



social inclusion

PEER REVIEW AND ASSESSMENT IN SOCIAL INCLUSION

www.peer-review-social-inclusion.net

United Kingdom 2006

Sure Start

Comment Paper, Poland



On behalf of
European Commission
DG Employment, Social Affairs and Equal Opportunities



Sure Start Statements and Comments

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Situation in Poland: Conditions for supporting families and children's development to ensure equal start in life and minimize effects of poverty.

Based on available analyses, the following factors are considered most significant for the development of poverty and marginalization of particular groups in Poland: unemployment, chronic illness or disability, having more than 3 children (large families), single parenting, poor education, and living in rural (agricultural) areas, in small towns or in poorly developed regions.

Research has documented substantial differences in living standard between rural and urban areas and across regions in Poland. Lower living standard is typical for rural areas and – in terms of regions – for the so called “Eastern wall”, i.e. regions characterized by low levels of urbanization and industrialization and by underdeveloped infrastructure. Research shows that to a large extent poverty affects young people. In 2003 nearly half of Poles living in poverty were under 19, and every third of them was under 14. Sixty percent of large families (i.e., families with three or more children) were threatened with poverty in 2002 (63% of families with 3 children and about 90% with 4 or more children live under the subsistence level). In the same year more than 23% of children under 15 and 20% of young people (16-24) lived in poverty.

Poverty is strongly correlated with the availability of education, especially preschool (or kindergarten) education. In Poland the rate of participation in preschool education is still relatively low. In 2002/2003 it reached slightly above 50% in general, but for children aged 3–5 (excluding the „zero” grade, i.e. obligatory one-year preparation for primary school) it was only 36.2%. Data from the Central Statistical Office (2003) show that the rate of participation in preschool programs varies across country regions – from 20% to 53% – and between rural and urban areas: 16.7% and 52.2%, respectively.

The major Polish laws designed to help to resolve the problems related to poverty and marginalization include the Social Welfare Act (of March 12, 2004) and the Social Employment Act (of June 13, 2003). The main goal of the Polish social welfare system is to „prevent difficulties through activities aimed at helping individuals and families to overcome difficult life situations they are unable to cope with on their own, using their own rights, resources, and capabilities”. The Social Employment Act, intended by the legislators to be the main instrument in the combat against marginalization, assumes that people who – for various reasons – have problems with adaptation, should be provided with professional support and opportunities to use programs facilitating social reintegration, run by Social Integration Centres.

The most important document regulating the policy of preventing social exclusion in Poland is the National Strategy of Social Integration, adopted as a result of Poland's accession to the European Social Inclusion Process. The Strategy gives priority to the following goals related to the issues discussed in the reviewed project:

- increasing the rate of children participating in preschool education (up to 60% in rural areas by 2010);
- compensating deficits in children's intellectual development through promoting remedial classes (implementing remedial education in 100% of schools by 2010);
- providing a public health program for women and children (up to 100% by 2010);
- increasing the number of people provided with community assistance services;
- raising local authorities' sensitivity to the goals of the strategies of preventing social exclusion of high-risk groups (such as the homeless, people in conflict with the law, women, or the Romas) in the years 2004-2006. Is the National Action Plan for Social Inclusion, developed by the Ministry of Labour and Social Policy.

It should be highlighted that the strategic priorities of the National Action Plan involve educational, social and health-care activities aimed at preventing exclusion and supporting equal opportunities through initiatives such as increasing children's and young people's participation in education, supporting the poorest families and providing their children with better access to education, educating children and young people with disabilities, supporting families in their performance of nurturing and child-rearing functions, developing new forms of family-based foster care, improving the availability of health care services, promoting public health, and conducting prevention programs addressed to families at risk of pathology, e.g. organizing socio-therapeutic day-care centers in rural and mixed (rural and urban) communities.

National action Plan for Children 2004-2012, Poland for Children is another significant document. The Plan functions as strategy and defines programs and activities to be undertaken for the benefit of children. In order to ensure adequate health status, quality education, suitable standards of living in families, and effective protection against abuse, the Plan defines goals and directions in four different areas:

1. PROMOTING HEALTHY LIFE STYLES so that all children may live in healthy environments, providing them with the highest level of health care, with a special emphasis on prevention and protection from epidemic diseases.
2. Providing high-quality education so that all children – including the poorest ones and those in difficult life situations – have equal access to quality education.
- 3 Assistance and support from the family so that all children may grow up in nurturing environments, with the primacy of family settings and a focus on supporting and educational tasks; and so that children reared by the families with economic or social difficulties are supported financially to prevent poverty (Art. 48, Art. 71 and Art. 72 of the Constitution of the Republic of Poland).

4. Protecting children against molesting, exploitation and abuse so that all children are protected against any forms of abuse and exploitation. Child abuse violates fundamental human rights and is deemed comparable to torture, maltreatment or humiliation (Art.40, Art. 41, art.71, Art 72 of the Constitution of the Republic of Poland).

Results of some researches made in Poland suggest that certain integration activities are ineffective. Research conducted among welfare recipients shows that those who had used such services for the longest time, were in the poorest situation, which suggests that social welfare is not an effective tool of reducing exclusion. Analyses of integration programs addressed to individuals who are socially excluded or at risk of exclusion from the modern life style suggest that such programs are unlikely to be successful. Re-integration programs are ineffective in case of people who have contact a long time ago. It's thus necessary to develop alternative programs with other ways of reintegration into communities.

Citing sources such as the national Social Diagnosis study and data from the Central Statistical Office, the authors of the National Plan for Children (*Narodowy Plan na Rzecz Dzieci*, NPND) consider the following problems as the most important and urgent ones: insufficient availability of health care services to pregnant women; limited availability of health care services adjusted to children's needs; insufficient care system for mothers and children; limited availability of extracurricular activities for children and youth; poor financial situation of families with children under 14.

Sure Start in Poland

Strategically, the goals of the Sure Start program are convergent with the assumptions of the Polish social policy in the area of preventing social exclusion among children. However, there are differences in the ways of implementing the specific objectives within this strategy.

In Poland the basic administrative entity bearing statutory responsibility for combating poverty and social exclusion is a *powiat* or a county (the second level of the Polish administrative division; being a part of a province or a voivodship, it comprises several neighbouring municipalities or communes). As in the UK Sure Start program, the authors of the Polish National Plan for Children assume that it is the local community – provided by the government with adequate financial means – which can be most effective in preventing poverty and social exclusion, especially with regard to the youngest members of the society.

Similarly to the Sure Start program, the National Plan for Children does not assume developing detailed instructions for local communities, but rather providing them with general guidelines that should be followed taking into account the specific local milieu and conditions.

However, contrary to the UK program, the Polish strategy does not include forming a universal institution which would provide comprehensive support for families and children, such as the Children's Centre. In Poland various forms of support will continue to be provided by various institutions reporting to a range of ministries (from the Ministry of Health to the Ministry of Education).

According to the authors of the National Plan for Children, the basic institution responsible for supporting children is the Psychological and Educational Counselling Centre (*Poradnia Psychologiczno-Pedagogiczna*, PPP). Psychological and Educational Counselling Centres are network institutions financed by local governments within state budget funds, operating in each *powiat* or county. Psychological and Educational Counselling Centres are educational institutions reporting to the Ministry of Education. So far psychologists and educational counsellors employed in Psychological and Educational Counselling Centres have dealt primarily with diagnosis and treatment of speech impediments as well as diagnosis and re-education of children and youth with school problems. However, Psychological and Educational Counselling Centres have a much broader competence, including areas such as providing psychological treatment and support for children and parents alike, as well as professional counselling for children with special needs. Moreover, the National Plan for Children assumes that by 2012 Psychological and Educational Counselling Centres will have become responsible for ensuring that all children have an equal start in life through early diagnosis and re-education, as well as through promoting education and supporting the youngest citizens' activity.

Working with the family – i.e., supporting unemployed parents in seeking jobs, as well as providing advice on successful parenting – is also a task of Social Service Centres (*Osrodek Pomocy Społecznej*, OPS). Like Psychological and Educational Counselling Centres, Social Service Centres are network institutions operating in each Polish county. Social workers employed in Social Service Centres have a broad scope of competence, including home visits and social work with families and children. However, as follows from recent analyses, at the moment Social Service Centres focus on distributing financial support provided for families in a form of a variety of welfare benefits. Moreover, the practice shows that social workers are so heavily burdened with the tasks related to benefit distribution that they are hardly able to perform any social work with families.

One important initiative helping to support the development of the youngest children is a program financed by the Structural Funds, which involves launching alternative preschool educational centres in rural communities, especially in the areas of former state-owned farms, where no other child care services are available. Observed for several years, the negative phenomenon of continuous decline in the number of kindergartens has affected all Polish regions. In the past 10 years the number of kindergartens in Poland has dropped by 30%. In the years 1990-1991 alone more than 1300 such preschool centres were closed down. At the same time, the proportion of kindergartens operating in rural areas declined from 43% in 1991 to 37% in 2000.

The assumptions of the Sure Start program and the National Plan for Children are quite convergent. Both documents emphasize such priorities as supporting the development of the youngest children through providing access to education and extracurricular activities, and supporting parents in successful fulfilment of their social roles. Just as in the UK, policy makers in Poland are aware of the need to cooperate with parents to ensure a better start in life for the youngest generation. In the Polish strategy it has been reflected in the idea of building a platform between teachers/educators and parents. The authors of the Polish strategy, just as the authors of the Sure Start program, emphasize the need to support young, unemployed parents in the labour market. They propose activities such as harmonizing local educational services with the requirements of the local labour market, providing programmes aimed at structural unemployment reduction, social and supported employment, and refunding child care costs for unemployed single

parents with children under 7, who go to work, start professional training or engage in any other form of job activation.

The fundamental difficulty in transferring the UK experience to the Polish reality – noticed also by British authors who have reviewed the Sure Start programme – is related to the macroeconomic disparity between Poland and the UK. With its 18% unemployment rate and limited budget means for social services, Poland is unable to finance a project similar to Sure Start. It seems that the right direction of changes should involve reforming the existing institutions. It is worth considering the possibility that the existing Psychological and Educational Counselling Centres (PPPs) could perform the function of Children's Centres, the more so – as shown by recent analyses – that Poland does not have an institution where parents could seek comprehensive support for themselves and their children. To reduce parents' sense of confusion and their feeling of being lost in a network of aid centres, Polish NGOs have established the institution of "victim advocate", whose task in the Polish system is to help parents in identifying the available local support resources. (Although the "victim advocate" programme is addressed to parents of child victims of abuse, the practice shows that such an institution would be beneficial for a majority of parents, as research findings suggest that more than 80% of parents with children aged 0-10 do not know where to seek educational or psychological support for their children in their local community, apart from commercial services).

Similarly to the UK programme, it is also necessary to support institutions working in local communities characterized by high levels of unemployment and other risk factors related to social exclusion. Another element worth reproducing in the Polish reality is the integration of educational and health care services. The system of preventive medical examinations and selected health care services (such as dental care), which used to be available in Polish schools, has ceased to exist due to high cost. No other child-targeted institution has been established to replace the system. Analyses of the health status of early school age children document an urgent need to provide children with comprehensive medical care.