed to a considerable increase of poverty risk for the whole population of Poland, including children. Transformations in the labour market (increased competition and requirements regarding employees, such as qualifications, flexibility, adaptability, intensive work, etc.), as well as changes in the household structure (increasing number of single parents and nuclear families) cause a long-lasting inactivity of women, who bring up children, particularly affecting those with lower education. Cultural factors, such as the attachment to traditional distribution of roles in the family, as well as a serious shortage of childcare services also contribute to this situation.

In many areas, such as access to education, health or housing standards, clear progress has been noticeable since 1989. Notwithstanding major advances in many fields, Poland still remains, in areas such as health, housing and access to childcare, to remain among those EU Member States which record the worse results. Access to education for children and youth has improved considerably, yet access to kindergarten care is much worse, and differences in the quality of education still persist. Health indicators have improved significantly since 1989, but families with children continue to experience difficulties in accessing healthcare services. The situation of disabled children in educational, healthcare and rehabilitation systems is especially difficult and calls for substantial improvement. The housing situation, particularly for families with larger numbers of children, is very bad.

Underdevelopment of public services, such as daycare and preschool educational facilities for children, healthcare allowing for early diagnosis and corrective treatment, family and pedagogical-psychological counselling, particularly in rural areas and small towns, impact negatively on the wellbeing of children. Significant financial limitations for families lead to a lack of access for children from poor families to non-public services, like leisure and culture.

Policies addressing children should cover both the efforts to counteract poverty and to extend as well as improve the quality of public services. Policies for eradicating poverty among children should focus, above all, on measures allowing the combining of employment with family life as well as supporting employment and education of women raising children, in particular ensuring better access to low-cost high quality daycare and educational services for young children. Consideration should also be given to the possibility of providing additional financial support, particularly to poor families with multiple children.

There is a need for developing the social infrastructures, particularly in rural communities and small towns. The observed improvement in certain areas, such as care for children deprived of

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<sup>1</sup> Income reference 2004 based on SILC 2005.

parental care, development of counselling, intervention in critical situations and social therapy or integrated and early diagnosis and help for disabled children, proceed too slowly. Many projects remain on paper or as pilot programmes, with limited reach.

There is also a need for stronger preferences for preventive actions rather than a treatment of long-lasting and hard-to-reverse negligence. A particularly significant area where expedited intervention is required includes inequalities in the education system for children and young people, including disabled children, and the development of continuous education and vocational training, especially among women who bring up small children.

The unfavourable situation of children in Poland should find a response in the strengthening of policies, to a little extent oriented to the problems of children so far. Open Method of Coordination positively influenced the perception of problems related to poverty and the risk of children exclusion. However, a decisive improvement requires a strategic approach, consistence in activities and breaking through the sectoral divisions, which dominate Polish policies. Problems regarding coordination, governance and policy monitoring weaken the effect of even the best programmes.

## **2. Child poverty and wellbeing in Poland**

### **2.1. Poverty**

Information concerning child and youth poverty in Poland is very limited. Data regarding poverty, published so far by the Central Statistical Office (CSO) and estimated on the basis of household budget surveys (HBS), only included the issues of child poverty<sup>2</sup> to a limited extent and also failed to allow for systematic measurements of persistence of poverty. Basic data resulting from the EU-SILC research, conducted for the first time in Poland in 2005, were published by Eurostat. However, a more extensive SILC research report will be made available by the Polish CSO only by the end of 2007. The EU-SILC research data published by Eurostat changes the picture of child poverty, resulting from previous HBS-based estimates. Attention is drawn, first of all, to a much larger range of poverty among single-parent families and households with two adults and two dependent children, as compared to both previous HBS-based estimates, published by the CSO and the HBS-based estimates for Eurostat. These differences between results of HBS and EU-SILC require further methodological explanations<sup>3</sup>.

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<sup>2</sup> Until 2006, the only systematic information published by the CSO regarding child poverty consisted of the HBS-based estimates of poverty dimensions among biological types of households.

<sup>3</sup> The CSO is currently preparing a paper which explains methodological differences in applied approaches to the poverty estimates in Poland.

### 2.1.1. Extent of material poverty of children

SILC research confirms previous national statistics results which indicate that children and youth in Poland are particularly exposed to the poverty risk. According to the newest data published by Eurostat, Poland is, among the EU Member States, the country with the highest percentage of children living in poverty. In 2004<sup>4</sup>, 29 % of children and young people below 18 years of age lived below the poverty line equal to 60 % of national median equalised income<sup>5</sup>. Although Poland is also characterised by the highest indicator of the poverty rate for the total population, nevertheless this fact does not fully explain the high percentage of children and young people at risk of poverty. Differences between the risk of poverty for the adult population (18 years old and over), and the at-risk-of-poverty-rate among children and young people are much larger than average in the first 25 EU Member States (compare Table 1).

**Table 1. At-risk-of-poverty rate by age 2004 (poverty line: 60 % of national median equalised income after social transfers)**

Age	Poland	EU-25
Less than 18 years old	29 %	19 %
18 years old and over	18 %	15 %
Total	21 %	16 %

Source: Eurostat.

Poland is in the group of the EU Member States<sup>6</sup> where the poverty rate of households with dependent children is higher than the poverty rate for the whole population.

With the exception of families with one child, all types of households with dependent children in Poland are exposed to a higher than average risk of poverty. The highest risk of poverty applies to children who live in families with three or more children (45 %), and to children depending on a single parent (40 %).

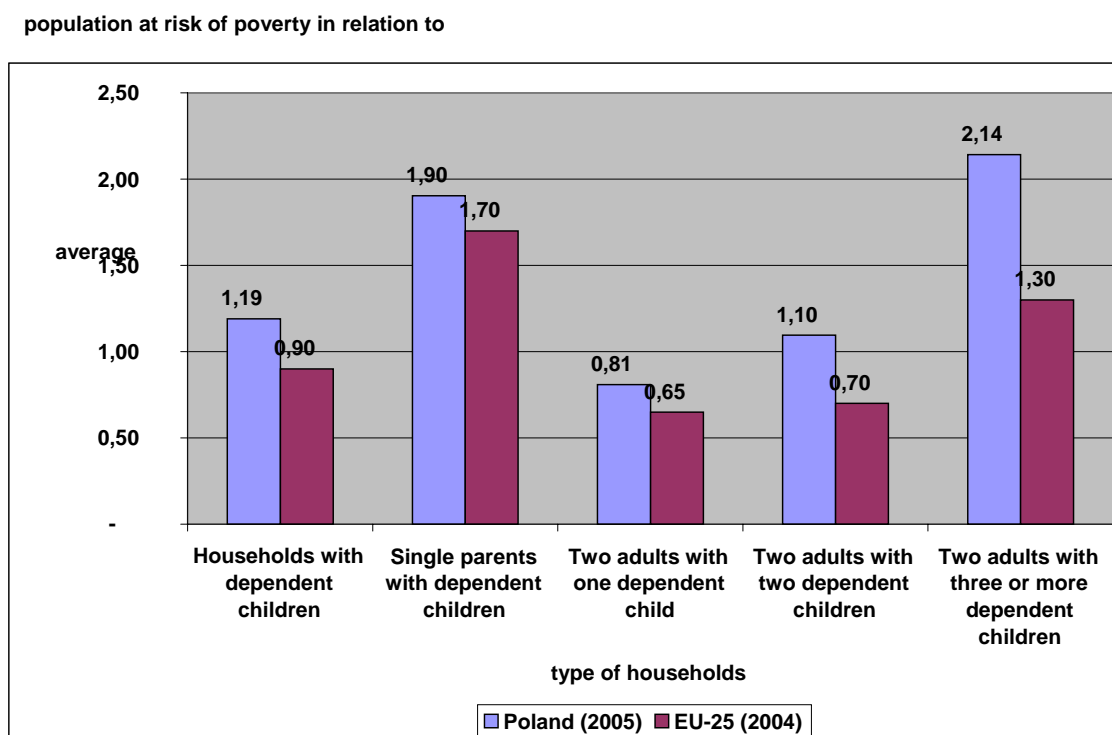
Differences in the risk of poverty of specific types of households with children are larger than average in the EU (see Graph 1). This applies first of all to couples with three or more dependent children, which in Poland are at risk of poverty two times more frequently than the total population. Poland is in a rather small Member States group where higher than average risk of poverty rate applies to couples with two children. In spite of a high risk of poverty for children who live in single-parent households, their poverty rate, as compared to the national average, is not as high as in many other EU Member States.

<sup>4</sup> Income reference 2004 based on SILC 2005.

<sup>5</sup> This data, based on the SILC research conducted in Poland for the first time in 2005, does not include in-kind income, which, due to a large share of population making their living from agriculture, may overstate the range of the child poverty problem. On the other hand, however, the applied equivalent scale results in a lower child poverty range in Poland than it would have been if the scale closer to the structure of Polish households expenditures was applied.

<sup>6</sup> Besides Poland, this group includes, Austria, the Czech Republic, Italy, Holland, Hungary, Lithuania, Luxembourg, Malta, Romania, and Slovakia.

**Graph 1. Population at risk of poverty by type of households in relation to average at-risk-of-poverty rate (poverty line: 60 % of median equalised income after social transfers)**



Note: Dependent children are defined as all persons aged less than 16, plus those persons aged 16-24 who are in education.

Source: Eurostat, data for Poland for 2004, based on SILC 2005.

As it is in the case of the poverty rate, also the poverty gap that children and youth suffer from in Poland is particularly large. The average poverty gap for children and youth in Poland is larger than the poverty gap for the total population of Poland and than the average poverty gap in the first 25 EU Member States (see Table 2).

**Table 2. Poverty gap in 2005 (for poverty line: 60 % of national median equalised income after social transfers)**

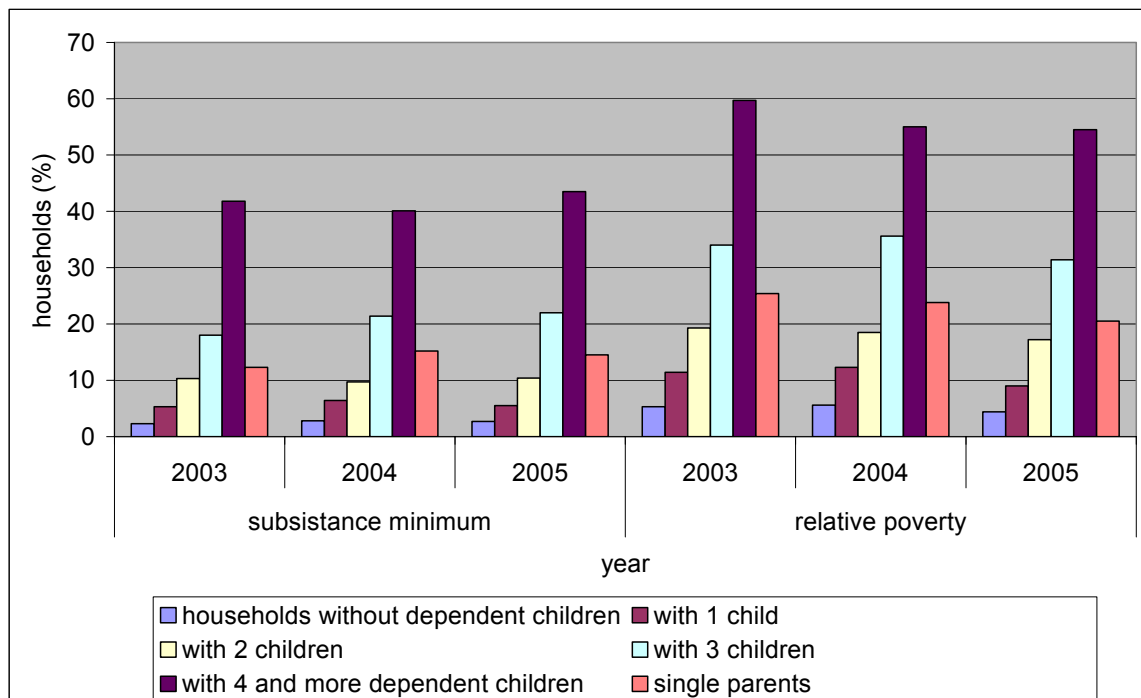
Age	Poland	EU-25
less than 18 years	33 %	22 %
18 years and over	29 %	22 %
Total population	30 %	22 %

Data for Poland 2004, based on SILC 2005.

Source: Eurostat.

Changes in the methodology of poverty rate calculations, discussed earlier, make it impossible to present the poverty dynamics over time on the basis of Eurostat data. Available national HBS-based data show a certain reduction in the percentage of households with children whose expenditures are below the relative poverty line in 2003-05, with a concurrent increase of the poverty rate measured in absolute terms (extreme poverty) (see Graph 2).

**Graph 2. Percentage of households which live in poverty, according to national statistics in 2003-05.**



Note: Relative poverty line: 50 % of mean of equalised expenditure.

Extreme poverty: extreme poverty is defined by the basket of goods and services which covers only basic needs, whose satisfaction cannot be delayed (things that are essential for everyday life). This is the official CSO definition.

Source: Authors' calculations based on Polish CSO data, (GUS, Zasięg ubóstwa materialnego, 2003-05,

[www.stat.gov.pl](http://www.stat.gov.pl))

Previous research does not allow for the assessment of the persistence of poverty <sup>7</sup>. However, some qualitative and quantitative research points out that poverty becomes a persistent feature (Tarkowska, 2005; Topińska, 2005). It is a new phenomenon compared to the beginning of 1990s <sup>8</sup>. The HBS panel data in 2002 and 2003 show that almost every second person living in extreme poverty in 2001, also lived in extreme poverty in 2002 <sup>9</sup>. The research by Topińska shows that the factors contributing the most to the permanent nature of poverty in Poland are first and foremost unemployment and the size of a household (number of children less than 14 years old) <sup>10</sup>. The place of residence also influences the risk of permanent poverty, to the disadvantage of those living in rural areas. Research conducted by Domański (2002) <sup>11</sup> and Warzywoda-Kruszyńska (2005) indicates the occurrence of an advanced phenomenon of poverty inheritance in Poland.

<sup>7</sup> SILC panel research, commenced in 2005, will allow monitoring of this issue in the future.

<sup>8</sup> The World Bank study conducted in Poland in the first half of the 1990s indicated an impermanent nature of poverty (World Bank 1995).

<sup>9</sup> The studies of household budgets in Poland are not panel studies, so only fragmented data regarding permanence of poverty are available.

<sup>10</sup> Topińska concludes that '...the household size is one of the most important determinants of the poverty dynamics. The basis for such a conclusion is constituted by very low "probabilities" of staying in poverty for persons, who live in small households, and relatively high for those who live in large ones' (Topińska 2005, pp. 82-83).

<sup>11</sup> Based on representative research conducted in 2000 in Bulgaria, Hungary, Poland, Romania, Russia and Slovakia, (Domański 2002, pp. 85-100).

### 2.1.2. Factors which lead to poverty among children

Unfortunately, a complete analysis of the factors of high poverty risk among children and young people in Poland is not available. The analysis is limited by the fact that not all existing data from SILC is available yet. We can, however, mention several of the most significant factors which impact on high poverty in this age group: employment, education, demographic structure and regional differences.

Employment. High unemployment constitutes a basic factor leading to high poverty in Poland. It particularly affects young families bringing up children, since young persons are more exposed to unemployment risk than older people. Another factor which leads to poverty for families with dependent children is high occupational inactivity of women.

The risk of poverty for households with dependent children is strongly related to the employment status of the adult members of the households. According to the preliminary estimation of the CSO based on SILC 2005, the poverty risk of the population living in households with dependent children where all adults are not in employment is significantly higher than in households with dependent children where all adult members of the household are in employment. In households with dependent children, where all adult persons are occupied, the poverty risk is almost four times lower than it is in the households where all persons are out of the labour market. The economic inactivity of adults is an obvious factor of poverty among children. However, we can also observe in-work poverty of households with children. Although the risk of poverty for jobless households with children is the highest, it is also high when there is only one person in employment (see Table 3).

Eurostat data indicates that 16 % of the active population living in households with dependent children are poor. Unfortunately, the data on the proportion of children living in poverty in the households with one or more adults in employment is lacking <sup>12</sup>.

**Table 3. Poverty rate of households with dependent children by employment status of the adult members of the household**

Number of adult persons in employment	Households with dependent children	Households without dependent children
no persons employed	56 %	16 %
one person employed	27.50 %	12 %
all persons employed	15 %	8.5 %

Note: For poverty line: 60 % of national median equalised income after social transfers.

Dependent children: Children living in households up to 16 years old or up to 24 years old in education.

Source: Preliminary estimation of the CSO for 2004 based on SILC 2005.

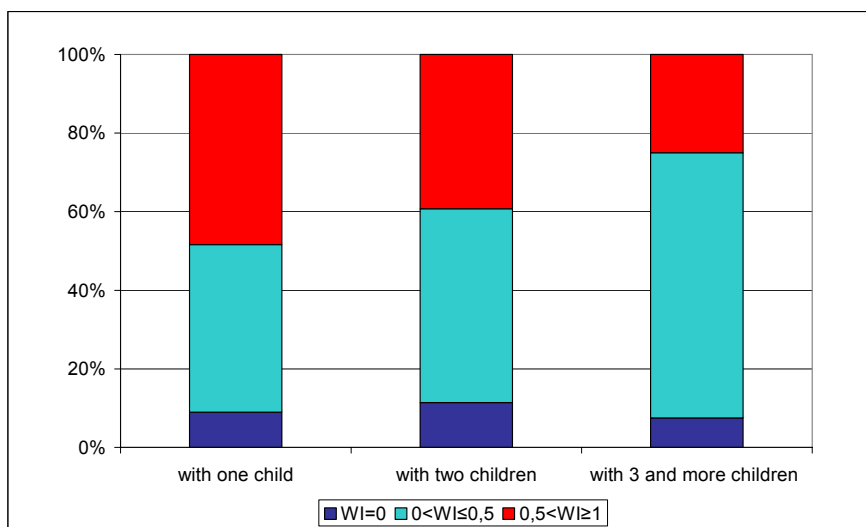
Furthermore, the impact of the labour market status on the poverty risk for household members is clearly stronger in the case of households with dependent children than in the case of households without children in that situation. These differences may be explained by the fact that households with children are younger persons' households, where the deterioration of their economic status is influenced by both unemployment and economic inactivity of the household members. In line with age, economically inactive persons increasingly resort to social benefits, which replace employment income (disability pensions, early retirement and old-age pensions).

<sup>12</sup> According to CSO information, this data will be published by the CSO by the end of this year.

While the impact of the adult members of households' employment status on the poverty rate is obvious, it would be useful to know whether the adult members of households with children are more exposed to economic inactivity than those from childless households.

The research conducted by the Gdansk Institute for Market Economics shows that the proportion of households with high employment activity for adult members drops with the rising number of children in the household (Graph 3). It was also observed that women often withdraw from the labour market when their child is small (0-3 years old), and then they face barriers to come back to work, which leads to their extended inactivity or unemployment <sup>13</sup>.

**Graph 3. Households by employment status of adult members and by type of household (for households with head aged 24-44)**



Note: WI: Employment status defined as a percentage of the number of the employed persons in relation to the number of the adult persons (18 years old and more) in the household.

Children: person up to 14 years old.

Source: Own calculations based on research conducted by the Gdansk Institute for Market Economics, Project: Economic and educational activity and family responsibilities financed by ESF. Representative study (6 531 persons), data not published yet.

Results of the research by the Gdansk Institute for Market Economics point to the importance of policies which would mitigate the conflict between the occupation and family responsibilities for reduction of unemployment and increase employment of women (policies for better reconciling of work and family responsibilities). They also indirectly point to the importance of such policies to counteract child poverty.

Education. A low education level of the household head clearly increases the poverty risk (see Table 4). The impact of a low education on households' income results from both higher unemployment risk, higher economic inactivity risk and also lower remuneration of persons with low educational level. The research shows that the level of education is the most important factor impacting on occupational activity of women and men in Poland (Sztanderska, Grotkowska, 2007).

<sup>13</sup> The study of the Gdansk Institute for Market Economics under the project 'Economic and educational activity and family responsibilities' financed by the ESF. Representative study (6 531 persons), data not published yet.

**Table 4. Poverty risk related to the average per education level of the family head (2003- 04)**

	Extreme poverty <sup>a</sup>	Relative poverty <sup>b</sup>	Extreme poverty <sup>a</sup>	Relative poverty <sup>b</sup>
	2003		2004	
Poverty risk related to the average				
Education of the family head				
Tertiary	0.1	0.1	0.1	0.1
Secondary	0.4	0.5	0.4	0.5
Primary vocational	1.4	1.4	1.4	1.4
Primary or none	1.8	1.6	1.7	1.6

Notes:

a: extreme poverty line: the extreme poverty is defined by the basket of goods and services, which covers only basic needs, whose satisfaction cannot be delayed.

b: relative poverty line equal 50 % of mean equalised expenditure.

Source: Own calculations based on GUS, 2006. pp. 101 and 195, Tables 103 and 104.

Education has an obvious impact and increases the risk of poverty particularly among single parents and couples with three or more dependent children. This is the case because in such types of family parents have, in average, lower education levels than in the total population (See

Table 5). It may be assumed that the comparison of education levels by age would reinforce this thesis. One should remember that heads of families with children are younger, on average, than childless family heads, and the education level of the population increases clearly among younger generations. These findings are supported by the results of the lone parents households research, which shows that lone parenthood in Poland is strongly related to fairly substantial risk of educational disadvantage (Trifiletti, 2007).

**Table 5. Families with children by parents education level**

	level of education (for couple — the higher of both partners)	Total	families with dependent children up to 24 years old					
			Total	1 child	2 children	3 children	4 children	5 and more children
couple	tertiary	17 %	18 %	21 %	19 %	12 %	7 %	4 %
	secondary	44 %	46 %	47 %	48 %	44 %	37 %	28 %
	primary vocational	29 %	29 %	25 %	29 %	38 %	45 %	51 %
	primary or none	11 %	7 %	7 %	5 %	7 %	10 %	17 %
single mothers	tertiary	10 %	13 %	15 %	12 %	7 %	3 %	2 %
	secondary	36 %	43 %	45 %	43 %	34 %	26 %	17 %
	primary vocational	20 %	24 %	22 %	26 %	33 %	35 %	34 %
	primary or none	34 %	17 %	15 %	16 %	25 %	35 %	46 %
single fathers	tertiary	10 %	12 %	13 %	11 %	7 %	4 %	1 %
	secondary	26 %	31 %	32 %	31 %	25 %	17 %	13 %
	primary vocational	31 %	37 %	35 %	39 %	44 %	49 %	47 %
	primary or none	33 %	18 %	18 %	16 %	22 %	29 %	37 %

Source: Own calculations based on National Census 2002.

<http://www.stat.gov.pl>

Demographic factor. Poverty rates of children and youth in Poland, if compared to the first 25 EU Member States average, are influenced by the demographic features of households in Poland. Obviously, the demographic structure alone is not a factor explaining the poverty phenomenon. However, if we take into consideration a high poverty risk, which is applicable in Poland to single parents and families with three or more children, it may partly explain high poverty rates for children. Poland is characterised by a high, share of households with three dependent children (13 %). The share of single-parent households is also high. There are 14 % of single-parent households among families with dependent children below 18 years old or in education.

The size of households is an important factor which impacts a higher risk of poverty (multichildren families are exposed to a greater risk of poverty than small families). The economic status of single-parent households and complete families with one or two children depends to a large extent on the employment status of the adult household members. Such findings result from the research conducted by the Gdansk Institute for Market Economics.<sup>14</sup> The study also shows that the impact of employment status of adult members of households on the average incomes of the families with three or more children is relatively small. This indicates that the activation policies must be supported by adequately directed income support policies. It applies in particular to the need to support families with three or more children, where the effect on income of an increase in the work of adult members of the household is the lowest.<sup>15</sup>

Regional differences. Poland is a country with large regional differences in living standards. Particularly significant differences exist in the area of income as well as of availability of services between rural and urban areas. According to data from national statistics, living in rural areas increases the risk of poverty more than two times (CSO, 2005)<sup>16</sup>.

**Table 6. Poverty risk by place of residence in relation to average**

	Extreme poverty <sup>a</sup>	Relative poverty <sup>b</sup>	Extreme poverty <sup>a</sup>	Relative poverty <sup>b</sup>
Year	2003		2004	
Urban	0.6	0.4	0.7	0.7
Rural	1.6	1.6	1.6	1.5

Note: see Table 4.

Source: Own calculations based on GUS, 2006. pp. 101 and 195, Tables 103 and 104.

<sup>14</sup> The study under the project 'Economic and educational activity and family responsibility' financed by ESF. Representative study (6 531 persons), The results published in: Kotowska, I., Szanderska, U, Wóycicka, I (eds): Aktywność zawodowa i edukacyjna a obowiązki rodzinne w Polsce w świetle badań empirycznych [Occupational and educational activity and family responsibility in Poland in the light of the empirical research], Scholar, Warsaw, 2007.

<sup>15</sup> Research shows that the strongest marginal effect of an increase of the employment of adult members of the household takes place in households with two children, and that an increase of the average net income of households resulting from an increase in the proportion of the employed adult members in the total number of adults in the household from 0.5 to 1 decreases in line with the household size and in the case of households with 3 or more children it amounts only up to 0.1 (GIME, 2007).

<sup>16</sup> It should be noted, however, that application of the same national poverty line to measure the poverty in rural and urban areas results in a distorted picture, since the subsistence expenses in rural areas are lower than in urban areas.

## 2.2. Education

### 2.2.1. Access to education

Although according to the Unicef report (2007) Poland is in top position among OECD countries for its educational outcomes indicator, decomposition of such an indicator shows significant problems in the Polish education system. If from the point of view of availability of education for children and young people at school age the results of the Polish education system are very good, the problem in Poland resides in the quality of education and its differentiation. Additionally, Unicef indicators do not include the availability of preschool education, which constitutes a huge problem in contemporary Poland.

From 2003-05, an improvement in the access of children and youth (7-15 years old) to education took place. The enrolment rate in 2005 was 94 % for children aged 7-15 years old (79 % in 2003), but it is lower than in 2000.<sup>17</sup> The enrolment rate for youths aged 16-19 years old was 92 %, and it improved in comparison to 2003 and 2000<sup>18</sup>. The existing geographical differences in the availability of education for children and young people aged 7-19 years old are insignificant and have tended to be further reduced in the last few years (Social Diagnosis, 2005).

Access to kindergarten and day nursery care looks much worse. Despite considerable improvement in 2005, as compared to 2003, still only 20 % of children up to six years old use preschool care (in 2003: 14 %). Compared to 2003, geographical differentiation of childcare availability increased. In urban areas, the access to childcare for children in preschool age is over twice as large as it is in rural areas where only 11 % were covered by such care. (see Table 7). Paradoxically, the worst access to kindergartens applies to children from neglected communities and to disabled children, i.e. the very children for whom preschool education is a significant tool for equalising their educational chances in the future. Scientific research proves that the preschool period has a significant importance on a child's development, school career and future life. The positive influence of a preschool education is particularly significant among children from neglected communities (Zahorska, 2003).

<sup>17</sup> Rates deteriorated for 2003, as compared to 2000, resulting from the fact that it was one of the initial periods after educational reform when the 7-15 age group included not only children and young people from primary schools, but also from grammar schools.

<sup>18</sup> The data differs from official Polish statistics, due to the different methodology. Data from *Social Diagnosis* is based on households surveys, while data from official statistics is based on administration data.

**Table 7. Children and young persons in households, by educational status and place of residence (percentage of persons of given age and place of residence using specific educational service, 2000-05).**

Educational status	Class of residence place						Total
	Towns over 500 thous.	Towns 200-500 thous.	Towns 100-200 thous.	Towns 20-100 thous.	Towns below 20 thous.	Rural areas	
Children 0-6 years old using a day nursery or kindergarten	24.17***	31.23	20.46	32.12	20.84	10.78	19.77
	19.13**	19.52	20.42	19.93	12.18	7.74	13.51
	31.16*	22.33	14.51	33.71	27.34	12.58	21.40
Children 7-15 years old attending schools	92.80	91.95	92.64	95.97	95.55	93.22	93.92
	76.74	77.07	81.36	78.27	79.88	80.14	79.23
	99.41	98.74	99.17	98.79	98.17	97.89	98.48
Young persons 16-19 years old attending schools	92.78	93.67	94.34	91.69	89.68	92.93	92.39
	93.67	91.07	93.85	89.12	94.01	87.74	90.39
	89.40	97.63	86.30	90.03	87.55	85.43	88.47

\*\*\*results of 2005 research.

\*\*results of 2003 research.

\* results of 2000 research.

Source: Social Diagnosis 2005.

Access to institutional childcare is treated not only as a tool for equalising children's opportunities in the education system but also as a basic instrument of social policy oriented towards supporting women in reconciling work and family life. Difficulties related to such reconciliation lead to an increased economic inactivity of women, who bring up small children, and difficulties with their re-entry into the labour market. An improvement in the availability of childcare is a prerequisite for improving women's situation in the labour market, an increase in their employment, and thus an improvement in financial conditions for families with children. Unfortunately, the availability of this type of care in Poland is among the lowest in the EU Members States, and it is also a long way from the Lisbon Strategy indicators regarding coverage of children with preschool care.

Regardless of an improvement, the situation of disabled children within the education system is not positive. Disabled children continue to be too often kept away from the regular education system and sent to special schools. Over 40 % of disabled children are taught at special primary schools, and at grammar school level this percentage increases to 60 %<sup>19</sup>. Development of integration schools and classes is too slow, and often such schools do not have adequate personnel to work with dysfunctional children. The offer by special schools is limited and not adjusted to potential development abilities of pupils. Disabled children are also frequently bound to be socially isolated due to limited access to general education and integration kindergartens. Some 30 000 children are frequently excluded from the general education system and stay in special educational centres, separated from their families, due to the lack of an adequate school in the proximity of their place of residence as well as the lack of adequate transportation (Helsinki

<sup>19</sup> CSO, Statistical Yearbook 2005, Table 8 (246).

Human Rights Foundation, 2002). Nursing services for families with disabled children are lacking, particularly in rural areas (Government Population Council, 2004).

### *2.2.2. Quality of education and its diversification.*

The Polish educational system is characterised by a low education quality and very significant diversification of its quality. Comparison of the OECD PISA study results in 2003 and 2000 shows a general improvement in the quality of education in Poland. It also shows a simultaneous decrease in the differentiation in quality of education between schools and higher diversification of the quality of education within schools themselves. This could be the effect of the educational system reform, introduced in 1999<sup>20</sup>. The PISA study shows that differences in test results persist, depending on the social and economic status of the parents. As compared to other OECD countries, the differences observed in Poland continue to be relatively high<sup>21</sup>.

## **2.3. Health**

Basic indicators regarding the health condition of children and young people place Poland in the group of new EU Member States, characterised by worse health results than the first 15 EU Member States. It should be noted, however, that a significant improvement in such indicators occurred between the years 1970-2004, in particular during the period after 1990. Also from the point of view of subjective perception of the health condition of young people, Poland is placed alongside new Member States below the indicators for the first 15 EU Member States. According to HBSC results 'young people from Baltic states (excluding Estonia) and the eastern countries in the European region tend to have higher rates of poorer health and lower rates of life satisfaction' (HBSC, 2001/2002, chapter 3).

The access by disabled children to healthcare services is extremely difficult. Some 3.3 % of the 0-15 year old children in Poland suffer from being disabled. Disabled children in Poland have no access to early diagnostics and adequate rehabilitation. Diagnosis of the condition of disabled children is performed too late, even though disorder symptoms may be noticed earlier and reported by worried parents. Physicians who examine children in their early lives react inadequately to alarming symptoms and fail to refer children to specialists. Access to specialised medical care is difficult (physicians are grouped in large centres, clinics, etc...) and information for parents is by far insufficient. This leads to a considerable reduction in possibilities for the complete elimination of disorders, in the case of smaller developmental delays, or mobilisation of positive potential of children in the cases of more extensive disorders. Organisation of health care system in Poland cause that early help is provided in a fragmentary way, or is not provided at all.

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<sup>20</sup> The reform has, among other things, extended the period of compulsory education by one year (up to 15 years old).

<sup>21</sup> Compare with the results of the PISA study (PISA 2003).

## 2.4. Housing

The housing situation of Polish people is the worst out of all EU Member States. The number of rooms per inhabitant in Poland is the smallest among all EU Member States (0.9). Housing conditions of both lone parents and families with children are also the most difficult in all EU countries <sup>22</sup> (European Foundation, 2003).

The dwelling space is also small, although recently it has been improved to some extent, as is the space per 1 inhabitant. The dwelling space increased in all types of households in 2003-05. The households with numerous children had the smallest average housing space in 2005 (Social Diagnosis, 2005).

Regardless of significant improvement, which has taken place since 1989, 28 % of households continued to live in bad housing conditions. <sup>23</sup> In the main, bad housing conditions apply to families with numerous children and lone parents with children.

**Table 8. Households in bad housing conditions.**

Household	Percentage of households with dwelling			
	without bathroom	small space	cheap dwelling	presence of at least one of the three symptoms
Total	10.77	8.27	15.49	27.64
Couples without children	8.19	1.23	13.23	19.63
with 1 child	5.68	5.04	15.12	22.12
with 2 children	6.35	14.56	15.07	27.24
with 3 children	8.59	25.69	17.10	38.71
with 4 and more children	14.31	46.41	17.53	54.59
Lone parents with children	14.04	9.71	27.94	37.73
Other	17.20	6.76	15.36	29.36

Source: Radziukiewicz, (2006), data on the basis of HBS.

Households in Poland have frequent problems with paying bills on time for accommodation. The group of households which most frequently have overdue payments for housing, and for gas and energy, in 2005, includes households of families with numerous children (21 and 12 % of households respectively) and single-parent households (over 19 and almost 12 % of households respectively). It should be noted that single-parent households are those who most frequently have payments overdue for more than 12 months (Social Diagnosis, 2005).

<sup>22</sup> Single parents with a child up to 16 years old had an average of 2.4 rooms, a couple with one or 2 children under 16 had 2.6, and a couple with 3 or more children under 16 years old had a 2.9 room dwelling (European Foundation, 2003)

<sup>23</sup> When determining bad housing conditions, presence of at least one of three factors was taken into consideration: the lack of bathroom, space per person (not more than 10 m<sup>2</sup>), and living in social dwellings or ones with regulated rent.

## 2.5. Culture and leisure

A family's economic condition translates into the conditions for participating in culture and leisure activities. Single-parent households and families with numerous children often give up on selected forms of participation in culture (over 50 %). The frequency of resignations from participating in cultural activities among families with numerous children increased between 2003-05. For economic reasons, over half of households refrained from sending children to summer rest centres and camps, and almost 60 % resigned from family vacations. In 2005, resignation of vacations took place most frequently in the households of couples with numerous children<sup>24</sup>. Giving up vacation trips has also increased in this group of households within the past few years, that is to say between 2003 and 2005 (Social Diagnosis).

## 2.6. Children from dysfunctional families and deprived of parental care

In 2006, over 30 000 children were brought up outside their natural family environment in foster care institutions, due to social orphanhood, which means limited rights of parents (less frequently biological). Over 60 000 children were brought up in foster families<sup>25</sup>.

Children are taken into orphanages and other childcare institutions usually after a long process of deepened and reinforced dysfunction of the family. Many years of neglect and a creeping process of exclusion of dysfunctional environment children from the education system and social relations makes the process of their re-socialisation and returning to regular life (including education obligation) extremely difficult. (Hryniewicz, 2006).

Excessive numbers of children are placed in large centres<sup>26</sup>. Educational conditions in such centres are inadequate. A tutor in an orphanage takes care of a dozen or so children, usually in need of special care, specialist treatment and rehabilitation due to many years of neglect. Those children are usually chronically ill, disabled, underprivileged, demoralised, psychologically hurt due to traumatic life experiences, and it is very difficult to find a foster family or another form of care for them<sup>27</sup> (Hryniewicz, 2006, p. 215; Kolankiewicz, 2005, p.26).

## 2.7. Violence against children

Information regarding breaches of children rights, including drastic cases as home violence against children, is fragmented. Public opinion surveys show that child beating is a frequent disciplinary practice. Every fifth parent, who brings up children under 19 years of age, admits to sometimes beating them. Almost two thirds of parents declare that their children have never been beaten. Attention is drawn to a large group of those surveyed who do not remember such events

<sup>24</sup> From almost 73 % of the households — adult vacations to some 66 % of the households — children's vacations.

<sup>25</sup> 46 831 in families related to child, 9 661 in families not related to child and 5 062 in professional foster families (information from the Ministry of Labour and Social Policy (MLSP)).

<sup>26</sup> According to the law on social assistance (Official Journal 04.64.593) and regulation of the MLSP dated on 14 February 2005 (Official Journal 05.37.33), the number of children in a foster care institution should not exceed 30. The regulation has to be implemented by 2010.

<sup>27</sup> According to the law on social assistance (Official Journal 04.64.593) and regulation of the MLSP dated on 14 February 2005 (Official Journal 05.37.33), the number of children under the care of one tutor in foster care institutions should not exceed 10 (or 14 in small institutions). The regulation has to be implemented by 2010.

(16 %). During the last five years, the number of parents who admit beating their children has clearly dropped. It is difficult to estimate, however, to what extent it is the result of changing educational methods, or to an increasing attention to declarations (awareness that beating children is something wrong), on the other hand (CBOS 2005).

Number of children and young persons registered by the police as home violence victims increases what probably results from more active participation of public authorities in intervention in critical situations concerning children (see Table 9). The public authorities are more often asked for intervention.

**Table 9. Number of home violence victims**

	1999	2000	2001	2002	2003	2004	2005
Total number of home violence victims	96 955	116 644	113 793	127 515	137 299	150 266	156 788
Children under 13 years old	23 929	27 820	26 305	30 073	32 525	35 137	37 227
Juvenile from 13 to 18 years old	13 546	15 540	14 908	15 955	17 062	17 527	17 800

Source: <http://www.rodzina.gov.pl/?1,11,139>,

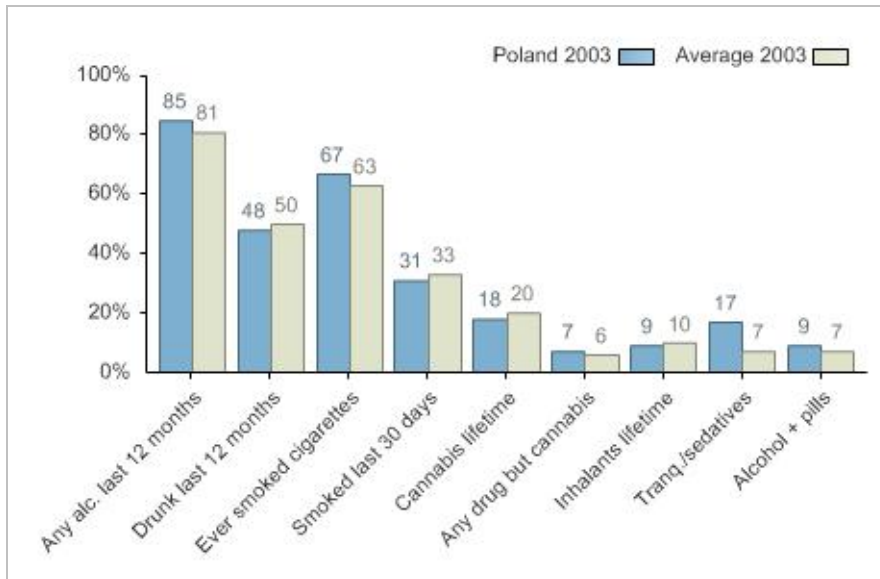
## 2.8. Juvenile crime and alcoholism, drug abuse and nicotine addiction among children and young persons

According to police statistics, the total number of minors found guilty of a crime has been declining systematically since 1995. However, it remains significant. In 2006, there was evidence of 77 000 criminal acts committed by 53 000 minors. The improvement cannot be noted, however, in the case of the most severe crimes against health and life. A significant social problem is the participation of children up to 13 years old in the crime. In 2006, 2 000 criminal acts by children up to 13 years old were registered <sup>28</sup>.

The research conducted in 2003 within the framework of the 'European survey project on alcohol and other drugs', with participation of 35 European countries, shows that Polish young people use alcohol, smoke cigarettes and concurrently use alcohol and drugs slightly more frequently than the average youth in the countries covered by the research. As compared to 1995, the increase in alcohol and drugs consumption and the reduced frequency of smoking are evident.

<sup>28</sup> Data from the Police Headquarters.  
<http://www.policja.pl/portal/pol/4/306/>

**Graph 4. Alcohol consumption and nicotine and drugs addiction among young persons 16 years old**



Source: Espad, 2003.

The research shows that Poland is among the countries with the highest percentages of students reporting use of amphetamines, binge drinking and tranquillisers or sedatives without prescription (see the ESPAD report 2003).

### 3. Policy framework

#### 3.1. General policy framework

Characteristic features of the social model in Poland are a low level of social transfers, addressed to families with children, and the underdevelopment of social services. A strong cultural and structural conflict in the area of combining occupational and family roles leads to inactivity of women who bring up children, which constitutes a significant cause for high poverty risk among children.

The instruments for counteracting poverty among families with children concentrate on social transfers of an income-tested character. Such benefits, besides the universal family allowance, also take into account specific needs related to nursing disabled children, or during childcare leave. Family benefits system is consistent and well addressed. Due to the dimensions of the child poverty risk in Poland, the lack of social benefits for families of universal character (with the exception of tax reduction) is not a deficiency. However, the amount of social transfers to the poor families with children is too low to improve their situation significantly. They play the marginal role within the total social expenditures.

Services are dominated by the universalistic approach. Policies are first directed at providing universal access to basic services, to education and healthcare services. The approach to services shows an imbalance between the universalistic approach and the targeted approach: there is a lack of adequate response addressed to satisfy specific needs of children in difficult situations, disabled or coming from dysfunctional families. General underdevelopment of services in Poland increases difficulties in making them available for children with special needs.

Neglected service categories include daycare services for children (crèches and kindergartens, extramural offers), medical care services in schools, specialist health services enabling early diagnosis, medical rehabilitation, family and pedagogical-psychological counselling. The density of this type of service's offer is very modest, particularly in the countryside and small towns (see Government Population Council, 2004).

The network of services aimed to support dysfunctional or at risk families, such as family and psychological counselling, critical intervention centres, social therapy centres etc., is inadequately developed, although progress in this area should be noted. Even if in some areas there are integrated prevention programmes which address specific problems of children with special needs, in general the policies concentrate on post-crisis intervention measures rather than preventive activities.

Social policies fail to take into account the problem of employment barriers faced by women who bring up children, and their consequences. They are directed more to the formal protection of employment and income support for persons who resign from their jobs to care for their children, rather than to facilitating the combination of work with childcare. The difficulties in the area of reconciliation of work and family life have been partially addressed in the governmental programme of family policy announced in March 2007 and in the 'National action plan on inclusion' (NAP inclusion) 2005-08.

Child poverty and wellbeing problems are not the central focus of social policies. There is a lack of a consistent multidimensional approach to the problems relating to children. Policy regarding children is subjected, on the one hand, to sectoral approaches, and on the other hand it is dealt with within the broader context of family policies.

In the second half of the 1990s, a policy framework of the family policy started to be developed to respond to demographic processes related to decreasing birth rates. In 1999, for the first time, the national four-year programme 'Pro-family policy of the state' was formulated. A subsequent family policy programme was presented in March 2007. Also NAP inclusion 2006-08 presents under Priority 1 actions related to family policy (Support for families with children).

Generally, family policy programmes concentrate more on actions to promote higher birth rates and improve the situation of Polish families rather than on the poverty and deprivation among children. This is not to say that the problems of children are completely overlooked by such programmes, at least in as far as the situation of children reflects on functioning of families. This applies to such elements as access to healthcare and rehabilitation for disabled children, childcare services or work with dysfunctional families.

The approach taken to problems of children by family-oriented policies varies, depending on the programme concerned. While the 'Governmental programme on family policy' from March 2007 focuses more on actions involving income support for child-bearing and families with children (tax credits, longer maternity leave, higher pension fund credits for the time devoted to child-rearing leave), the NAP inclusion 2006-08 presents numerous projects on the development of social services for families with children.<sup>29</sup> In neither of the two programmes is there consistent treatment of child-related problems, particularly in terms of equality of opportunity in education, access to rest, recreation and sports, or family violence against children.

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<sup>29</sup> This includes development of family-oriented services such as daycare facilities for children and dependents, socio-therapy centres and other prevention or inclusion-oriented forms of support for youth with special needs, development of specialised family counselling and of foster parenting.

General tasks in the field of family policy are also written in law, constituting the basis of the activities of local self-governments created within the framework of the State administration reform of 1999. These tasks, however, are of a very general nature and do not relate to specific problems of children. Regional self-governments, and sometimes lower level self-governments, create the family policy programmes or they include activities, related to such policies, into programmes in the field of social policy. Child poverty and wellbeing in these programmes is often understated and seen from the family policy perspective. Nevertheless, one may notice examples of interesting regional programmes that concentrate on children's problems, for example the *Małopolskie voivodship* pro-family policy programme<sup>30</sup>.

Opportunities to implement policies taking a multidimensional approach in relation to selected groups and their social problems (including children) are limited, due to the difficulties in coordinating social policy (vertical and horizontal). Under the national administration reform 1999, the questions of social policy (education, elements of healthcare, social assistance, employment, other public services) have been transferred for management to the three devolved autonomous administration levels (communes called *gminy*, districts called *poviats* and regions called *voivodships*). In addition, there is an increasingly denser network of non-public institutions involved in social policy questions. While the multitude of partners planning, financing and providing social policy is unquestionably a positive development, so far there is clear absence of an effective approach to coordination and management of social policy in a devolved model, with a multiplicity of partners. For several years, new approaches have tried to establish administrative coordination of the social policy planning process, but they all seem to have been ineffective.<sup>31</sup> The bill on principles to govern social policy, in March 2007 before Parliament, aimed at comprehensive regulation of questions relating to programming, implementing, monitoring and evaluating social policy at national, regional and local levels, has been evaluated negatively by experts<sup>32</sup>.

### 3.2. Ensure adequate income — social transfers and employment

#### 3.2.1. Social transfers

High poverty rates among children and a relatively poor effect of social transfers on its reduction indicates the major problem of the Polish social protection system, which provides insufficient protection against poverty of young families with children.

<sup>30</sup> See *Małopolski Program Polityki rodzinnej na lata 2004-2007*.  
<http://www.rops.krakow.pl/index.php?sid=4>

<sup>31</sup> The regional and local governments should prepare the strategies on social policy (resolving social problems). However, in most cases, communes and districts either failed to draft any strategy at all, or have produced completely useless documents lacking in-depth diagnosis of social needs related specifically to their local community. Even fewer propose truly relevant solutions.

<sup>32</sup> The proposed bill has been evaluated negatively by experts, due to the absence of solutions guaranteeing consistency of efforts made in different areas of social policy and integrating actions of institutions subordinated to different government departments. In particular, it was pointed out that fields of social policy such as culture, family-oriented policies or environment protection have been omitted entirely in the proposed legislation. Concern is also raised by the fact that the bill proposes reliance on solutions which have already been in force for several years, but have proved ineffective in practice, that is formalised (commune, district and regional level) strategies for addressing social problems. See report from discussion during the expert seminar organised by the Public Affairs Institute on 14 May, 2007 regarding the bill on principles to govern conduct of social policy. <http://www.liskow.org.pl/content/view/160/34/lang,pl/>.

Social expenditure in Poland is characterised by a very high share of expenditure for retirement and disability pensions and a low share for other expenditures related to children and families. As a result, although total social expenditure in Poland is relatively high, expenditure allocated for the social policy addressed to children and families is very low. Other social expenditure, directed to families with children who require support, such as the social assistance expenditures, are low, compared to the first 25 EU Member States average (see Table 10).

**Table 10. Social expenditure by functions in 2004**

	as percentage of GDP	as percentage of total social expenditure
<b>Poland</b>		
Children/family	0.92	4.6
Housing	n.a.	n.a.
Social exclusion	0.12	0.6
<b>EU-25</b>		
Children/family	2.13	7.8
Housing	0.55	2
Social exclusion	0.41	1.5

Source: own calculations based on Eurostat data.

A comparison of the impact of social transfers on the reduction of poverty in Poland with the average for the first 25 EU Member States (see

Table 11) draws the following conclusions:

- The relative poverty rate before social transfers in Poland is the highest among the first 25 EU Member States; it applies to both the percentage of the total population at risk of poverty (51 %) and also to children and young persons up to 18 years old (46 %);
- Comparison of the at-risk-of-poverty rate in Poland before and after social transfers shows that the impact of social transfers on reduction of poverty in Poland is the smallest in the case of children and young persons up to 18 years old. If before the social transfers, the at-risk-of-poverty rate is comparable for both children and adult persons, after the social transfers the at-risk-of-poverty rate for children is higher than the poverty risk for adult persons by one third;
- The impact of social transfers on reducing poverty among children in Poland is similar to the first 25 EU Member States; nevertheless, transfers other than pensions have significantly less importance.

**Table 11. Impact of social transfers on poverty reduction (%) in 2004.**

Age	at-risk-of-poverty rate before social transfers (pensions included)	at-risk-of-poverty rate before social transfers (pensions excluded)	at-risk-of-poverty rate after social transfers	impact of social transfers on poverty reduction (pensions included in the social transfers)	impact of social transfers on poverty reduction (pensions excluded from the social transfers)
	1	2	3	1-2	1-3
<b>Poland</b>					
Total	51	30	21	30	9
less than 18 years old	46	39	29	17	10
18-64	45	31	20	25	11
65 years old and more	90	23	19	71	4
<b>EU-25</b>					
Total	43	26	16	27	10
less than 18 years old	36	34	19	17	15
18-64	33	25	14	19	11
65 years old and more	88	11	5	83	6

Source: own calculations based on Eurostat data.

### 3.2.2. Social protection benefits and services

Income support programmes for families with children are generally based on income means-testing and successfully alleviate income poverty. However, taking into account the extent of poverty among families with children before social transfers and limited financing of those programmes, they cannot be successful at reducing poverty.

Income support for families with children is mainly implemented through five social programmes:

- The basic programme is the family benefits system addressed to all families with children who meet the income test. Besides the universal family allowances, whose amount depends on the child's age, this programme also includes specific benefits related to particular situations of families who bring up children, such as: supplements for families with numerous children, benefits for persons who resign from their jobs to care for a disabled child, allowances payable during childcare leave, allowances for single parents, if the other parent is unknown or is not alive, child birth allowances, allowances related to commencement of school education, education and rehabilitation of a disabled child or starting the education by a child away from its place of residence, child support advances payable for single parents who prove that due to objective circumstances they are not able to collect awarded alimonies from the other parent of the child.
- Financial support for poor families is also implemented through the social assistance system. Persons and families who are temporarily in an unfavourable economic situation are paid a periodic allowance equal to at least 25 % of the difference between the poverty line, applicable for the purposes of the social assistance, and the amount of the family income. As of 2008, the minimum amount of the allowance

will be increased up to 50 %. Additionally, poor families can receive an assistance to finance heating expenses and accommodation (housing benefits).

- As of 2007, some small tax reductions were introduced for families with children, amounting up to PLN 120 (around EUR 30) a year per child. The family policy programme draft announced in March 2007 of the current year provides for gradual increase of this relief up to PLN 200 still this year and to PLN 500 in 2013. While assessing this proposal, the fact that many families with children living in poverty will not be covered by such aid, as they do not pay taxes, has to be taken into account (this applies to farmers and people living on other than pensions social allowances).
- Scholarships and other forms of support for pupils from poor families were introduced in 2004 and financed by national resources and from ESF European structural funds. This system provides for material aid for pupils in a difficult situation, and for performance-based scholarships and sport scholarship schemes.
- The state aid programme for nutrition financially supports the gminas which organise, for example, additional nutrition of children at the preschool and school age.

### 3.2.3. Access to employment

Low occupational activity of parents, combined with low education, is the basic factor increasing poverty risk among families with children. Therefore, an increase in the access to employment and the improvement and updating of professional skills of the adult members of households with children (including first of all women) should become a principal instrument of the policy for reducing poverty among children.

The dominating economic model of the family (male breadwinner), serious shortage of services, including in particular childcare services, and the existing legal solutions concerning parental leave, lead to the withdrawal of women with small children from the labour market for long periods, in connection with child upbringing. This leads to a de-capitalisation of their capital, resulting in difficulties regarding return to work, and creates a barrier against future professional advance.

The improvement in the economic conditions of families and persons who bring up children by intensifying activity and occupational opportunities for women, requires comprehensive actions related to both the development of various forms of care for small and school-aged children, the development of inexpensive services to support housework, the facilitation of access to education for persons bringing up small children, and an adjustment of the benefits system in order to reduce alternative cost related to taking up a job by persons who bring up small children, especially those with lower qualifications. An important element should be facilitating professional education and updating professional skills of women who bring up small children, when they return to the labour market.

A draft of the governmental family policy programme announced in March 2007.<sup>33</sup> proposes actions, making the balance between work and family life easier. It should be considered as good signal regarding the appreciation of the importance of problems related to difficulties with

<sup>33</sup> Rządowy program polityki rodzinnej (projekt).  
<http://www.rodzina.gov.pl>

reconciliation of work and childcare duties, however, it misses a comprehensive concept of changes, and the proposals contained therein are often of a very general character. Except for the section related to income support<sup>34</sup>, this programme also fails to provide for any significant funding of its implementation, a fact which may reduce its effectiveness.

### 3.3. Access to essential services

#### 3.3.1. Education and childcare

In 1999 the education system reform was introduced, with the purpose of improving the education levels and equalising differences in the quality of education. The reform extended the education period and introduced compulsory education from 7-18 years of age. As of the school year 2004/05, it became compulsory for 6-year-old children to attend a one-year preschool preparation at schools or kindergartens. School management was transferred under the administration reform (1999) to local self-governments (*gminas*) which receive an educational subsidy for this purpose.

As a result of the reform, a large number of small schools were closed, and education was organised in larger ones, quite often a distance from a pupil's place of residence. Therefore, the *gminas* were obliged to provide free transportation for children or to refund the costs of such transport to preschool classes, primary and grammar schools, if the distance to school exceeds the distance defined in the law<sup>35</sup>. These transport measures also apply to transportation for disabled children, regardless of the distance.

The reform had a positive impact on the reduction of significant differences in students' skills between the schools, highlighted by PISA research in 2003. Concurrently, a probable effect of this reform is an increased differentiation of students' skills within the schools.

Transportation of children to schools, particularly where it is far away from their homes, facilitates children's access to education. However, many students must travel large distances and lose a lot of time to get to school. The organisation of transportation for disabled children continues to be a serious problem. The education act does not define the requirements to be met by the organisation of transportation of disabled children to schools, and serious negligence in this field is resulting in reduced availability of education for disabled children. In spite of the reform guidelines, school infrastructures and equipment are inadequate (see Helsinki Human Rights Foundation, 2002).

The Helsinki Human Rights Foundation report shows the lack of a reliable system to control implementation of compulsory education. Full information on children subject to compulsory education is missing, the fate of children who 'fall out of the school system' is not followed up, and a serious problem is the lack of reaction to a prolonged absence of students at school without justification (in particular in grammar and high schools). The authors of the report believe that official data indicating a low percentage of school leavers is the result of weaknesses in the compulsory education control system<sup>36</sup>.

<sup>34</sup> Expenditures included in the programme cover only expenditure on some measures such as income tax relief for families with children, earning the maternity leave and increasing the retirement insurance premium payable by the budget for persons on childcare leave.

<sup>35</sup> 3 km for younger children and 4 km for the older ones.

<sup>36</sup> Early school leavers' problems were included in the draft of the operational programme 'Human capital' to be co-financed by the EFS between 2007 and 2013. However, they do not apply to monitoring of threats, but to

Education of small children is a serious, unresolved problem. The lack of political determination to make preschool education universal and to lower the age of starting school education, partly ideologically motivated, is quite obvious. In spite of certain actions in the right direction, the progress in this area is obviously too slow<sup>37</sup>. In the spring of 2001, the Ministry of National Education announced the 'Small child programme', later dropped.<sup>38</sup> This project was to be an important instrument for the equalisation of opportunities in the education system: it provided for the reduction of the compulsory education age by one year and established compulsory preschool education for children from the age of five, as well as early support for disabled children.

### 3.3.2. Housing

The social housing (aimed at the poorest people) deficit in Poland amounts to some 125 000 units.<sup>39</sup> Availability of housing for people at risk of exclusion is to be fulfilled through the continuation of the social housing pilot programme undertaken in 2004-06. In 2006, the Parliament adopted an act on financial support for the creation of social accommodation, protected flats, night shelters and dwellings for the homeless.<sup>40</sup> This law defines the systemic regulation of the issue of state support for the undertakings aimed at the acquisition of accommodation and dwellings for the poorest<sup>41</sup>, allows for an increase of the number of dwellings and living spaces of a decent technical standard. Financial support is directed at entities, which due to their tasks set by law or their statutes are involved in providing accommodation or shelters: *gminas*, *poviats*, associations of *gminas* and non-government organisations (NGOs). The act introduced solutions reducing the negative effects of the previously implemented pilot programme, related to the phenomenon of creating enclaves of exclusion and stigmatisation in separated buildings with social flats. The NRP (National Reform Programme) implementation report envisaged the sum of PLN 470 million for implementation of the project to support building dwellings for the poorest, as well as night shelters and accommodation for the homeless in the years 2005-08. Taking into account the huge shortage of social flats, this amount was certainly not sufficient to considerably reduce the deficit and significantly improve the situation of poor families living in sub-standard accommodation.

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actions aimed at equalising the delays in children education. Controversies are caused by centralisation of funds for that purpose, while the responsibility for educational policy and implementation of compulsory education rests with local self-governments.

<sup>37</sup> In 2004, six-year-old children were included in compulsory preschool education. Furthermore, initiatives are being developed to create alternative forms of preschool education in rural communities (e.g. see Komenski Memorial Foundation for Children Development, <http://www.frd.org.pl/>). Support has been established for the development of preschool education centres in rural communities, co-financed by ESF projects for 2007-13. Development of diversified forms of preschool education is also included in the government family policy draft programme announced in March of the current year. These initiatives, although very useful, seem to be insufficient in view of the delays in this area.

<sup>38</sup> This programme provided for:

- Reduction, in stages, of the compulsory education age during subsequent three years;
- Establishment of compulsory preschool education for children at the age of five;
- Organisation of assistance centres for children and their families in rural communities, on the pilot basis;
- Implementation of training project: 'Small child teacher';
- Early support of development of children with detected disabled condition or development disturbances.

<sup>39</sup> Data from the Urban Development Institute (2006).

<sup>40</sup> The act of 8 December 2006, Official Journal, 251/1844/2006.

<sup>41</sup> Central government financial support for local authorities which invest in social accommodation

### 3.3.3. Access to healthcare

The principal healthcare reform, which took place in 1999, introduced health insurance to replace the hitherto existing healthcare service financing from taxes. Its purpose was to rationalise the system and provide better access to health benefits, limiting increasing healthcare costs. In spite of the elapsed time and many corrections, not always delivering positive effects, the principal objectives of the reform have not been achieved. The system remains wasteful and inefficient. Expanding segments of private insurance, private providers and informal payments for more expedited and better service, deliver timely health services to a more affluent part of the society. Those who are not able to pay must wait. Access to specialist care is limited, and patients who live in rural areas must cover long distances to get to specialist physicians. The lack of doctors supervising over children at schools makes child health control dependent on the initiative and abilities of parents, who quite often do not understand the health risks children are exposed to. Although children and school students have access to healthcare regardless of whether their parents are covered by health insurance or not, actually poor access to healthcare too often causes late diagnosis and doctors' interventions. The 'Report of the Ombudsman for Children' reports a high number of claims related to difficulties in accessing doctors (Ombudsman for Children, 2005). The 'Governmental programme on family policy' plans or assumes legislative changes focusing on improving access to healthcare services for children.

## 3.4. Promote care and protection of children at risk

### 3.4.1. Disabled children

The difficult situation of disabled children in healthcare and educational systems is partially addressed in the already implemented or planned programmes.

Serious problems with diagnosis and rehabilitation of disabled children provoked the development and start-up of the Government's pilot programme 'Early, multi-specialist, comprehensive, coordinated and continuous help for children at risk of being disabled or disabled, and their families'<sup>42</sup>. This programme was implemented throughout the years 2005-07, and its objective was to implement and verify organisational concepts for early, multi-specialist, comprehensive and coordinated medical, rehabilitation and therapeutic help for disabled children at the age of 0-7 and their parents. The pilot programme was to provide basis for the development of legal and organisational framework for integrated, early intervention in the situation of small children who are disabled.

The problem of barriers in the access of disabled children to schools is addressed in the project of the operational programme 'Human capital' to be co-financed by ESF in the years 2007-13.

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<sup>42</sup> [http://www.men.gov.pl/ksztzspec/programy/pomoc\\_dziecku](http://www.men.gov.pl/ksztzspec/programy/pomoc_dziecku)

### 3.5. Care for children from dysfunctional families and children deprived of parental care

The system for caring for children deprived of parental care, inherited from the communist period, was based on large care institutions with low standards. As of 1998 this system has undergone changes consisting in:

- The development of unrelated foster families and family emergency homes;
- The transformation of large care and education establishments into smaller structures;
- Entrusting the childcare tasks, management of related establishments and centres to non-public entities, NGOs.

Although the direction of these changes is correct, their pace is not satisfactory. The uncertainty of financing the establishments and weakness of NGOs are delaying the transfer of tasks of institutional childcare to non-public entities. The lack of resources for development and investments of new, small establishments causes continued existence of a large number of places in large childcare institutions.

In the local environment, child risk situations are tolerated for too long, and cause negative and difficult to reverse effects. Experts generally agree on the need to strengthen and coordinate local activities directed at early detection of risks, and assistance to families, in particular the cooperation between the school, physicians, social workers and family courts.

Taking into consideration the weakness of the assistance system for children at risk of crisis situations in the family, the Ministry of Labour and Social Policy (MLSP) intends to develop a system which will enable the flow of information between all institutions accompanying the child in its development, assuming that this system will allow for a faster identification of the existing threats in the family. However, research showed that the lack of or the delayed reaction of public authorities to the critical situation in families results not from lack of information in the first place but of all from unclear competence of social institutions and social consent for practices, which break children rights. (Racław-Markowska, 2005; Hryniewicz, 2006). It may be expected that one of the reasons for delayed reaction is the general weakness of the *powiat* social assistance structures (*powiat* centres for family assistance) which are responsible for the activities related to critical family situations. An unquestionable weakness of the system, also indicated by the experts, is the underdevelopment of various family support services, such as counselling establishments, ambulatory assistance, aid in household management, as well as development of care and educational activities for children, combined with information and educational activities for parents. The lack of diversified assistance for families and support for parents through the development of diversified care services is also of importance (Kolankiewicz 2005).

#### 3.5.1. Counteracting family violence

The act of 29 July 2005 on counteracting family violence defines the tasks of public institutions for counteracting family violence and mitigating its effects. Among others, this law requires that the territorial administrations develop their programmes to counteract family violence and local social assistance centres to create adequate units responsible for preventing family violence. As a result

of this act, the 'National programme for counteracting family violence'<sup>43</sup>, adopted by the Government in 2006, was developed. It carries out, among others:

- activities aimed at increasing the level of social sensitivity to the phenomenon of family violence;
- training of services dealing with family violence;
- development of organisational and personnel resources to provide professional aid to home violence victims;
- reinforcement of protection for victims of violence.

The programme, coordinated by the MLSP, was in 2007 ready to be initiated.

### 3.5.2. *Prevention of juvenile violence*

There is lack of preventive measures for children and young people from dysfunctional families in Poland<sup>44</sup>. Unfortunately, the importance of preventive activities in stopping aggressive attitudes and crime among minors has also not been included in the draft of the programme co-financed by ESF in 2007-13.

In March 2007, the Government adopted the programme 'Zero tolerance for violence at school'<sup>45</sup>, which was developed as a result of a dramatic event at a school in Poland, interpreted by the educational authorities as a signal and indicator of Polish pupils being at risk of violence at school. The programme was criticised by many teacher communities and experts.

The criticism concerning the programme applied, among others, to the persuasive diagnosis of doubtful reliability regarding the reasons, range and type of aggression of young people. Attention is drawn to the fact that the 'accent in the programme was placed on legal and administrative instruments, while the role of other subjects in the programme is marginalised' (Kolbowska, 2007) and that 'the programme proposes first of all disciplining and restrictive activities. There is a lack of positive examples, actions oriented on elimination of the reasons of school pathologies, on prevention starting at the earliest years' (Dzierzgowska, 2007). In general, the programme is inadequately specific both in the area of objectives and of monitoring its effects.

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<sup>43</sup> See 'National programme of counteracting the family violence', Warsaw 2006.  
<http://www.mpips.gov.pl/index.php?gid=990>

<sup>44</sup> In 2005, the MLSP started implementation of the programme 'Community Centre, Work, Practice – social therapy in rural community', which provides support for rural *gminas* in creation of social therapy community centres and promotion of good practices, in the area of organisation of local cooperation regarding the operation of *gmina* community centres. This programme, however, has limited financial resources.

<sup>45</sup> Programme 'Zero tolerancji dla przemocy w szkole'.  
<http://www.edu.gov.pl>

## 4. Monitoring

Although NAP inclusion 2004-06 announced the creation of the monitoring system regarding poverty and social exclusion in Poland, this idea has not been implemented until now. A monitoring system in the area of child poverty and wellbeing in Poland, which would include basic problems such as poverty, healthcare, education, access to culture and leisure or housing, and the situation of children at risk is also lacking. There is a lack of ex ante mechanisms for evaluating the impact of regulations on poverty, family/households or children<sup>46</sup>. Every year, the Polish Ombudsman for Children presents the 'Report on observance of the children rights'. The report contains information about individual claims sent to the Ombudsman by parents or other persons but does not however include any analytical approach to describe the observance of children's rights.

NAP inclusion 2007-08 contains a design of the system for monitoring the progress in implementing activities related to priority 1: Support for families, however, its usefulness for monitoring the situation of children from the perspective of poverty and wellbeing is limited. The majority of the proposed indicators are correct from the point of view of monitoring the progress in implementation of specific activities provided for in NAP inclusion.<sup>47</sup> However, the indicators are mainly of an administrative nature and do not allow monitoring of children's situations. The set of indicators is rather simple (relating to the amount of funds spent for the implementation of specific programmes or the number of children covered by such programmes) and does not allow an evaluation of the programmes. The exception includes indicators, which relate to poverty and the programme for reconciling work and family responsibilities.<sup>48</sup> This means that only in these two areas the monitoring system collects information which could be used for evaluation.

There are no institutional arrangements for cooperation between different partners in the monitoring of NAP inclusion. The tool prepared for the purpose of monitoring NAP inclusion 2006-08 has an administrative character and is not even accessible to the public online.<sup>49</sup>

Existing resources, from statistical research conducted in a continuous way (public national statistics, continuous national research, Eurostat, international research) contain extensive information, which could be used to create the system for diagnosis and monitoring of child poverty and wellbeing at the national level<sup>50</sup>. The existing resources from national statistical research have been hitherto utilised to a small extent only in diagnosing children's situations. Some research centres and academic institutions continue research on poverty and exclusion, including child poverty and wellbeing. It would be useful to build a network of institutions (research and academic centres, the CSO, NGOs and representatives of administrations at various levels) to develop and coordinate the evaluation and monitoring of child poverty and

<sup>46</sup> The regulatory impact assessment covers only competition and entrepreneurship, public finance, labour market and situation of regions.

<sup>47</sup> Such as the development of social housing, development of social therapy activities in rural communities, development of day support establishments, development of the child nutrition programme, development of services for families and children, development of scholarships programme, development of civic offices network or income support programmes within the framework of family benefits.

<sup>48</sup> Number of children covered by various forms of institutional care, employment of women by number of children, dissemination of flexible forms of employment.

<sup>49</sup> Only as a part of *National Report on Social Protection and Social Inclusion*.

<sup>50</sup> However, a lot of relevant information, which would allow diagnosis of the situation of children in difficult conditions, as for instance disabled children, early school leavers, children exposed to dysfunction in the family, is missing. A serious problem is also constituted by the lack of tools to diagnose children's situations at local and regional level. The MLSP is working together with UNDP Poland on the development of tools for monitoring poverty and exclusion at local level.

wellbeing. The already completed research project 'Bieda' (Poverty) implemented by the Institute of Labour and Social Affairs, could be seen as an example of cooperation between research and academic centres and the CSO.

There are problems with horizontal and vertical coordination of the collection of administrative data for social policy monitoring. Many aspects of policy in respect to children are implemented by two levels of local self-governments (*gminas* and *poviats*). The national statistics system limits the possibility to collect administrative data concerning local policy if it is not financed from the central budget. The MLSP has the administrative databases on family benefits and social assistance. However, data from the existing administrative systems of data collection on the local level are incomplete and inaccurate. Moreover, they do not include, with some exceptions only, data concerning children as the beneficiaries of the benefits. There is a need to improve administration statistics as well as to enable central government to collect information from different levels of state administration. As shown by *Questionnaire on existing tools to monitor child poverty and social exclusion at national level*, the MLSP intends to improve and extend the system of data collection which applies to the social assistance and family benefits system. Another problem consists in the difficulties to coordinate activities in the field of collection and on making the administrative data, which appear between various policy sectors represented by various ministries, available.

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