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An Existing Alternative: Sure Start Programme Statements and Comments

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A standard phrase was used for many years under the former regime in Hungary: “Young people, the future is yours,” to which politicians addressing the youth would often add the resigned comment that “interesting that they promised the same thing to us!” Chosen as the theme of this seminar, the Sure Start Programme brings change within arm’s reach and a better present for children and their families as well as going a long way towards breaking the cycle of deprivation. One of the most important aspects of the English experience is that local programmes are built on local communities with the active participation of affected families, require the close participation of a wide circle of experts and are successfully implemented with close cooperation.

1. Child welfare in policy aimed at reducing social exclusion

Modern, institutional social services have been available in Hungary since 1993. The Family Support Services have been in operation since this time. The Child Welfare Services began operating four years later. Nursery care has been established in Hungary for a hundred years and provides a wide range of institutional day-care for children. The health visitor network has been running for nearly one hundred years and is responsible for the physical, mental, intellectual and emotional development of unborn and growing children. Hungary is unique in Europe in ensuring a mother is able to raise her child at home with modest financial support and maintaining her job until her child reaches the age of 3 years. (GYES, GYED – see *glossary*.) However, child poverty is an existing problem in our country.

The worst affected groups

- may be linked to demographic factors, e.g. large number of children in one family, single parents;
- there may be contributing factors due to ethnicity. Children and families belonging to the Roma or Gypsy minority in Hungary make up 50% of those living in deep poverty or (taken from another perspective) the majority (70-80%) of Roma living in Hungary live in poverty in segregated communities or parts of communities;
- may be *those with special needs living mental or physical disability*;
- may be living with serious *geographical* disadvantages in dead-end villages, segregated parts of communities or whole segregated communities,
- may be living in institutions where conditions are rundown or out-of-date.

The government has declared its aim to reduce poverty and primarily child poverty. This aim is supported by the National Programme Against Child Poverty, (<http://www.gyerekszegenyseg.hu/>), under consultation at the moment, that provides the element dealing with the first three years of a long-term concept. Its fundamental aim is to perceptibly reduce the number and proportion of children living in poverty and to significantly improve the living conditions of children living in deep poverty.

The perceptible reduction of the spread of child poverty (1% per year) and the significant reduction of deep poverty appears to be achievable with the inclusion of significant EU funding available from 2007. The breaking of processes resulting in poverty and ghettoisation, the improvement of the quality and operational levels of institutions and the localisation of the practice of cooperation between stakeholders threatens to be more difficult.

The tasks are closely linked, built on one another and there is no great divide between the short term and the long term. The programme covers a three-year period and contains urgent tasks and continually prepares long-term processes (2006-2008). This is to be followed by a *generation* programme which will span a period of 25 years (2009-2035). The two programmes are partly covered by a medium-term component programme, the II. National Development Plan (otherwise known as the “*Programme for a New Hungary*”) which is timed for the same period (2007-2013), thus ensuring that European funding will enable the greatest possible improvement of children’s interests. All these programmes aim to include the widest possible social participation, support and understanding. The background to this is partly supported by the prominent and complex programme referred to as “*Investment in our Future*” which also investigates the effects of the planned improvements in the growth of opportunities for children and young people as a horizontal aspect.

2 The wider interdependencies of child poverty

Poverty, and within it child poverty, is a complex phenomenon. A problem is not only posed by restricted income but also by the fact that many other conditions that determine a child’s current and future welfare do not properly materialise. The question is whether or not the children’s parents have their place in society through their work; how much appreciation their parents or they themselves receive and whether they respect this appreciation; what accommodation and environments they live in; what education and training is offered to them by institutions; the quality of their diet and what healthcare and medical care they receive. Deficiencies in these areas impede the physical and psycho-social development of children, make it impossible for them to have a balanced and happy childhood, hinder the effectiveness of children’s rights as described by law and restrict their chances of mobility.

This is why the reduction of child poverty is not simply a socio-political question. The strategy to combat child poverty needs to recognise the mutual success of these areas: law, employment, income policy, education and training, housing, health and social services. The problems are complex and require complex handling. This is equivalent to the construction of policies into a complex system, the application of tools into a system, versatile cooperation and the inspection and capacity monitoring of processes.

Today's situation is the consequence of long processes. Stopping and reversing these processes requires a great deal of time.

3. Key Processes

In order to achieve the aims, those intervention territories and intervention methods need to be defined that are the most effective and that guarantee the most direct return. Experts are agreed that early ability recognition and early development are key to a child's future. The **Sure Start Programme**, adopted from England, appears to provide an effective tool. This programme provides complex and continuous community support to children and families right from pregnancy to entering school.

The programme has begun and, for the time being, is being implemented in a number of settlements that are in the most disadvantaged state. It is hoped that the expansion of funding will see this extend and local programmes linked to the funding will grow to become a countrywide system.

3.1 Experiences in Hungary

We chose to define the launch of the programme as service development and so we do not apply the practice of project planning although we use much of the knowledge and many of the techniques in the planning that are used in project development and project work.

The local introduction of the Sure Start Programme can be seen as an innovative process as we are introducing a new service to the known target group (children aged 0-6 years and their families in the given communities) with the development of partly new methods and new work processes to better enable the effective handling of the problems of those concerned. Those introducing the programme (local mayor, councillor and / or professionals working in social services, child welfare health, education and volunteers from the local community) undertake to implement this opportunity creating programme. They do this based on experience gained in both England and Hungary, with their own resources, with the mobilisation of innovative capabilities and the use of external professional support.

3.1.1 *The introduction of the programme*

Preparation for the adoption of the programme, running successfully in the UK for several years, commenced in 2003 with the personal support of Nigel **Thorpe**, the former British Ambassador to Budapest. Pilot programmes began in various towns and villages across the country in the framework of this process with financing provided by the Ministry of Youth, Family, Social Affairs and Equal Opportunities (ICSSZEM.) The first phase saw 400 families and 700 children under the age of six receive support with the cooperation of many participants within the institution network.

3.1.2 *Experience to date*

The fundamental principles of the programme are the following: reducing early disadvantages, the cooperation of professionals and the participating families, the distribution of tasks between various sectors and branches, ensuring services that are accessible to anyone and the coordina-

tion of existing services. These principles and the aims of the programme are accepted unreservedly by the participating professionals in all communities and the forms and frameworks of implementation show a great deal of diversity. The problems and living conditions of the inhabitants of the 12 communities that took part in the pilot programme represent all the social disadvantages which virtually all citizens with children under the age of 6 years may face with.

One important aspect succeeded in all the pilot programme locations. The “Sure Start Programme” does not work as a separate service but cooperates with other established social, health and educational institutions operating in the area. It deliberately sought out a link where a possibility existed with nurseries – as in Józsefváros (Budapest), with a kindergarten – as in Csurgó and Ózd, and with civil organisations supporting the development of children and families. Agreements were reached with these institutions for them to provide experts and professional support to help ensure the effective operation of the programme.

4. Values and doubts

Although the communities vary greatly in terms of number of inhabitants, economic conditions and provision of institutions, there is something common in them all that justified the local, experimental launch of the Sure Start Programme: the increasing threat of deprivation. It is of no importance to children or their parents whether the reason for social exclusion is due to institutions, places of work, educational levels, lack of material wealth spanning generations or geographical or social isolation – breaking of the deprivation cycle appears to be just as impossible in a new housing estate as it does in a border village.

This is the reason why the planning of the Sure Start Programme saw such special emphasis placed on a service starting up based heavily on local requirements and founded on those results and resources that were previously available on a local level. The first Sure Start Houses opened in very varied organisational forms according to the particular local needs and the state of the institutions created to serve them.

Familiarisation with the characteristic aspects of this programme and the balancing of the adaptation may lead to numerous dilemmas for those involved. Below is a list of the various challenges and more pertinent questions to which answers should be sought before decisions are made and a consensus is reached. Fundamental approaches and values require clarification, the necessary resources need to be taken into account and professional motivations and cooperative abilities need to be identified.

- Will we be capable of making the effort to ensure that we more determinedly offer our services in order to improve the life opportunities of those living in especially disadvantaged parts of our community and of families who are traditionally hard to reach, to make them better known and implement new methods to encourage their use?
- Are we dedicated to develop the kind of services that are not stigmatising, are culturally appropriate, react sensitively to changing needs and that are appropriate for the type(s) of families for whom the use of existing services is problematic?

- Does dedication to equal opportunities form a part of our professional value system? Does anti-discrimination and a responsibility for our clients play a vital part of our everyday practice? Are we capable of cooperation in a partner relationship with families that are struggling with multiple disadvantages?
- Can we form the type of professional team in which various professionals (social worker, social educator, health visitor, doctor, teacher, social administrator, etc.) as equal partners and work alongside one another while recognising and respecting each other's competencies? Are the professionals involved capable of adopting further capacity into the programme? Are we prepared to coordinate the current services offered to young children and their families as well as their organisation into a whole to make them more easily accessible and usable?
- Are we open to enabling the true participation of volunteers and the families using our services in the formation and operation of our programme?
- Are there venues in our community that are appropriate for services to be provided three days a week – club operation? Are we able to provide an appropriate, cheerful, friendly physical environment for this service with the mobilisation of local resources?
- Do we take on responsibility for the development of the self-evaluation system and its implementation in order to ensure that we preserve and improve the quality of our service with the possible introduction of new developments?
- Can we find two club leaders in our community who have at least qualifications equivalent to A-level and who have gained experience in raising their own children, are recognised members of the community and are willing to work in the team as well as be available to oversee the club during opening hours as well as organise programmes?
- Do we want to link to the programme's national professional network? Are we prepared to take part in the network's training and professional programmes and to share our experiences with other programmes?

5. The connection between the National Action Plan on Social Inclusion and the Sure Start Programme

The National Action Plan adopted this programme in 2004. National implementation began this year after the analysis of results attained in a two-year trial. Launching this programme locally requires registration in the Sure Start Programme. 77 councils, institutions and civil organisations declared their intention to launch the Sure Start Programme locally in the first period for handing in declarations of intent that closed on March 31st 2006. The majority of declarations were sent in from disadvantaged regions. These declarations can be sent in throughout the period leading up to September 30th 2006 to county coordination offices of the National Equal Opportunities Network.

The introduction and long-term sustainability of the Sure Start Programme require the development of a professional support system, the continuous professional support of local programmes, the construction and methodological development of monitoring, evaluation and training systems to ensure compliance with the professional requirements of local Sure Start Programmes in the interest of the successful attainment of goals set.

The task for the national professional working group is to develop professional and methodological practices, collate methodological support material as well as develop and monitor self-evaluation at a local level. The development of the self-evaluation system takes place at regional level with the participation by programme representatives and we also plan site visits during the implementation process. Monitoring ensures the data required for further development and this is carried out by experts independent of the programmes. The monitoring and evaluation aspects are processed according to the experiences gained during the pilot programme with the participation of the representatives of the new programmes.

Glossary

- **Childcare allowance** (gyermekgondozási segély GYES): universal entitlement, paid until the child reaches the age of three, the monthly payment is equal to the min. pension receivable in a person's own right. May also establish or extend this period, especially in case of difficult subsistence of the family, or in consideration of the illness or severe disability of the child; in the latter case the benefit may be paid until the child reaches 8 years of age.
- **Childcare fee** (gyermekgondozási díj GYED): for people covered by social security, paid after the maternity-confinement benefit until the 2nd birthday of the child. The amount is calculated on the basis of 70% of the daily average earnings.
- **Child raising support** (gyereknevelési támogatás -GYET): universal entitlement for a parent with 3 or more children in the household, if the youngest is between the ages of 3 and 8. The amount is also equal to the min. pension receivable in a person's own right. Part time (4 hrs/day) working is allowed. The child raising support may be paid to parents, foster parents or guardians, who raise three or more children in their households, and the support is available between the 3rd and 8th birthdays of the youngest child. In 2006 it is 25.800 HUF, (€ ~100).
- **Health visitor** - Tasks handled by the health visitor include protection of women, care-giving to pregnant women, to children aged 0-18, and to families and the handling of public health tasks. Visits to families, and ongoing care for pregnant women and families with children in the home make up a substantial portion of health visitors work. The registry maintained by the health visitors guarantees that all children in the area receive prophylactic care and all mandatory inoculations in a timely manner. The Health Act of 1997 guaranteed the presence of health visitors in all settlements throughout the country within the primary care framework. Health visitors' services are one of Hungary's good practise in NAP/inc 2004-2006.

References

<http://www.gyerekszegenyseg.hu>, **Learning from Families**. Policies and Practices to Combat Social Exclusion in Families with Young Children in Europe. Hungarian National Report, Prepared for Home-Start Hungary, by Reka **Hegedűs** and Beata **David**, Ph.D. 2005.