Investing in children’s services, improving outcomes.
A study of the organisation and implementation of children’s services in response to European recommendations

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Introduction

The aim of this research study, which took place between March 2013 and March 2016, was to analyse how the key principles on access to quality services of the European Commission’s Recommendation ‘Investing in children, breaking the cycle of disadvantage’ were implemented in 14 European countries, including Poland. This exercise helped to identify strengths and gaps and suggest proposals for improvement in line with the European Recommendation. The result of this three year project was the publication of the study ‘Investing in children’s services, improving outcomes’ in May 2016 with a cross-country analysis, 14 country profiles and recommendations regarding how children’s services should be developed to be aligned with the European Commission’s Recommendation. The study aimed to map and assess the current state of play in regards to the implementation of services by the agencies responsible for children’s wellbeing and to document how these findings could be used in policy-making and strategic planning processes in children’s services.

General review

According to the Europe 2020 Strategy, there is a need to develop integrated strategies to improve children’s opportunities alongside the three pillars of the European Commission’s Recommendation ‘Investing in children’: access to resources, access to quality services and child participation (European Commission 2013; European Social Network 2013).
With the aim to contribute to the implementation of the European Recommendation, we mapped the organisation and implementation of children’s services in 14 countries, including Poland. The findings highlighted in this paper are part of a comparative study that has been conducted in 14 European countries. The exclusion among children and adolescents are complex matters that should not be addressed uni-dimensionally from an economic perspective, but rather through a comprehensive approach including financial support, access to work and reconciliation of work and family life; the participation of children in policies affecting them and quality of children’s services (early childcare, healthcare, education, housing and alternative care) (European Union 2014; Janta 2014).

In the last few years, extensive literature has been produced on the effects of the economic crisis, family changes and family policy on child poverty and the well-being of children in Europe (Bradshaw, Richardson 2009; Bradshaw 2014). This growing scientific and government interest has led to several studies and reports by international organisations, which measure the objective and subjective dimensions of children’s wellbeing (UNICEF 2013; OECD 2009; European Commission 2013; Tarki 2010). For instance, there are well-known papers on the positive impact which early childhood education has on the reduction of education inequality and improvement of children’s skills and competences in the various stages of the life cycle (Heckman 2004; 2006; 2011; Esping Andersen et al. 2011).

However, Polish expenditure on family/child-related benefits is low compared to other EU countries. In 2012, it amounted to 0.8% of GDP compared to the EU average of 2.4% (European Commission 2016a). In January 2016, various tools were introduced to improve families’ income. The ‘Act on state aid for raising children’ (Sejm Rzeczypospolitej Polskiej 2016) provides a monthly childcare benefit of approx. EUR 115 per child under 18 years of age. A new benefit for families called ‘Rodzina 500 plus’ (Ministerstwo Rodziny, Pracy i Polityki Społecznej 2016), introduced on 1 April 2016, consists of a monthly allowance of 500 Polish zloty (approximately EUR 116), which is provided for the second and any subsequent child in the family. The benefit is also available for the first child, if the family income per person is below EUR 184 or EUR 276 and the child has a disability.

These benefits are intended to reduce child poverty, especially in families with more than one child. The threshold and level of family benefits also increased on 1 January 2016. However, one of the main criticism of ‘Rodzina 500 plus’ is the potential negative impact that the benefit may have on maternal employment. Moreover, it feels as if this measure is not part of a comprehensive package of measures for children and families, particularly as other developments in this field seem to go in the wrong direction. For example, the government decided to abolish the free preschool year and to raise the age of compulsory schooling to 7 (Doyen, Lara Montero 2016). This is concerning in a country where, according to Eurostat and European Commission’s data, just four per cent of children under three attended formal childcare in 2013 (European Commission 2016b), though the Polish
government raised this percentage to an 8% estimate in its 2016 National Reform Programme¹ (Council of Ministers 2016).

Various policy developments have taken place over the past years to improve child participation in early childcare. From 2011, the offer of childcare arrangements diversified and the number of childcare facilities increased from 571 in 2011 to 2,910 in 2015. The Ministry of Family, Labour and Social Policy launched the ‘Toddler’ programme to incentivise local authorities to establish childcare facilities. In July 2013, some rules were modified, mainly the reduction of the municipality’s own contribution from 50% to 20% of the establishment and operational costs. Funds earmarked for the development of the programme grew significantly in 2011–2015: from 15.2 million PLN to 151 million PLN (from around €3.4 million to €34 million) (European Commission 2016a). In 2016, the government confirmed that it would continue implementing the ‘Toddler’ programme (Council of Ministers, Republic of Poland ‘National Reform Programme’ 2016).

The lack of adequate income support in Poland means that a large proportion of children are at risk of poverty. According to the European Commission, the coordination of family benefits with social assistance benefits – in terms of governance, benefit indexation and eligibility rules – is weak. The risk of poverty or social exclusion among children stood at nearly 28% in 2014, whereas the risk of poverty of children living in jobless households was as high as 78.5%, which is well above the European average (European Commission 2016b). Families rather than children seem to focus the attention of policy makers, which influences both strategies and actual measures taken and makes them strongly family-oriented (European Commission 2014).

The Ombudsman for Children’s Rights has the responsibility to observe the respect for children’s rights but children’s rights are not mainstreamed and do not have any visible impact on the overall design of child related policies. The 2014 National Reform Programme for Poland set a number of child-related tasks and measures, focusing on the reconciliation of work and family life (through the development of childcare and parental leave) and supporting children at risk (strengthening foster (care) families for children who cannot remain with their biological families, implementing scholarship and food programmes).

The 2016 National Reform Programme, which was produced in June 2016 under a new government, responded to Commission’s concerns on plans to abolishing the free pre-school year, raising compulsory schooling age and the need to reinforce early childcare. In its 2016 National Reform Programme, the Polish government stated that policy in pre-school education was not subject to changes, and changes to compulsory education would have no impact on participation in pre-school

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¹ The National Reform Programme is the document put forward by national governments in response to the European Commission’s assessment of the situation in each EU country in the framework of the European Semester (the annual cycle of policy coordination between the European Commission and national governments).
education. The Polish government also committed to the continuation of the ‘Toddler’ programme and the obligation for children aged 6 to undergo a year-long pre-school preparation in the context of the reinstatement of compulsory education to the age of 7. The Polish government also confirmed that children aged four and five had the right to pre-school education and that since 1 September 2017 this right would be extended to children aged three and early childcare places were to be provided by the municipalities (Council of Ministers 2016). However, the 2016 National Reform Programme does not refer to any developments in the field of community-based services for children. It has also been argued that further attention should be paid to children’s needs rather than just families, and that children’s rights and their well-being should be explicitly taken into account in policy design and development (European Commission 2014).

Numerous studies demonstrate that investing in quality services for children contributes both to increasing society’s social capital and mitigating inequalities in the first stage of the life cycle; inequalities that are otherwise likely to be reproduced in the transition to adult life (Conti and Heckman 2012; Heckman 2011; Rolnick and Grunewald 2003). There is no systematic data detailing the services provided for children by the various administrations with responsibility for children’s services in Poland nor their impact on fighting inequality and social exclusion of children. The challenge remains to improve knowledge in this area according to the guidelines of the European Commission’s Recommendation and findings of several reports on social services for children (Lara Montero 2016).

**Research method and process**

Empirical work involved the development of case studies, which mapped the current state of play in regards to the organisation and implementation of children’s services in the various countries, including Poland. Case study research calls for selecting a few examples of the phenomenon to be studied and then investigate intensively the characteristics of those examples (Yin 2009). According to Yin (1994), case study research is particularly well suited to investigating and monitoring public policies, which was the main focus of the study. Yin (1993) and Tellis (1997) also emphasise that the evaluative application of this methodology is useful to assess the effectiveness of social policies.

We used the exploratory case (Whyte 1993), which describes the state of a particular policy, as we did with the state of play of children’s services in 14 countries, including Poland. The study used an exploratory case study design and relied on qualitative methods, including the answers to open questionnaires provided by senior civil servants at key child welfare agencies, children’s services directors and providers.
The European Commission’s Recommendation ‘Investing in children: breaking the cycle of disadvantage’, which was published on 20 February 2013, presents Member States with policy guidance on multidimensional children’s policies around three pillars: access to resources, access to quality services and child participation. The Recommendation outlines access to quality services as an essential pillar in the framework of multidimensional policies for children. Within the services pillar, the European Commission recognises five types of services:

- Reduce inequality at a young age by investing in early childhood education and care;
- Improve education systems’ impact on equal opportunities;
- Improve the responsiveness of health systems to address the needs of disadvantaged children;
- Provide children with a safe, adequate housing and living environment;
- Enhance family support and the quality of alternative care settings;

We used a two-fold methodology. First, we designed a questionnaire where the overarching principles contained in the Recommendation were formulated as questions in an open and qualitative questionnaire. Next, we selected the countries that would be analysed as part of the study. A total of 14 countries out of the 28 EU Member States were selected in order to provide a representative sample of trends across Europe: Belgium, Bulgaria, France, Germany, Hungary, Ireland, Italy, The Netherlands, Poland, Portugal, Romania, Spain, Sweden and The United Kingdom. The selection was undertaken on the basis of several criteria, including geographical considerations, welfare systems, varying degrees of development of children’s services and different levels of decentralisation of competences in the field of children’s services.

The aim was to gather intelligence to draft 14 country profiles addressing how the principles put forward by the European Commission’s Recommendation might be implemented in practice. In order to fulfil this aim, we identified key members of the European Social Network in each country, specifically public agencies with responsibility for children’s services and child protection. We addressed a call to the General Directorates (DG) for Children and Families in governments. The DGs coordinated the collection of information from the different departments, including early years, education, health, housing and child protection in order to provide a picture as accurate as possible to the questions provided in the questionnaire. They also liaised with directors of children’s services in the municipalities that provided additional views around implementation.

Data collection took place between January and September 2014 and included the completion of questionnaires (including legislation and policy), and a review

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2 The European Social Network is an independent network of public social services in Europe, with over 120 member organisations in 34 European countries. The Network brings together senior officials in public authorities responsible for planning, financing, managing, providing and evaluating social services across the life cycle – from children to older people.
of research, grey and peer reviewed literature to complement the answers provided by practitioners in the questionnaires. Second, we organised three peer review meetings, one per year, bringing together a delegation per country consisting of children services’ directors, national, regional and local government’s representatives with responsibilities in children’s services and service providers from each country. The second peer review meeting took place in Barcelona, where the Polish case was analysed together with other four countries. This was an opportunity for senior civil servants that coordinated the gathering of information from the various departments that had been contacted to discuss and compare key findings.

The analysis of the national policy and legal frameworks in the 14 countries was structured around five key principles.

**Table 1. Principles of the National policy and legal frameworks in the 14 countries**

| Principle 1: Early Childhood Education and Care | The legal and policy framework, funding and financial incentives, provision's variability, and inter-services and parental cooperation |
| Principle 2: Education systems and equal opportunities | The inclusiveness of the education system, with a focus on children with disabilities, migrant and ethnic minorities and children from disadvantaged socio-economic backgrounds |
| Principle 3: Responsiveness of health system | Specific provisions for children with disabilities, children with mental health problems, unaccompanied children, pregnant teenagers and children from families with a history of substance abuse |
| Principle 4: Access to housing | Measures guaranteeing the access of families with children to housing and forms of support for families with children at risk of eviction |
| Principle 5: Risk assessment protocols | Protocols to assess the risks to a child and which forms of support are implemented when risk has been detected. Provisions guaranteeing that children are not placed in institutions and that children without parental care have access to services. Specific mechanisms to listen to and record the voice of the child within the child protection system. |

**Source:** author’s own analysis.
Data analysis

The answers to the questionnaires were provided in writing. The main challenge was to select the key data from the description provided by the interviewed on the basis of the analytical criteria, which had been previously defined (Yin 1993). The analysis involved becoming familiar with the data, developing a coding schedule, data coding, description of main themes, linking themes, and developing explanations of those relationships. The project management team at the European Social Network undertook the codification and review of the data provided in the questionnaires to facilitate the identification of similar and divergent trends and ensure that all key themes were captured.

Results

As highlighted above, the questionnaire translated the principles contained in the services pillar of the European Recommendation into questions. The responses to the questionnaires were provided by senior civil servants at key regional child welfare agencies, children’s services directors and providers. This exercise allowed us to identify legislation and policy developments but also key challenges in regards to the development and practical implementation of children’s welfare services. The findings presented here are important to understand the current state of play of children’s welfare and services and main challenges regarding implementation of policy and practice. A description of the main results is presented.

1. Reducing inequality at a young age by investing in early childhood education and care (ECEC)

Legal/policy framework accounting for ECEC’s delivery

The Education Act on the System of Education and the Act on the care for children under the age of 3 provide the normative framework for the delivery of early childhood education and care in Poland. There are three forms of care for children aged 20 weeks to 3 years old: public or non-public crèches, children’s

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3 The section ‘Results’ correspond with the results of the study which are available in the publication: Lara Montero (2016).
clubs – for children aged 1 to 3 years old – and daily carers and nannies. The latter is not under the control of the state and all three types of care are paid for by parents, with the obvious difficulties for families with limited resources. The government has been introducing incentives to legalise the employment of nannies through state budget contributions to social and health insurance for contracted nannies.

Public and non-public kindergartens for children aged 3–6 years old are considered to be the first stage of the education system. Other forms of preschool education include preschool branches at primary schools and preschool education groups. Until 2015, every five year-old had to take a preschool year at the kindergarten or attend some other form of preschool education. The government in 2016 raised the compulsory pre-school year to children aged 6.

**Funding and financial incentives**

Children between 3 and 6 years old in public kindergartens have the right to free tuition, education, and care provided by the municipality for at least five hours a day. As for care extending beyond that time, the municipality (through the director of the early childcare centre) may charge a fee of maximum 1 zł (around 0.25€) per hour. Parents do not pay any fees for a child who is in the kindergarten for only 5 hours per day and who does not eat meals there.

The municipality covers a partial amount of the monthly payment for childcare costs and parents pay the remaining part. In July 2013, some rules were modified, mainly the reduction of the municipality’s own contribution from 50% to 20% of the setting up and operational costs of childcare facilities. At the request of parents, kindergartens may exempt them or lower the fee on the basis of the family’s socio-economic circumstances. The family may also be supported through a local welfare centre to cover meals and basic fees.

To obtain a place for a child in a kindergarten, parents have to fill in a questionnaire, where they have to respond to questions about their background. Each municipality has a points system (available on their respective websites), by which children with a disadvantaged background receive more points, meaning that these children are given priority to attend the early childcare facility. For children with disabilities, the municipality has the responsibility for providing free transport and care during transportation or reimburse the costs regardless of the distance to the nearest kindergarten.

**Variability of provision**

Despite the improvements highlighted above, the coverage of childcare facilities for children below three and in rural areas continues to be problematic (European Commission 2016). The national rate of participation in education for three to six year olds increased rapidly in the last few years. Participation of three to four year olds increased by 7.4 pps. (to 71.6%) in the school year 2014/15 compared with 2013/14 whilst participation for five year olds reached
94% (Central Statistical Office 2015). However, challenges remain in reducing disparities in access to early childhood education for children under three years old. According to Eurostat, in 2013 only 4% of them were covered by formal childcare arrangements vs. 14% in the EU. While there is strong evidence that early learning is crucial for later school and labour market success, in particular for children in families from lower socio-economic backgrounds, the school entry age was recently raised from 6 to 7.

According to the European Commission, this change is likely to impact on the availability and take-up of pre-school education. This is due to the fact that the 6 years olds will have to stay in kindergartens occupying places that could be allocated to younger children and compulsory pre-school education for five years olds was abolished. The European Commission emphasised that these changes were likely to negatively affect children from poorer backgrounds and the supply of labour (European Commission 2016b).

**Inter-services and parental cooperation**

The different sectors involved in the system of early childhood education and care should include health, education and social services. However, the legal Act on children under the age of three does not describe any form of cooperation between the various sectors or different organisations involved. This is where the local level has in many cases taken the lead in bringing services together in children’s care. For example, public and non-governmental organisations run programmes on preventing child abuse for nurseries, kindergartens, schools, and childcare centres. In Warsaw, the Local System for Preventing the Abuse of Young Children is an interdisciplinary system of cooperation between local authorities, the local welfare centre, a health centre, the police, probation officers, local psychological consultation points, day nurseries and NGOs.

**2. Improving education systems’ impact on equal opportunities**

Until 2015, education was compulsory for children aged 6–18 years old. As of 2016, education is compulsory from the age of 7. There are public and non-public schools, but only education in public schools is part of the compulsory curriculum and is free. Fees in non-public schools depend on the internal regulations of each school.

**The inclusiveness of the education system**

Under the terms of the Education Act, the Polish law guarantees the equal right to education for every child. Children with special needs may attend general schools,
inclusive⁴ schools and special schools⁵, and may receive psychological and pedagogical support.

**Fostering the inclusion of children with disabilities**

‘Early intervention teams’ have been operating in kindergartens and schools for several years and are financed by the state. Their activities are aimed at fostering and stimulating the motor, cognitive, emotional and social development of the child from the time the disability is detected until they start school. Early support for children’s development consists of an integrated system of preventive, identification, therapeutic-rehabilitative and therapeutic-educational activities provided by an interdisciplinary team of professionals.

The tasks of the team include: the development and implementation of an individual programme of early intervention for the child and their family; establishing a partnership with a therapeutic or social welfare centre to ensure that the appropriate support is provided; and analysing the effectiveness of the support received by the child and their family. 13 categories⁶ of disabilities have been defined; these may trigger the consideration of a child having special education needs. In this case, parents may choose a general school, a special school or an inclusive school. Special educators use several criteria to determine the functioning of a student, including the type and degree of disability.

**Fostering the inclusion of migrant and ethnic minorities and children from disadvantaged backgrounds**

In Poland, all children have the right to education regardless of their nationality or legal status. The law insists in the inclusion of foreign children in the system of public education as soon as possible. Children, who are refugees or seeking a refugee status, and children under state protection are entitled to free education at all levels.

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⁴ This means schools where children with special education needs learn together with other children. The number of students in integration classes should be between 15 and 20, including 3 to 5 children with disabilities. An inclusive school has to employ additional supporting teachers qualified in special education, who also work individually with students with disabilities.

⁵ This means schools where children learn together with other students with special education needs. The number of students in a class is relatively small: for instance, 6 to 8 students in special classes for children with moderate and severe intellectual disabilities, deaf and children with hearing impairments, blind and visually-impaired children, children with physical disabilities, centres for children and young people with abnormal social functioning, and ill children. For the latter, schools are situated in hospitals.

⁶ These categories include long-term illnesses, adaptive problems, specific learning difficulties such as dyslexia, dysgraphia, and dyscalculia, speech impairment, trauma-induced emotional and behavioural difficulties, and learning difficulties.
Children under legal protection or applying for it have the right to assistance in the form of: additional Polish language lessons (for 12 months for at least 2 hours per week), learning their own language, preserving their culture and studying a religion other than Roman Catholic, as well as the necessary social assistance to help them fully benefit from education at the same level as any other Polish children. They also have the right to free reinforcement if considered necessary by their teachers. Local educational authorities provide training for teachers to support them in their work with ethnic minorities.

Family support centres prepare the Individual Inclusion Programme (IIP), which supports foreigners in all possible fields of life when they first come to Poland. However, the maximum period of assistance under the IIP is 12 months. According to the IIP, the family support centre is obliged to provide information about the conditions for receiving financial assistance, help with contacts in the local community, e.g. the local social support office; and provide accommodation support.

In addition to the figure of Roma assistant that was introduced in the Polish education system in 2001, the 2014–2020 programme for the inclusion of the Roma community also includes support in housing, health, and employment.

Families and children in difficult socio-economic circumstances may also apply for ‘social scholarships’ (e.g. for reasons of unemployment, illness, large families, single parents), school allowances for text books or emergency situations.

3. Improving health systems’ responsiveness to address the needs of disadvantaged children

Specific provisions for children with disabilities and/or mental health problems

According to Poland’s Social Policy Strategy, local authorities should put in place health programmes for children with disabilities to support them in their recovery, as well as various forms of therapy and parental education. These are provided in addition to the public system of free healthcare, and may include various medical, educational, psychological and speech therapies, support in performing daily life activities and in promoting children’s participation.

The State Fund for the Rehabilitation of Persons with Disabilities (PFRON) funds rehabilitation programmes for children with disabilities and supports the elimination of architectural, technical and communication barriers. However, no specific examples of programmes for children with mental health problems were identified nor provisions for children from families with a history of substance abuse.
4. Providing children with a safe, adequate housing and living environment

Measures guaranteeing the access of families with children to housing
In Poland, the number of households exceeds the number of homes, forcing families to cohabitation and causing frequent overcrowding of properties. The only governmental response to this problem comes from the young persons'/family planning programme, which includes subsidies for the purchase of flats from the primary market. Families in a difficult financial situation and who own or rent a property can apply for financial help to pay their mortgage or rent through their local authority.

Supporting families with children at risk of eviction
Municipalities decide the allocation of their housing stock. In Warsaw, for instance, the right to apply for social housing is limited to people who do not own or rent a property and are in poverty\(^7\). Additional reasons may include losing the home or flat in a natural disaster, leaving foster care, or leaving a correction facility and being unable to secure any housing on their own.

A family who is at risk of eviction due to a difficult financial situation has the right to apply for social housing or temporary accommodation through their local authority. The municipality, or sometimes the court, decides if the evicted family is entitled to social or temporary housing. However, the Ombudsman for Children’s Right drew attention to the fact that not all municipalities were securing places for evicted families with children. More specifically, the Ombudsman referred to the failure of certain municipalities to offer evicted debtors, including pregnant women and children, temporary accommodation (Rzecznik Praw Dziecka 2014), despite their legal obligation to do so.

5. Enhancing family support and the quality of alternative care settings

When a family cannot, do not know how or do not want to look after their children, they have the right to receive support to help them with the upbringing of their children. Help is provided by family assistants and day support centres, and organised by local authorities. In case of parental inability to care for their child adequately,

\(^7\) Here, poverty is defined as a situation where the family income per person for the last three months has been below the lowest pension or, in case of a single-person household or a single parent, lower than 150% of the lowest pension.
the relevant court may rule a custody replacement measure. Measures may include a foster family, a family-type children’s home or an institutional facility, e.g. care and educational facility, care and therapeutic facility, pre-adoption centre. Regarding family and children matters, the decision is made by the court, which may also grant the family another form of aid: the supervision of a probation officer.

Removing a child from their family home is the last resort when working with the family does not bring the desired results. However, when a child is placed under foster care, various institutions, such as welfare centres, the court (e.g. probation officers), NGOs and pedagogical and psychological assistance centres, continue to work with the family, so that the child can go back to live with their biological parents.

Protocols to assess the risks to a child and put in place appropriate support
The 2011 Act on family support and foster care states that a family that has difficulties in caring for their children may be provided with support by day care centres or by family assistants, whose main task is to prevent placing the child out of the family and help them dealing with various problems connected with the upbringing of the child, and social, psychological and behavioural problems.

A risk assessment form must be completed by social workers and the other professionals working with the family, and two legal procedures may follow afterwards: the Blue Card and the procedure for removing a child from the family. The Blue Card procedure is initiated when there are suspicions that a child suffers from violence at home. It consists of four phases. The initial phase involves gathering all the necessary data about the case and those involved. The next step includes defining which type of violence professionals may be looking at and which procedure is to be followed. Step 3 involves defining an action plan and meetings of the interdisciplinary child protection team (including social services, education, health and the police) to monitor progress. The final step consists of an assessment as to whether the plan has fulfilled its objectives.

The procedure for removing a child from the family is the second type of legal procedure. According to the 2005 law on preventing domestic violence, in case of a direct danger to the life or health of a child due to domestic violence, a social worker has the right to take the child away from the family and put them under state care, either in a foster family or in a care home. This decision shall be taken jointly with representatives of health services and the police, who also take part in the intervention. When the social worker removes a child from their family, the family must be instructed about their right to file a complaint.

Main reasons for children to be taken into care
In 2012, the Ministry of Labour and Social Policy conducted a survey (Council of Ministers 2013) about the reasons for placing children in care. The most common reasons were parents’ addiction and unwillingness to conduct their duties of care. A full list of the reasons for children to be taken into care can be found in Table 1 in the Annex.
Main provisions guaranteeing that children are not placed in institutions
In our study and according to data provided by the Institute for the Development of Social Services (IRSS) based on data from the national statistical office of Poland, 27,300 children were in institutional care, while 50,100 children were in (family) foster care in 2013. According to data provided by the Ministry for Labour and Social Policy, in 2015 there were 24,785 children in kinship care, 11,549 children with a non-professional family, 2,025 with a professional foster family and 488 in family children’s homes (please see Table 2). However, no data was provided as to how many children were still in institutions.

It is important to highlight that since the introduction of the Act on family support and foster care in 2011, there has been an increase in the number of family assistants, under the responsibility of local authorities, with an emphasis placed on prevention and intensive work with families. According to data provided by the Ministry of Labour and Social Policy, in 2015 there were 3,815 family assistants, which accounts for a 12.5% increase in comparison to 2014 data. Family assistants’ main task is to prevent placing the child out of the family and help them dealing with various problems connected with the upbringing of the child and social, psychological and behavioural problems. With this purpose in mind, they define and implement a plan with the family, and monitor its implementation, such as their participation in psychological and education sessions. Family assistants also draw up an opinion at the request of a court and follow up on the family’s functioning after the intervention comes to an end. Family assistants have a maximum caseload of 15 cases and must cooperate with local authorities, NGOs, providers of services and the specialists in the interdisciplinary child protection team. In almost 50% of cases, the work undertaken by family assistants had the desired results (please see Graph 1 in the Annex).

The Act also emphasised the concept of family foster care, including professional foster families and family-type care homes. The aim is that all children below 10 are placed in foster care from the year 2020, and that the number of children that are placed in the same home does not exceed 14, from the year 2021.

Main provisions guaranteeing that children without parental care have access to services
According to the Act on family support and foster care, a foster family and a family type children’s home shall provide a child with round-the-clock care and education. This includes ensuring that the child has access to healthcare and education and that he/she keeps contact with their parents, unless decided otherwise by the court.

8 Presentation of Katarzyna Napierkowska, Head of Unit, Department of Family Policy at Ministry of Family, Labour and Social Policy in Poland. Conference on the implementation of the European Commission’s Recommendation on investing in children at University of Lodz, Lodz (Poland), 20th October 2016.
Young people brought up in a foster family or a residential facility can be supported to ease their transition to adulthood. The foster family or residential facility shall inform the county’s family assistance centre about the person’s intention of becoming self-sufficient two months prior to turning 18. The young person is provided with an ‘empowerment guardian’, who drafts with them an individual empowerment plan. However, support under the self-empowerment provision is not mandatory and it is dependent on fulfilling a number of requirements. These may include completing compulsory education, providing proof of continuing education, proof of interaction with the empowerment guardian and the allocated social worker, and informing the county’s family assistance centre of any substantial change in their personal and financial situation.

The assistance under the empowerment programme comes in the form of financial aid, i.e. for the continuation of education, and support in kind (houseware, materials for renovating the property, purchase of school materials, equipment that may be used for work or rehabilitation equipment). Young people leaving care may also benefit from a housing allowance, social housing and training on self-reliance, financial management and skills needed in adult life.

**Specific mechanisms to listen to and record the voice of the child within the child protection system**

A special procedure for hearing the child during a court case was reported in the answers to the questionnaire, but no specific details were provided. Article 4 of the Act on family support and foster care states that children have the right “to receive information and express their opinions on issues that are of their concern in accordance with their age and maturity”, but there was no information as to how this is actually implemented in practice.

**Concluding remarks**

These research findings can be useful in the policy-making process and the development of children’s services, including documentation and analysis. The case studies provide significant insight into policy and legal developments, implementation and evaluation of activities and efforts to improve policy and practice in children’s services. The findings could be used to assess the state of play in regards to children’s services across the countries studied and beyond, with a focus on children being placed at the centre of public services’ intervention, using a comprehensive approach and promoting critical thinking and reflective practice. The results of the study show that a significant development of laws and policies has taken place; however, a main challenge remains when it comes to ensuring implementation and monitoring, and evaluation of programmes and services for children.
In Poland, there are several areas in the field of children’s policies and services which require attention to implement European and international recommendations. First, there is a need to develop a comprehensive strategy covering all strands of child related policies and ensuring their coordinated governance. It may be possible to achieve better governance if a single executive government body or agency for children’s issues was established. Second, the development of formal early childcare, including adequate and stable financial support (not only based on projects funded by European Structural Funds), should be reinforced. This is particularly important to ensure the participation of children from disadvantaged backgrounds and those in rural areas.

Third, any comprehensive strategy should include a focus on housing for families with children. The Polish government should develop a comprehensive response to address overcrowding and the lack of housing in cooperation with local authorities to increase social housing supply, rental housing in the private market and the share of affordable accommodation. These measures should ensure that local authorities have the necessary means to provide families with children at risk of eviction with temporary accommodation and that there are mechanisms in place to make sure that the municipalities fulfil their legal obligation to do so. Fourth, though there has been progress in placing children in alternative care, it is recommended to improve training for professional foster carers, counselling and support services for foster families and work with prospective foster parents to increase the number of caretakers for children with disabilities. Finally, future policy strategies should ensure the wider involvement of stakeholders, including parents and children, in drawing policy measures, their implementation and monitoring.

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ANNEX

**Table 1.** Main Reasons for children to the taken into care in Poland in 2002

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addiction of the parents</td>
<td>39.62%</td>
</tr>
<tr>
<td>Helplessness in matters of parental care</td>
<td>25.17%</td>
</tr>
<tr>
<td>Abandonment</td>
<td>12.98%</td>
</tr>
<tr>
<td>Domestic violence</td>
<td>3.63%</td>
</tr>
<tr>
<td>Disability of one of the parents</td>
<td>3.24%</td>
</tr>
<tr>
<td>Long-term or severe illness of at least one of the parents</td>
<td>3.04%</td>
</tr>
<tr>
<td>At least one of the parents abroad</td>
<td>2.98%</td>
</tr>
</tbody>
</table>

**Source:** Ministry of Labour and Social Policy, Poland, 2013.

**Graph 1**

**Source:** Presentation of Katarzyna Napiorowska, Head of Unit, Department of Family Policy at Ministry of Family, Labour and Social Policy in Poland. Conference on the implementation of the European Commission’s Recommendation on investing in children at University of Lodz, Lodz (Poland), 20th October 2016.
Table 2. Number and types of foster families in 2011–2015

<table>
<thead>
<tr>
<th>Year</th>
<th>Kinship care</th>
<th>Non-professional family</th>
<th>Professional foster family</th>
<th>Family-type children’s homes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>total</td>
<td>professional</td>
<td>many children</td>
<td>specialist</td>
</tr>
<tr>
<td>2011</td>
<td>36 701</td>
<td>6 227</td>
<td>1 906</td>
<td>x</td>
</tr>
<tr>
<td>2012</td>
<td>25 836</td>
<td>12 162</td>
<td>1 843</td>
<td>1 036</td>
</tr>
<tr>
<td>2013</td>
<td>25 842</td>
<td>12 182</td>
<td>1 906</td>
<td>1 099</td>
</tr>
<tr>
<td>2014</td>
<td>25 071</td>
<td>11 711</td>
<td>2 024</td>
<td>1 215</td>
</tr>
<tr>
<td>2015</td>
<td>24 785</td>
<td>11 549</td>
<td>2 025</td>
<td>1 216</td>
</tr>
</tbody>
</table>

Source: Department of Family Policy at Ministry of Family, Labour and Social Policy, 2016.