ESN Workshop
„Integrated Care and Support for Children“

Dr. Anja Langness, Bertelsmann Stiftung
Lisbon, 29 November 2018

With financial support from the government of North Rhine-Westphalia and the European Social Fund
Principles of Our Work

Our goal is to contribute to social reform. That is only possible if we enter into an ongoing dialogue with all societal stakeholders and ensure the work we do is always valued by the public.
Our Topics

- Improving Education
- Shaping Democracy
- Advancing Societies
- Promoting Health
- Vitalizing Culture
- Strengthening Economies
Organization

- 70 projects
- 380 employees
- €90 million spent on projects each year
- operational non-profit impartial
„Leave No Child Behind“

1. background of the project and key findings
2. a comparative study in 12 EU member states
3. first results

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1. background of the project and key findings
At risk of poverty or social exclusion, abbreviated as **AROPE**, corresponds to the sum of persons who are either:
- at risk of poverty,
- or severely materially deprived
- or living in a household with a very low work intensity.

The AROPE rate, is the headline indicator to monitor the EU 2020 Strategy poverty target.

„Poverty is the highest risk for a non-self-determined and non-self-depended life“

Prof. Peter Strohmeier, Head of Research
„Leave no Child behind“

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Growing up in poverty has adverse consequences for the whole life

Child poverty has consequences for participation, education, health, working life. The longer children live in poverty, the more serious the consequences!

➢ Stressful education biographies, lower educational qualifications
➢ Less opportunities for participation in non-formal education, culture, and leisure activities
➢ Poorer nutrition, riskier health behaviour, psychological problems
➢ Lower chances on the labour market

„the cycle of disadvantage“
- No automatism "once poor, always poor", but :
- Significantly lower opportunities over the entire life cycle
The initiative „Leave No Child Behind“

In 2011 the State Government of North Rhine-Westphalia and the Bertelsmann Stiftung launched the project

- aims to **improve development prospects** and **provide equal opportunities for all children** (but: focus on children in vulnerable situations)
- integrated and comprehensive approach including different sectors: child welfare, education, health, social services
- 40 municipalities take part in the initiative
- Municipalities create **local prevention chains**:
  - Systematic collaboration between stakeholders
  - Intention: improve the effectiveness of local support

➢ The **Bertelsmann Stiftung** is responsible for the **accompanying scientific research**
“Leave No Child Behind” promotes community-based prevention chains to support children and young people and improve their participation in society.

Prevention chains without gaps to improve prospects for the future of every child!

- Pregnancy and birth
- Pre-school age
- Classroom and extracurricular learning
- Adolescence
- Career starters

a healthy upbringing — strengthening families — supporting learning — enabling inclusion
Definition of local prevention for children and young people

- The idea of the initiative „Leave No Child Behind“ is to **think from a child‘s point of view**
- Prevention aims both at a direct influence on the **behaviour** of the target group and at a positive change in the target group‘s **environment**
- Prevention of risk factors and strengthening of protective factors → **resilience**
- Prevention includes
  - **universal preventive offers** that take effect before a problem arises (e.g. home visitation programmes for all families), prevention in pre-school, schools, health care.
  - **targeted approaches**, that support the most disadvantaged (e.g. specialised programmes for families in need)

*Definition correlates with the commission‘s recommendation „Investing in Children: breaking the cycle of disadvantage“ (2013)*
The accompanying research 2012 – 2015 shows, prevention/social investment works if…

- the mayor and council introduce and implement a strategic agenda
- there is inter-administrative cooperation on operational and financial matters
- all agents have the welfare of children in mind and act accordingly
- municipality action is evidence-based and impact oriented
- it is linked up more strongly with regulatory bodies and medical services
- implemented in early childhood
- it strengthens parents and their competencies

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November 29th, 2018
In Germany, we need to strengthen local arrangements so as to leave no child behind.

Social environments have the biggest impact on children’s and youth’s future opportunities

Diagnostics, evidence-based operations, controlling and impact assessments are underdeveloped in most municipalities.

Improved child and youth care services management helps mitigate costs.

Access to the target group can be gained via preventive services provided by health departments, though these are the least developed.
Why are we supporting a European comparative study on prevention policies for children and adolescents?

- Prevention is neither consolidated nor comprehensive in Germany.
- Prevention is highly dependent on the goodwill and capabilities of local actors.
- Education, social welfare and healthcare are regulated on different levels of government, requiring considerable coordination effort to ensure successful prevention.

➢ How do other European countries deal with this topic?
➢ What can Germany learn from other European states regarding child-centred policies?
Study

“Governance and Incentive Structures for the Enhancement of Municipal Prevention Policies for Children and Young People in a European Comparison”

financed by

research by

In cooperation with

Dr. Falk Ebinger,
Vienna University of Economics and Business

Dr. Renate Reiter
Leipzig University
2. a comparative study in 12 EU member states
Relevance of the Study

- Children and young people are the most vulnerable group concerning poverty and social exclusion.
- **Early interventions and prevention** as the most effective measures to prevent exclusion and support better life chances.
- **Integrated approaches** as the most promising strategy for effective implementation.
- The **municipal level** as most important actor for building resilient and inclusive communities and to coordinate integrated preventive measures.

*See also the Recommendation of the European Commission “Investing in Children: Breaking the Circle of Disadvantage“ (2013/112/EU)*
Goals of our study

- Starting point:
  - Rather weak and fragmented prevention policies in Germany
  - Variance of preventive concepts and understandings in European member states
  - Different notion of “social investment” in prevention

- Project goals:
  - Mapping of different approaches and governance concepts in 12 member states (Austria, Denmark, the Czech Republic, Finland, France, Germany, Ireland, Lithuania, the Netherlands, Sweden, Spain, United Kingdom/England)
  - Identification and exploration of transfer potentials of successful concepts of prevention policies for children and young people
Prevention policies in different institutional settings: towards convergence?

- Preventive concepts for children differ throughout the European member states
  - Respective policy content and the understanding of the term “prevention” or “social investment”
  - Universal vs. targeted programmes
  - Obligatory vs. voluntary programmes
  - Centralisation vs. decentralisation
  - Fragmentation vs. integration of services
  - Financing and governance arrangements

- Initiatives of the European Union: support preventive measures by “soft law”
Methods

1) **Core inventory**: general mapping of preventive concepts, governance approaches and key institutions in 12 European member states

2) **Deepened analysis** through case studies in three member states (France, Austria, the Netherlands)

3) **Analysis of transfer potential** of successful preventive concepts
   
   Problem: Administrative organization for preventive policies is usually rather complex
   - Cross-country comparisons based on specific institutions (e.g. child-care facilities) would be misleading
   - Therefore different approach: small case scenarios, depicting typical situations to be addressed by preventive measures
3. First results of the comparative study
Some Findings

• **Territorial Consolidation**, concentration of preventive measures in one hand on a decentralised level:
  → Denmark, Netherlands, Sweden, Finland

• Development of **networks** for cross-sectoral, institutionalised cooperation:
  → Austria, France, Germany

• Persistence of **fragmentation** and agencification, little or no institutionalised cooperation:
  → England, Ireland

→ Persistence of Welfare state regimes and central-local-relations?
Territorial Consolidation

- **Denmark, Finland and Sweden**
  - Long-standing tradition of extensive welfare regimes and municipalities competent in educational and social matters
  - Critical gaps to the health sector → partly the counties/regions competence
  - e.g. multidisciplinary family centres: overcome the gap between health care and youth welfare/education

- **Netherlands**
  - new Child and Youth Act (2015): Decrease the number of children in specialized care and increase preventive and early intervention support
  - Bundling all services for children in the municipalities, “social neighbourhood teams”
  - Assumed lower costs of municipal service provision, 15% budget cut on youth
Networks

- **France, Germany and Austria**
  - Development of network structures to overcome the sectoral fragmentation of competences
  - “Early aids” in Austria: Regional networks including social, medical and (early) educational sector, only up to the age of school start
  - “Leave No Child Behind” and other programs in Germany: Building up of municipal coordination structures
  - France: intersectoral networks and specialised centres for mother and child protection, preschool education teams, only loose connection to obligatory school
Fragmentation

- **England and Ireland**
  - Strongly centralised, single purpose national health service
  - Specialised centres for (expecting) mothers/parents and their children uniting different sector professionals
  - Nearly no cross-sectoral cooperation structures in the preschool area
Conclusion: Path taking, not path breaking

- In all countries tendency to strengthen prevention and to enhance the cooperation between different sectors, but to different degrees

- Tendency to universalist approaches

- Health sector: trend towards decentralisation and the creation of specialised “centres” uniting professionals from different sectors

- Models of implementation of preventive policies remain mostly in the paths formed by characteristics of welfare system and administrative tradition
The “Graz System”

Newborn welcome Visit*

Parent-Child Service*
- 15 centers
- multi-professional consultation
- service provision → bonding

Information

delgation

Early Aids

Special Programms
- teenage dropouts
- Special needs

Interventions

City of Graz
Children & Youth Department

School Medical
Service

Age-related programs

Open Services
- Activities for parents & children

“Youth Calender” events & assoc.*

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Thank you!

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