

Innovative practices with marginalised families at risk of having their children taken into care (Venice, 11-12 December 2014)

Comments paper – European Social Network¹

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Introduction

The European Social Network (ESN) is delighted to be involved in a peer review that is focused on evidence-based practice in the field of child protection services. ESN represents directors of public social services in regional and local authorities across Europe, with 110 member organisations in 34 European countries. ESN's particular concern is with the most disadvantaged and socially excluded children - children with disabilities or mental health problems, children in alternative care, children at risk of neglect or abuse, undocumented child migrants/asylum seekers, Roma and traveller children, children victims of trafficking and sexual exploitation. These are children, who are at high risk of poverty and social exclusion and with whom ESN members in local/regional public social services typically have most contact.

Supporting families in complex situations is one of the core duties of public services at regional and local levels. ESN carried out a survey amongst its members in 2012 to assess the support mechanisms for children and family services in 18 European countries². Some of these services include pre and post-natal parental support, targeted support (mono-parental and large families, families in socio-economic difficulties), early childcare and child protection services. For many disadvantaged children and families, this support constitutes their only chance to break out of the cycle of disadvantage, especially in the current economic context.

The Italian programme PIPPI is based on "logic modelling", which has been used by a substantial number of councils in the UK, and has a series of interesting elements that in several ways are in line with current developments in child protection services across Europe. The coordination between different sectors and the need to involve the child, the family and wider network in assessment and planning is recognisable in local public social services in a number of European countries. It is interesting to read about the integration of assessment and planning, which has

¹ Prepared for the Peer Review in Social Protection and Social Inclusion programme coordinated by ÖSB Consulting, the Institute for Employment Studies (IES) and Applica, and funded by the European Commission.

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² European Social Network, Family and Parenting Support -The role of public services, 2012.



been recently on the agenda for ESN³. Finally, the peer review also touches upon the role of evidence in services design and implementation, on which ESN members have focused over the past years⁴.

The aim of this paper is to comment on the PIPPI model and other programmes for children and families, and to assess a number of issues that emerge from the host country and the discussion papers. The paper is based on the answers to a number of questions provided by directors of child protection services across The UK, Sweden and Hungary as well as the findings from the ongoing ESN led project *Investing in Children's Services, Improving Outcomes*⁵ from three additional countries –Spain, Germany and The Netherlands. We address specifically the questions below.

What kind of services framework need to exist and what services are appropriately provided on a universal or a targeted basis?

Across Europe, countries have a different history of care services and child protection. However, the development of care services over the years has reflected advances in policy and practice in caring for children, a new understanding of the nature and extent of child abuse and neglect, broader changes in the place of children in society and an increasing focus on children's rights. More recent challenges to children's services include internet grooming and abuse, social networking and child sexual exploitation⁶. There has been an increased recognition of the significance of child development, and therefore the importance of a child's early years. Early intervention and prevention are seen as key to children living healthy, fulfilling lives and growing up to be responsible citizens.

There is a wealth of data from life course studies linking adversity in early life to poor literacy and educational attainment, anti-social and criminal behaviour, substance abuse and poor mental and physical health. According to Esping-Andersen⁷, the assurance of high quality day care could be the single most effective policy in homogenising early childhood investments and reducing inequalities in educational attainment and income. Investment in early child care has been compared to other kinds of public investment, with the conclusion that it produces a return that far exceeds the return on most public projects.⁸

In **Scotland**, the support for vulnerable children takes place within the *Getting it right for every child* (GIRFEC) framework, which is a change programme for children's services that seeks to put into practice a series of key principles: early intervention, to prevent any problems/challenges in a child's life escalating to crises; ensuring that the distinctive needs of children are placed at the centre of service's design and delivery, working with the family whenever possible; and

³ For further information on services planning for different groups, please visit: <http://www.esn-eu.org/news/536/index.html>.

⁴ European Social Network, Contemporary issues in public management of social services in Europe – Innovation, research and evidence-based practice, 2014.

⁵ For further information on this project, please visit: <http://www.esn-eu.org/investing-in-children-services-improving-outcomes/index.html>. A short report with some of the project's findings so far is available at <http://www.esn-eu.org/raw.php?page=files&id=1340>

⁶ Some of these issues were addressed at the 2013 Child Rights Forum, which focused on child protection. For further information, please visit: http://ec.europa.eu/justice/fundamental-rights/rights-child/european-forum/eighth-meeting/index_en.htm.

⁷ Esping-Andersen G., Families, Government and the Distribution of Skills, DemoSoc Working Paper, Universitat Pompeu Fabra, 2006; Esping-Andersen G., Childhood Investments and Skill Formation, International Tax and Public Finance, 15(1): 19-44, 2008.

⁸ Rolnick A. and Grunewald R., Early Childhood Development with a High Public Return, Minneapolis Federal Reserve Bank, 2003.



applying a joined-up approach between services based on coordination and the appropriate sharing of information about concerns in a child's life.

In addition, there are specific targeted provisions for vulnerable children. Local authorities have a duty to support "children in need" and with regards to child protection, there is a national guidance⁹ that sets out the key considerations in addressing potential child protection issues and the procedures that should be followed, all governed by the GIRFEC's key principles. Local authorities are responsible to ensure that child protection procedures are pursued by all relevant agencies.

In **Sweden**, the emphasis on children's services framework is to ensure that the relevant services, which are involved in the lives of children and families, have a coordinated approach. Schools, health services and social services have clearly defined roles and also agreements as to how services can be coordinated when necessary. Social services are involved in providing support at all levels, from early intervention and preventive measures to child protection. Universal services start at pre-natal level and continue until upper secondary education. In pre-natal care and up to 2 years of age, there can be specific support to redress socio-economic and psychosocial disadvantage or to ensure the optimal attachment between children and parents. Parenting support and family support are available through all the childhood years – primarily on a universal basis but also as targeted services when the need is recognised in individual assessments made by social services.

When more than one agency is involved, there needs to be a coordinated action plan, which explains who does what and why, and defines the goals for the coordinated intervention of different services and also how the coordinated work will be followed up in order to ensure that the intervention is appropriate and gives a result. Targeted intervention is primarily provided when child protection assessments confirm that there are a number of risk factors, which jeopardise the child's development and a need of additional support is recognised.

In the Swedish municipality of Botkyrka, the social services' department and the education department jointly carried out the project "Kraftsamling"¹⁰ ("Mobilising joint resources") to detect and support children at risk. "Kraftsamling" has a steering group consisting of senior managers from Social Services and the Education Department. Team leaders from Social Services and Head Teachers from all public schools in the municipality meet regularly to discuss issues concerning children and to make priorities and decisions about how to use mutual resources to best effect. At operative level, the project tested a management structure to optimise collaboration, created new routines for collaboration, developed joint staff training and every school was assigned a social worker with whom consultations and referrals could be made. The steering group formulated mutual commitments to ensure that vulnerable children (1 to 18 years old) receive early attention and preventive measures with the goal of avoiding placements outside the home and to intervene in cases of repeated truancy. In 2012, the steering group was expanded to include local police to help identifying young people who risk being targets for recruitment to criminal gangs.

A number of parental and family support and intervention programmes are used by social services with children and parents with risk indicators. In general, Swedish municipalities and the social work profession aim to use methods that are supported by evidence or deemed as effective through follow-up studies, such as "The Incredible Years", "Multi Systemic Therapy" or "Functional Family Therapy".

⁹ This publication is available at: <http://www.scotland.gov.uk/Publications/2010/12/09134441/0>.

¹⁰ Presentation made by Graham Owen, Social Services Director, and Erik Nilsson, Chief Executive of the Municipality of Botkyrka at the European Social Services Conference, Dublin, June 2013.



Which methods are used vary across the country and there is no systematic form of implementation, although both the National Board of Health and Social Welfare encourages and support the use of effective methods in social services¹¹.

As highlighted above, the main universal service provision to achieve that children live a healthy and fulfilling life is good quality education and care in their earliest years. Some of this provision may be specifically targeted to looked after children and children from the poorest households. For example, in **Sweden** all children are entitled to day care from 1 year of age. If the parents are unemployed there is a guaranteed minimum of 15 hours for each child. Several Swedish municipalities increase this minimum allowance. In **England**, all looked after 2 year olds and other 2 year olds from the poorest households are entitled to 15 hours free education per week, totalling some 260,000 children attending nurseries and day care. There are other relevant targeted policies aimed at reducing child poverty and improving family stability. The latter, embedded in the 'Helping Troubled Families' initiative, has been the subject of some debate amongst professionals. The government is working with local authorities and their partners to help 120,000 troubled families 'turn their lives around', concentrating on issues such as long term unemployment. Other targeted government-led approaches to support looked after children provide funding for initiatives to improve parenting skills, encourage school attendance, reduce substance misuse and reduce anti-social behaviour.

In **Hungary**, legislation¹² ensures that all children below school-age are eligible for early childhood education and care (ECEC) services and that ECEC centres provide additional support for vulnerable children. In addition, there is differentiated financing for disadvantaged children (105% normative funding), multiple disadvantaged children (110% normative funding) and children with disabilities (150% normative funding) enrolled in nurseries, and a holistic full time support including four meals a day provided in all nurseries (children under the age of 3) and kindergartens (children between 3 and 6 years of age). Child welfare agencies can refer vulnerable children and children at risk to ECEC centres as a means of prevention. Kindergartens, which are now compulsory for 5 years old children, will be compulsory from the age of 3 at the beginning of the 2015-2016 school-year¹³.

How should the three pillar approach promoted by the 2013 EC Recommendation on investing in children be provided?

An integrated approach to children's services is key to improve children's chances and children's wellbeing. Basic provision for every child should be combined with a higher level of support for each child who needs it in line with the principle of 'progressive universalism' advocated by Prof. Melhuish at ESN's seminar "Investing in Children: Early Years Services and Child Protection"¹⁴. ESN Members asserted that universal services are needed to help them identify which children need additional support/protection. Following discussions with members at our "Investing in Children" seminar, ESN proposed in 2012 that a number of overarching principles

¹¹ According to the 2014 annual comparison of social services for children, 43% of municipalities provide manual-based parental support and 34% of municipalities provide psychosocial interventions for families. 31% of municipalities carry out systematic follow-ups of their interventions. Further information available at the website of the Swedish Board for Health and Social Welfare: <http://www.socialstyrelsen.se/oppnjamforelser/barnochunga>.

¹² Act No. 31 of 1997 on the protection of children and on guardianship administration and the Act on Public Education, 2011/CXC. The Act No. 31 of 1997 also describes the different kinds of support available for children who are considered disadvantaged.

¹³ *Act on Public Education, 2011/CXC*.

¹⁴ In November 2011, ESN organised the Seminar "Investing in Children: Early Years Services and Child Protection" to provide an input for the drafting of the EC Recommendation on investing in children. More information available at: <http://www.esn-eu.org/e-news-nov11-autumn-seminar1/index.htm>.



on integrated work with children and families were incorporated in the EC Recommendation on investing in children:

- the child's best interests should be taken as the primary consideration;
- regular strategic assessment of children's needs in a local area;
- structural coordination between services and individual cooperation between professionals;
- a duty for all services to alert child protection authorities in cases of suspicion of neglect and harm;
- continuous improvement of quality and performance in relation to relevant outcomes (i.e. changes in a child's life and wellbeing) for children, drawing on data and available evidence;
- improved accessibility of services for children from a disadvantaged background.

A number of these principles are implemented in practice by ESN members across a number of European countries.

For example, in **Scotland**, the GIRFEC framework puts into practice several of the key elements mentioned above. GIRFEC has a holistic approach to the 'wellbeing' of children and young people with eight different components against which children and young people are to be considered: safe; healthy; achieving; nurtured; active; responsible; respected; and included. The recent Children and Young People's Act sets duties on local authorities and health boards to ensure that all children have a named person -a single point of contact/professional for concerns raised around a child or young person, and a child's plan -a single planning process and document for children and young people who require additional support.

GIRFEC was pioneered in the Highland area in 2007 and was successfully evaluated (e.g. notable decreases in the number of children placed on the child protection register and time savings for social work and educational staff on their caseloads). In addition, there is a nationally-available risk assessment tool¹⁵ to ensure a consistent and effective approach to ensure early intervention in the case of child protection risks.

In **Spain**, the situation varies across the regions, which are responsible for the development and implementation of children's policies and services. In **Catalonia**, a range of reforms have taken place with the aim to achieve an improved infrastructure for planning, coordinating, providing and evaluating services for children. The Pact for Children is a plan signed by all social, economic, civil, institutional and political stakeholders to promote comprehensive policies for children and young people. It consists of a Monitoring Committee that consists of representatives appointed by the National Children's Board and representatives of the signatory organisations to assess its implementation with a focus on social inclusion, health and quality of life of children and adolescents.

Catalonia's Children's Board, together with the Territorial Children's Boards and Local Children's Boards, are collective bodies which enhance, coordinate, promote and foster public policies for children across Catalonia ensuring the participation of all governmental departments, the federations of municipalities, county councils with responsibility in children's policies, and the Observatory of Children's Rights.

¹⁵ The tool is available at: <http://www.scotland.gov.uk/Publications/2012/11/7143/0>.



There also exists a framework¹⁶ for cooperation across a number of agencies at regional and local level to ensure that all professionals from education, health and social services can identify situations of risk and vulnerability and which actions should be taken. A risk prevention model¹⁷ and an online application integrate a risk management support module and a case register, with two access levels: one part of the application is open to the general public, whilst the second provides access to professionals and real time shared electronic data transfer and management. There also exist specific protocols for intervention with children suffering from abuse and neglect, and specific protocols for violence against female children.

In **Sweden**, our members highlight the need to use innovative work to motivate more marginalised families to access services. This requires coordination and cooperation often between schools and social services to identify children with risk factors and to make sure that coordinated efforts are made to motivate children/families to access available services. The quality of these services needs to be maintained by ensuring regular follow-up at both individual and group level. The Social Services Act states that the municipalities shall assess the needs of children who may be at risk of maltreatment. The assessment shall regard children's needs and living conditions, and social services shall interact with the family, health care, the education system and other authorities before and after the assessment. The National Board of Health and Social Welfare provides a system (BBIC) for investigation and documentation of the work that social services carry out with children at risk that is used by most municipalities. All professionals in health care, schools and the wider society are obliged to report to social services any suspicion that a child may be at risk¹⁸.

In **The Netherlands**, there is currently a transformation of children and young people's services taking place through a transfer of responsibilities to the local level but also a move towards an approach focused on prevention, early support, young people and parents' own capacities, better cooperation between professionals working with the same family and outcomes' measurement. Municipalities should work according to the principle "one family, one plan, one case manager". Several ESN members in Dutch municipalities are already experimenting with new ways of working that should contribute to the transformation goals; e.g. through neighbourhood teams. These are multidisciplinary teams consisting of professionals from generalist and specialised services, which are based in local neighbourhoods, and provide integrated support for children and families.

In **Hungary**, municipalities have the responsibility to monitor children's services, and make sure that they maintain a *signalling system* to identify children who are at risk, to uncover the reasons causing the risk, and provide the necessary support. This task is implemented through inter-agency work, which is regulated by legislation and involves a number of agencies working with families. Professionals working in early childcare services participate, alongside child protection social workers, in the signalling system in order to prevent, identify and address risk situations. Their related duties are twofold:

1. ensure that they monitor all children and signal those cases in which they cannot provide efficient support with their own means;
2. make sure that children referred to the signalling system receive the care and education they need to catch up and prevent problems from scaling up.

¹⁶ Further information available at the website of the Department for Welfare and Family of the Catalan Government: <https://benestar.gencat.cat>.

¹⁷ Ibid.

¹⁸ SFS 2001:453. Socialtjänstlag (The Social Services Act).



How should the engagement with children and children's organisations take place?

Child participation is one of the guiding principles of Art. 12 of the United Nations Convention on the Rights of the Child (UNCRC). Therefore, children's participation in all areas of policy-making that affect them should be promoted at different government levels. For instance, there are examples of training for professionals working with children to facilitate the meaningful participation of children in policy-making¹⁹. Across ESN membership, child protection services are committed to informing and consulting the child and parent(s) or carer(s) fully of their situation, the decision-making processes affecting them and what care and support is available.

Linking to the services' pillar of the EC Recommendation on investing in children, ESN believes it is important that policy-makers pay attention to children's participation in the area of child protection. It is a specialist area and one where the right to be heard is considered critical in social work practice today. ESN has urged policy-makers to specifically recognise that: *"the voice of the child must be heard and recorded in decisions concerning his/her future. If the wishes of the child cannot be taken into account then clear reasons must be given by competent authorities"*²⁰. ESN has also suggested that Member States recognise that children in public care and involved in child protection cases should have access to independent legal representation²¹.

Several of these principles are enshrined in legislation, policy and best practice in a number of countries. There are examples of good practice, but implementation remains variable.

In the **United Kingdom**, most local authorities contract with independent advocacy or representation organisations to support children in care, both at an individual level or as a group. This provides support for children to enable their views to be heard and an opportunity for children to disclose anything of concern to them about how they are being looked after. A further aspect of this system is the role of Council elected members as 'corporate parent'. Some councils involve their politicians with children in care to find out what their experience of being in care is.

Children's organisations are usually not for profit or private providers of services for children in the care system, who are either living at home or in care. In some instances, legislation requires that voluntary providers of care for children are consulted about policy and service development at both local and national level. Private care providers do not have the same rights to be consulted, though they are now more included in these processes than in the past.

In **Scotland**, children within the care system have the right to be involved in a range of decision making, which falls into three broad categories:

- Involvement in day to day decisions in foster care and residential homes. This includes areas such as decor, meal choices, outings, rules about bedtimes, behaviour etc.
- Involvement in planning their future. This is a more complex area, and professionals need to take account of children's age and maturity when hearing their views, but every child is entitled to contribute.

¹⁹ Integrating Children's Perspectives into Policies in the Andalusian Public Health System –presentation at 2011 European Social Services Conference. The presentation is available here.

²⁰ European Social Network, Tackling and preventing child poverty, promoting child well-being, ESN analysis of the SPC report to the European Commission, 2012.

²¹ European Social Network, Analysis of the EC Recommendation, 2013.



- Involvement in shaping and planning future services such as education and health, where they have a valuable role to play as consumers.

In **Germany**, according to family legislation, there is a legal requirement to listen to children who are 14 years old or older. The same legislation provides that if the child has not yet reached this age, his/her opinions should be respected, when the aptitudes, ties or will of the child are central to the decision, or if there are other grounds for personal respect of the child's wishes. In addition, there is a specific provision to provide for a guardian to support the child's best interests.

In **Sweden**, the Health and Social Care Inspectorate supervises residential facilities and foster families and talks to children who are in care. There is also a special telephone number and an e-mail address for children who are in the child protection system and may want to contact the Inspectorate. The National Board of Health and Social Welfare and the Ombudsman for Children in Sweden shall now, by a Governmental assignment, undertake a study where children in the child protection system are listened to about their situation in care.

At services level, managers and directors of social services are keen to take into account and consult children in services' planning and evaluation. Children's views can be obtained in a number of ways; for example, indirectly by liaising with services and organisations that provide direct support to children, e.g. ChildLine or by approaching children themselves. Directors of services for children meet with targeted groups of children; for instance, unaccompanied asylum seeking children, to get their opinions about the support they receive from their social workers, their residential care situation and their situation in schools. In line with the UNCRC, in cases when a child is assessed by social services, there is a legislative requirement in Swedish law to talk to the child and to document the views of the child prior to a decision on the type of intervention which might take place.

When working with high risk families, what is the desired balance between empowerment and control and how should this balance be achieved?

According to social services directors in **Sweden**, their starting point is the belief that empowerment is important so that families have more control and opportunities to make their own decisions. In working with high risk families, it is important to be clear that when elements of control are used, there is a purpose for exercising the degree of control. Social services in the Swedish municipality of Botkyrka are introducing the model YAP, identified as an effective model of work with young people and families. The interest in YAP developed when they were looking to find effective forms of support for marginalised young people in their own community and focused on supporting them particularly in their ability to achieve their potential in education -identified as the most significant 'safety' factor. An important factor in deciding to use this model was the way in which empowerment issues are addressed.

Like the PIPPI model, Sweden has based its assessment model on the UK's "Looked after Children model" and has subsequently adopted a linear approach to assessment, planning, and then intervention. However, this approach may not always follow the processes and circumstances of high risk families that at times can be very chaotic.

In the **United Kingdom**, the overriding imperative in this question is that the welfare of the child is paramount. The rights of the parent should never supersede the needs of the child. This has been a difficult and emotional issue for many years, and has caused controversy amongst professionals, especially in decisions about



seeking alternative permanent families for children when the birth parents remain involved in some way.

The Social Work Inspection Agency (SWIA)²² looked at how all Scottish local authorities addressed this issue and concluded that in the majority of cases it was taking too long to find permanent, long-term families for looked after children. The emotional impact on children of living with uncertainty about their futures and whether or not they were returning home resulted in poor outcomes for them, as well as a good deal of disruption within their placements²³.

At the heart of child protection is working with risk. Staff must have the training, tools and confidence to apply their professional judgement in a highly uncertain, complex and often rapidly changing environment. Decisions on intervention, as opposed to empowerment, and compulsory legal measures required to protect the child are dependent on skilled professional analysis and decision-making. Failure to properly identify risk can lead to serious, and even fatal, outcomes for children. The accurate assessment of parenting capacity along with the child's developmental needs, and wider family and environmental factors are key in child protection assessments²⁴. In making these assessments of parenting capacity, practitioners need to be alert to cases of "disguised compliance"²⁵. It often features in Serious Case Reviews²⁶, where death or serious harm has occurred, and agencies have failed to adequately protect the children concerned.

Some examples of good practice may include the organisation of training for professionals on a single agency and multi-agency basis. The latter may be coordinated through Local Safeguarding Boards, which are responsible for ensuring all agencies involved in child protection are properly trained to safeguard children in their locality. In **the United Kingdom**, the NSPCC (National Association for the Prevention of Cruelty to Children) provides such a model, supported by a range of relevant research. The concept of 'resilience' has been widely used in the UK in weighing up particular risks against protective factors for the individual child. It helps practitioners make sense of the relationship between the child's levels of vulnerability or resilience and the world around them, including their birth family.

What is the role for the EU and its different initiatives (Europe 2020, the Social Investment Package, the EC Recommendation on investing in children and the European Platform for Investing in Children)?

The Social Investment Package (SIP) has put a focus on the question of investing in children – a debate and a way of thinking that has gained ground across Europe during the last few years. Investing in children is generally accepted as a positive form of action but it requires a long-term approach to provide "returns" in the form of children who perform better in schools and have a better quality of life. A number of pilots for social investment have taken place at local level in some

²² Social Work Inspection Agency, *Improving Social Work in Scotland*, 2010.

²³ Similar conclusions were confirmed by research carried out on behalf of the Scottish Children's Reporter that examined the cases of 100 looked after children and found that the legal processes involved in freeing children for permanent alternative families were also taking too long, because of delays by social workers in making plans for the children's futures. For further information, please consult: Scottish Children Reporter's Administration, *Care and Permanence Planning for Looked After Children in Scotland*, 2011.

²⁴ HM Government, *Working together to safeguard children: a guide to interagency working*, 2013.

²⁵ This is when parents/carers appear to cooperate with child welfare agencies but have little intention of changing their behaviour permanently. For further information, please consult Reder, Duncan and Gray, *Beyond blame: child abuse tragedies revisited*, 1993.

²⁶ Brandon et al., *Analysing child deaths and serious injury through abuse and neglect*, 2008.



countries. In **Sweden**, the municipalities of Malmö and Norrköping provide funds for “social investments”. Norrköping has invested 40 million SEK in a fund, which can be accessed by projects and ideas that aim to “invest” in people services that will then reduce the need for other services later on. According to the calculation models used by Norrköping, some of the activities have produced results and made money re-available for investment in new services.

The EC Recommendation on investing in children serves as a framework for policy re-assessment and action at national, regional and local levels. ESN sees a number of opportunities for action at national, regional and local levels in four areas: strengthen synergies and governance; strengthen evidence-based approaches; address child poverty in the EU 2020 Strategy and use EU funds for delivery.

Given that the Recommendation seeks to address child poverty and social exclusion through comprehensive design and enhanced coordination, it can act as a stimulus to strengthen synergies across sectors and improve governance arrangements in national, regional and local policies. The development of specific indicators on children is crucial to assess whether and how policies impact on children’s lives. ESN has been concerned to ensure that there are indicators on services access and quality besides on income and employment.

The indicators presented in the Recommendation do not address children in most vulnerable situations, such as children outside traditional households (e.g. in alternative care) or the number of children involved with social services²⁷. ESN suggests that the EU takes leadership in requesting that Member states collect data regarding the proportion of households in touch with social services and the reasons (e.g. proportion of abused children or who have suffered violence) and proportion of children in alternative care (with breakdown by disability, health and social circumstances).

The Recommendation’s principles should be reflected in the implementation of the EU 2020 strategy and mainstreamed into the Europe 2020 governance cycle each year; i.e. as an explicit priority in the Annual Growth Survey, in the guidelines and guidance notes for the National Reform Programmes (NRPs)/National Social Reports (NSRs), and in the Country-Specific Recommendations (CSRs). Taking account of how austerity policies affect the most vulnerable in IMF/EU programme countries²⁸, Member states, especially in IMF/EU programme countries, should carry out ex-ante and ex-post social impact assessment of austerity measures, to ensure that such measures do not have a negative impact on children.

The Commission asks Member States to make appropriate use of EU funding to support the delivery of the policy proposals outlined in the Recommendation. The Commission could therefore take a pro-active role in clarifying and providing information on the role of the different funds, e.g. a handbook highlighting the main funding opportunities would be a useful asset. The EC could monitor Member states’ use of EU funds to ensure it is line with the principles of the Recommendation.

As a matter of example, in **Hungary**, Regional Operational Programmes have been extensively used for building new ECEC centres to extend the available provision for children. 107 new childcare centres with more than 6,000 places have been built and more than 4,800 existing places have been modernised between 2010 and 2014 (a 20% increase). Available data²⁹ demonstrates that the measures have

²⁷ The 2013 EC’s Staff Working Document on Demographic and Social Trends refers to this issue.

²⁸ BBC world Service, The disabled children locked up in cages, 14 November 2014. Accessed on 21 November 2014. Available at: <http://www.bbc.co.uk/news/magazine-30038753>.

²⁹ Own calculation (and map) based on Hungarian Central Statistical Office data and MAG Zrt data in the presentation made at the Workshop 08B04: Marta Korintus: “Expanding Early Childhood Education



been well targeted to the most disadvantaged/underdeveloped regions in the country. The targeted further development of childcare for children under the age of three – especially, early support for children living in the most disadvantaged micro regions of the country - is also going to be one of the main priorities of the 2014-2020 Action Plan. An ESF supported programme has contributed to the establishment of new family day care facilities with 220 places, as well as to the training and employment of professionals.

It is important that the European Commission focuses on practical aspects of the implementation of the legal and policy principles contained in the Recommendation and recognises the role of professionals working in public child protection. The EC needs to focus on methods of working effectively with children and families, for which the EC should promote mutual learning and cooperation on the development of qualified training for professionals (also for those that move across borders within the EU) and mutual learning and cooperation on assessing the needs of children and their families.

Investment in research and analysis is essential to strengthen the evidence basis for effective child protection policies and services. Therefore, the use of platforms, such as the European Platform for Investing in Children (EPIC) and others, is fundamental to this effect in identifying and promoting best/evidence-based practices. In view of ESN directors, evidence is key in improving services' planning, management and provision or making the case for a particular investment³⁰. Therefore, a platform which gathers evidence-based programmes could play a key role in helping services directors and senior professionals to make such decisions. However, a key element in embedding evidence onto policy is not only to assess what works, but also for whom and in what circumstances. Therefore, the content in such platforms needs to be tailored to different audiences in order to ensure that the stakeholders find the evaluations relevant for their needs. At European level, assessing the transferability and sustainability of practices is particularly relevant. Therefore, a European platform compiling evidence needs to look as well at implementation frameworks, scaling up strategies and address the practical implications of replicability³¹.

Concluding remarks

The Italian model PIPPI has a number of interesting elements which are in line with current developments in child protection across a number of European countries. The coordination between different services at local level and the need to involve the child, the family and the wider network in assessment and planning is recognisable in the context of child protection across Europe. In Hungary, the municipalities have the responsibility of maintaining a signalling system to identify children at risk and coordinating the services' response. The PIPPI programme has based its assessment model on the UK's Looked after Children approach, which has also been adopted by municipalities in Sweden. Swedish municipalities have subsequently adopted a linear approach to assessment, planning, and then intervention. However, this approach does not always follow the processes and circumstances of high risk families that at times can be quite chaotic. The integration of assessment and planning presented in the PIPPI model is also being

and Care services for children under 3 years of age in Hungary, 2010 – 2014" at the OPEN DAYS, 12th European week of Regions and Cities, Brussels, 6-9 October 2014. Downloadable at: http://ec.europa.eu/regional_policy/conferences/od2014/presentations_frame.cfm.

³⁰ European Social Network, Contemporary issues in public management of social services in Europe – Innovation, research and evidence-based practice, 2014.

³¹ Sundell K., Ferrer-Wreder L., Fraser, M. W., Going Global: A Model for Evaluating Empirically Supported Family-Based Interventions in New Contexts. *Evaluation and the Health Professions*, 2013.



discussed by child protection services across Europe. The quasi-experimental approach adopted in the PIPPI model and the promising results which have been obtained so far highlight the relevance of evidence-based practice for the design and implementation of effective child protection services.

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