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**Basic social services
in rural settlements –
Village and remote
homestead community
care-giving**

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1. Basic social services in rural settlements and their relevance for Slovenia

Today more than half of the whole Slovenian population lives in the countryside. According to the estimates of the European Foundation for Improvement of Living and Working Conditions (Anderson, 2004) the quality of life in rural Europe (referring to old and new EU member states and candidates) including Slovenia is generally high. However, the countryside in Slovenia is not a homogenous social living space. In spite of relative smallness of territory, when considering general living conditions the rural areas in Slovenia differ significantly among each other.

According to the typology of rural regions (Kovacic et. al., 2000) 15 percents of the countryside population lives in the suburbs which are well equipped with traffic and communal infrastructure and where all kinds of activities and services are easily accessible. The increase in concentration of population, working places and services characterize these rural areas. The second, predominant type in this typology refers to areas known as typical rural areas that are geographically very diverse (flat as well as hilly country) but demographically relatively stable. The majority (31 percents) of all rural dwellers live in those typical rural areas where the access to basic social institutions and services is relatively unproblematic due to the improved traffic infrastructure during the last fifteen years and increased investments in communal and individual living standard. But not all rural areas are doing so well; especially those remote areas situated on highlands, the Karst and at the borderlands. During the last four decades these areas, called depopulated rural areas, with 15 percents of the whole Slovenian population have experienced economic and social regression owing to intensive out migrations, particularly of younger generations who sought their better life and work opportunities in more developed urban areas. Many previously lively rural settlements have gradually lost their important social institutions and services (schools, theatres, libraries, shops, post offices, co-operatives, bus and railway connections...) and the quality of life of the remaining mainly aged residents have worsened significantly. From the above-described perspective the issue of providing basic social services in rural settlements designed to satisfy basic social needs of village and remote homestead community dwellers should to some extent be addressed and legitimised in Slovenia as well.



Moreover, the relevance of that kind of policy measures for Slovenia has been confirmed by some research referring to the extent and character of social exclusion in Slovenia. Namely, the general image of social exclusion in Slovenia (measured by social and space isolation, housing, educational, material and employment deprivation) has rather traditional features. It is concentrated among persons who live in small villages, the aged, the less educated, among farmers (in 38 percents of this professional category), the unemployed and among persons with no permanent work opportunities (Trbanc, 1996). Research on the farm family (Barbic, 1997) shows that in this respect farm population can be additionally vulnerable. Considerable proportion of farm population is burdened with loneliness, alcoholism and depression also owing to their own traditional life style (frequent poor investments in education and leisure activities in spite of eventual financial capabilities), decreased social status (frequently unsecured farm succession, weak chances of farm successors to form their own family) and isolation (living environment poorly equipped with services and infrastructure).

According to its constitution, Slovenia is a social welfare state. Basically it means that with its legislative and regulatory mechanisms grounded on fundamental social rights and principle of solidarity it ensures the flows of social transfers (resources and services) regarding health, employment, education, housing and social care from those who create them to those who need them.

Before the change of the socio-political system in 1989 the distribution of transfers had been nearly universalistic: theoretically, every citizen was entitled to resources and services he/she needed. Today, after the period known as transition from socialism to market economy, the flows of public transfers regulated by the state are increasingly means tested and more and more inclined towards fulfilment of some minimal level commonly agreed among social partners (government, parliament, trade unions, employers, employees, consumers). With the privatisation of social services the users are also stimulated to invest their own resources into voluntary insurance plans (e.g. health and pension insurance) and participate financially to receive the total amount and higher quality of services. Additionally, the variety of services to fulfil special needs of various social groups has increased as well as the number of their providers. Providers can be public institutions (on national and local level) and also private entrepreneurs and non-governmental organisations (Red Cross, Caritas and many others). From this point of view the whole system of social care has become more complex, less transparent and for this reason the need for



more management involvement and evaluations has increased. The exercise of control over the implementation of services as well as procedures of complaints is defined in accordance with the legislation (e.g. Social Act (2004), Act of Health Care (1997)). There has been an increase in the frequency of complaints especially those relating to health care services. However, the number is still relatively low (one complaint per 1000 inhabitants a year) (Poredos, 2003).

With the introduction of new socio-economical system Slovenia has faced some new, previously not existent social phenomena, among which the most important is the unemployment issue. In order to combat this and other market economy dysfunctions Slovenian government introduced a whole series of social and political measures in the frame of Action Plan against Poverty and Social Exclusion (2000). Already existent legislation concerning health, employment, social security, education and housing was supplemented with additional criteria and categories of socially vulnerable groups and individuals. The groups recognized as the most underprivileged were the following: certain groups of young people, certain groups of women, persons with long-term mental disorders, persons with different handicaps and their parents, the Roma of both gender, the elderly, persons without Slovenian citizenship and refugees. Different ministries and institutions responded to these issues within their competence, and various actions were launched throughout the whole territory of Slovenia. As the result the network of social services have expanded as well, most strongly in the area of care provision for the elderly (old peoples' homes, home care, day centres) (Ministry of Work, Family and Social Affairs, 2004).

Social services similar to those presented in the Hungarian case study are carried out in Slovenia on the basis of existent legislation and Action Plan. However, no special emphasis is given to small rural settlements and remote homestead. It could be said that according to existent policy framework everyone in Slovenia no matter where she/he lives is supposed to equally share all services entitled to her/him.

Here, at this point we enter the question of possible transferability of Hungarian case into Slovenian practices.



2. Potential transferability of the Hungarian local social service model to Slovenia

In Slovenia similarly as in Hungary the local communities (municipalities) are mainly responsible for providing all necessary infrastructure and human resources (skilled workers, specialists) for carrying out basic services, for instance: pre-school and primary education, health care, family support, care for the elderly and disabled. Selection of suitable providers is mainly performed with calls for application. It is not seldom that for this purpose a municipality invests public capital into private organisations and enterprises. Providers have to be professionally qualified and with accomplished at least secondary level of education. Professionals who hold university degree and got the licence from Social Chamber supervise their work. From that point of view the Hungarian model could be transferred to Slovenian practice.

An important question here is how municipalities with their available budget manage to fulfil all these tasks, especially those small and demographically the most vulnerable ones that are frequently in shortage of resources. Namely, the normative of carrying out social services is the same irrespective of the size of municipality and its available budget and the share of resources necessary for this purpose is therefore much higher. It happens that owing to lack of resources the family members and neighbours take over the responsibilities for satisfying basic social needs.

The first and the most important prerequisite of enabling any kind of transfer of the local service model to Slovenia, similar to that in Hungary, would be a broader social recognition that rural communities need that kind of special services. Analyses focused towards the socially excluded are rare, especially those that could give an overview into the situation of demographically vulnerable rural areas. The research projects performed so far, like Social and Economic Exclusion of Persons with Difficulties to get Employed and Non-active Persons (Trbanc et al, 2003) financed by the Ministry of Labour, Family and Social Affairs have studied social exclusion on aggregate level. At the Ministry of Agriculture, Forestry and Food where there is the Department for Rural Development the financing of such research is not available neither it is possible at the Governmental Agency for Regional Development. It seems that nobody wants to deal with the problems of the socially excluded rural dwellers. Therefore, this matter would urgently need to be attended to by the co-operation among these three governmental sectors.



3. Important questions debated about the local service model in Slovenia

However, lack of attention of policy makers to address the needs of rural dwellers regarding basic social services, as a socially important issue does not mean that this topic has not yet been publicly discussed and that no actions have been taking place.

The social relief service (SRS) on farms is an important aspect of services (not mentioned in Hungarian case) that the dwellers on remote homestead communities nowadays increasingly need and which contributes to their quality of life. SRS is professional help provided when an unexpected manpower cut-out, accident or death happen on a farm. In the past the substitution of labour force on farms was not a problem, but today with the reduction of the number of farm household members and decline in mutual help among neighbouring farms it may cause certain difficulties. The actuality and possible ways of introducing that kind of labour and social service was discussed mainly by the experts from Farm Extension Services (Dolensek, Jeric 1997, Papez, 2002, Gramc 2004) who traditionally counsel farm families regarding economic and technological aspect of their activities. In that discussion not only economic (the substitute of missing labour force) but also social aspects of SRS were stressed. Namely, carrying out SRS should not be limited only to assistance when an accident or illness happens on a farm but also when the farm family wants to spend their holidays out of home for a while or when a farm woman wishes to use a paternity leave. Seldom, owing to the lack of sufficient labour force on the farm, can a woman afford to take such an advantage entitled to her by the law. The introduction of social relief service (SRS) would contribute to better quality of relationships in farm households, e.g. to greater probability of successors to find a wife, what is a great problem on Slovenian farms today and an important cause of social exclusion as mentioned before. A possible way of SRS introduction in Slovenia (if legislation would make it possible) could be in the frame of supplementary activities (with agriculture-related activities and services) or social entrepreneurship. The functioning of SRS has already been successfully tested in the Savinja Valley by mechanical rings that are the associations of farmers who exchange agricultural mechanisation on the basis of reciprocity.

To sum up, there are some indications that the model of basic social needs would be relevant to Slovenia and policy makers should consider the importance of its transferability.



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