

The Federal Foundation Mother and Child

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Introduction

ESN represents directors of social services across Europe, with 70 member organisations in 27 European countries. Supporting young families and women at risk of poverty is one of the core duties of public services at the regional and local level. Some of the services provided include parenting courses, training to facilitate the integration of parents in the labour market and other services (such as housing or counselling) in order to empower families to participate fully in society. All these measures contribute to a positive environment for children to grow up in. Furthermore, local and regional authorities also provide childcare and child protection services to meet the specific needs of the most vulnerable members of the family¹. For many disadvantaged families this support constitutes their only chance to break out of the cycle of deprivation, especially in the current economic context.

The crisis has also several negative impacts on regional and local public services, which are facing a delicate situation where they have to do more with less. The Federation Mother and Child complements the work of public services in Germany, mainly by financially supporting pregnant women experiencing difficulties and by facilitating access to other services. In this context of economic recession, the system of financial support offered by the Federal Foundation is timely as it helps to meet needs not covered by other public funding, thus complementing the existing range of services and preventing situations of “peak need” from escalating. This also makes the delivery of grants more cost effective, as personnel and administrative costs may be reduced and funds go directly to service users. The aim of this paper is to analyse the work that the Federal Foundation and other services across Europe carry out in the areas of family policy, access to services, early prevention and the assessment of outcomes.

1. Family policy and access to services: the situation of migrants

Migrant women (especially those from outside the EU) face a “double disadvantage” in the labour market, as their unemployment rates are higher than those of migrant men or of women born in their country of residence. Research suggests that some issues having an impact on their participation in the labour market are their limited rights to access public services, lack of adequate housing and discrimination in the labour market². Furthermore, having a child less than five years of age reduces the labour force participation of migrant women to a greater extent than it does for country nationals, mainly because they face more barriers to accessing childcare services. Children living in a migrant household also face a higher risk of poverty than children

¹ More information about the specific areas of work can be found in the report of the ESN working group on services for children and families: <http://www.esn-eu.org/children-and-families/index.htm>

² Rubin, J. et al (2008): *Migrant women in the EU labour force*. RAND Europe.

born in their country of residence³. It follows that any policy aiming to promote the wellbeing of women and children needs to pay particular attention to the situation of migrants.

Nearly one third of the recipients of assistance from the Federal Foundation from 2006 to 2008 were citizens from foreign countries. The Foundation also publishes an information brochure in three foreign languages in order to facilitate the access of migrant women to their services. There is the question, however, of whether this is sufficient to overcome the language barrier of migrant women who could use this service. Moreover, the eligibility criteria of the Foundation require that women should be domiciled in Germany in order to receive grants, which makes access difficult for asylum-seekers or illegal immigrants. The fact that the pregnancy counselling services delivering this assistance are in many cases Christian associations may also be a deterrent for women from other religious backgrounds, unless special measures are taken to be sensitive to this.

In addition to being one of the most vulnerable groups in society, migrants experience more problems than the rest of the population when it comes to receiving social care services. Some of the barriers they face are language difficulties or lack of awareness of the existing social care services. The access of minority groups to services can be promoted by identifying the equality impact in the development of policies (equality proofing), developing services for specific minority groups (such as asylum seekers and refugees), being aware of different cultural and religious differences, developing equality tools for carers, feedback mechanisms for users and employment policies aimed at increasing the diversity of staff⁴.

On this last point, there is still much progress to be made, as migrants are underrepresented in the public sector. Some of the barriers to increasing the number of migrants employed by the public sector are the fact that municipalities may be criticised if they are perceived to be giving migrants preferential treatment, the situation of undocumented migrants, barriers to employing non nationals in public administration posts and the lack of proficiency in the language (not always justified by the job specification). There is also the issue of recognition of qualifications acquired in other countries, as well as the difficulty of finding suitably qualified applicants from certain migrant backgrounds⁵. This underrepresentation in the public care sector is not merely a symbolic issue but one of great importance, as local public services are usually an important employer in their area. There is also a business case for diversity as having a more diverse workforce improves the image of the organisation and allows it to meet the specific needs of migrants more effectively.

³ The Social Protection Committee (2008). *Child Poverty and Well-Being in the EU - Current status and way forward*. Brussels: European Commission. Directorate-General for Employment, Social Affairs and Equal Opportunities, Unit E.2

⁴ Pillinger, J. (2004): *Managing Diversity in Public Health and Social Care in the Interest of all Citizens*. European Social Network.

⁵ Spencer, S. (2008): *Equality and diversity in jobs and services: City policies for migrants in Europe*. European Foundation for the Improvement of Living and Working Conditions.

2. Early intervention and prevention for parents and children: partnership between services

The Federal Foundation gives a financial incentive for women to contact pregnancy counselling services, who can detect needs that go beyond material deprivation. This enables the early prevention of risk or harmful situations, as women who are suffering domestic violence get in touch with staff trained to detect these cases.

In Germany, as in other European countries, women who are the victims of domestic violence contact GPs in the first place when seeking for help⁶. Therefore health care staff need to be trained in the detection of these situations in order to be effective “door openers” to services for women and children suffering domestic violence. In Spain, the fight against domestic violence is one of the priorities of the Ministry for Gender Equality. In 2004, a Law on Integrated Measures against domestic violence was passed, which placed much emphasis on the training of medical staff in the detection of domestic violence⁷. This law led to the inclusion of assistance to women and children who are victims of domestic violence in the services offered by the Spanish NHS in 2006. A common protocol was created the following year for actions by health care staff in cases of domestic violence, training and information was provided concerning the legal implications of gender violence, as well as on how to carry out a proper follow-up and referral to the authorities and social services if appropriate. This law also includes public education measures to encourage citizens to bring cases of domestic violence to the attention of the authorities.

In addition to early intervention, the prevention and protection of children at risk of harm or social exclusion requires an efficient follow-up and the coordination of services for children and their parents. The death of “Baby P” in England in 2007 after he had been seen by health and social services on numerous occasions was a tragic reminder of this. After the death of the child, the Secretary of State for Children, Schools and Families commissioned a report on the progress made by services for children in England since the reform introduced in 2003 following another case of death by negligence⁸. The report found that the implementation of the existing guidance was still an issue, especially in the field of inter-agency cooperation. The lack of qualified staff, heavy case loads, doubts about when to share confidential information and difficulties in carrying out the appropriate follow-up were cited as some of the barriers.

Similar conclusions were drawn from a consultation⁹ amongst workers in children's services in Ireland. Some of the solutions indicated to overcome these barriers were the following:

- Information barriers: information booklets on the role of services, guidance on cooperation and information sharing.

⁶ German Ministry for Family, Elderly and Youth (2007): *Lebenssituation, Sicherheit und Gesundheit von Frauen in Deutschland*.

⁷ Spanish Ministry of Gender Equality (2009): Evaluación de la aplicación a tres años de la Ley Orgánica 1/2004, de 28 de diciembre, de medidas de protección integral contra la Violencia de Género.

⁸ Lord Laming (2009): *The Protection of Children in England: A Progress Report*. London: Stationery Office.

⁹ Children Acts Advisory Board (2009): *Inter-agency Co-operation in Irish Children's Services: The Views of Some Stakeholders*.

- Service barriers: analysis of gaps in service coordination, provision of a 'safe space' for agencies to discuss inter-agency cooperation.
- Organisational barriers: showcase 'models', training on cooperation, and support to attempts to measure the benefits of cooperation.
- Resource barriers: highlight experiences of inter-agency work as a more effective way to work, creation of a centre of inter-agency cooperation expertise.

The Foundation helps to bring closer the voluntary and public sector, as the pregnancy counselling services in the framework of the Federal Foundation are offered by social welfare or Christian affiliated organisations. This takes place in the framework of a trend in Europe towards the integration of services¹⁰. However, as seen, effective inter-agency cooperation is a complex issue that requires overall management structures and clear guidance about sharing information.

3. Evaluating outcomes:

The pregnancy counselling services are responsible for ensuring that the grants given to pregnant women are spent in a proper way (e.g. in clothes or furniture for the baby). But aside from auditing, it is unclear how these centres evaluate the impact of the counselling services they provide. There is neither a thorough performance measurement of other areas of action of the Federal Foundation (i.e. assessing its role as "Door Opener" in terms of the number of referrals to other services carried out or the number of cases of domestic violence that it was able to detect). Some of the evaluation tools that could be used can be found at the EVALSED resource guide for the evaluation of socio-economic development of DG REGIO ¹¹.

A possible reason for the lack of comprehensive evaluation mechanisms is that the ultimate goal of the Federal Foundation is difficult to measure. According to German Law, the role of the Foundation is "to provide means for pregnant women that contact counselling centres because they are in need with the aim of facilitating the continuation of pregnancy"¹². It is not clear how this could be measured satisfactorily, as women may decide to continue or terminate their pregnancy for reasons outside the support given by the pregnancy counselling services.

Moreover, the Foundation assesses needs mainly on the basis of the income of the pregnant women requesting grants. On this note, it is worth remembering that in addition to combating poverty it is necessary to focus on tackling social exclusion and that the latter goes beyond lack of income, such as the case of women addicted to substances or with mental health problems. The Foundation does indeed give some margin of manoeuvre to the pregnancy counselling services for including other situations aside from material deprivation. However, it is not clear how this would work in practice, as the Foundation chose deliberately not to provide a definition of what constitutes an emergency situation. It is therefore important to give guidelines on what cases would be eligible as there is the risk that if there is no guidance on this issue and

¹⁰ European Social Network (2000): *Building partnerships for an inclusive Europe*.

¹¹ http://ec.europa.eu/regional_policy/sources/docgener/evaluation/evalsed/index_en.htm

¹² <http://www.bundesstiftung-mutter-und-kind.de/errichtungsgesetz.html>

assistance “must be provided quickly and in an unbureaucratic manner”¹³, funds could be allocated differently in each pregnancy counselling centre.

It is also not clear how the Federal Foundation or the Bundesland based foundations monitor the activities of the voluntary sector organizations to which they have delegated the allocation of grants. Monitoring the quality of services is especially necessary when the public sector outsources some of its services, as public authorities remain ultimately accountable for the quality of the services delivered. Furthermore, the recession makes it all the more necessary to justify that services are offering “value for money”, which can become less clear with a more diversified provision. The quality of services can be ensured through the self regulation of professionals, quality management by third parties and the accreditation of staff/qualifications/services/providers by the public sector¹⁴.

4. Concluding remarks: the Federal Foundation and policy making at the EU level

The work of the Federal Foundation contributes to providing income support, promoting inclusion in the labour market of pregnant women at risk of poverty through assistance in seeking employment or vocational training courses and their access to services. Therefore it has a positive impact on the three strands of the EU Active Inclusion strategy¹⁵.

Supporting the access of women to employment is necessary in order to make labour markets more inclusive and economies more competitive, as female employment and activity rates are lower than those of men in almost all European countries. Specific support for pregnant women is crucial for this, as having small children reduces female employment rates substantially (see figure next page). Moreover, having parents in employment also decreases to a great extent the risk of children being poor¹⁶.

In addition to investment in human capital and job search, the inclusion of women in the labour market requires making sure that it is possible to combine work and family life. One of the most important barriers to this is the lack of children services. Esping-Andersen argues¹⁷ that the lack of services to support the combination of having children and a job “has led to two ‘sub-optimal scenarios’: a ‘childless low fertility equilibrium’ or a ‘low income-low employment equilibrium’”.

It follows that family policy is key to promoting gender equality, demographic growth and the increase in employment rates. The EU plays a role in shaping policy in this area: the EU revised Directive on Parental Leave¹⁸ extending parental leave constitutes a positive initiative. Notably, it

¹³ The Federal Foundation Mother and Child, Host Country Report, German Federal Ministry for Family Affairs, Senior Citizens, Women and Youth.

¹⁴ Commission staff working document - Biennial Report on social services of general interest {COM(2008) 418 final}

¹⁵ Commission of the European Communities (2008) Commission Recommendation on the active inclusion of people excluded from the labour market, Brussels (<http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2008:307:0011:0014:EN:PDF>)

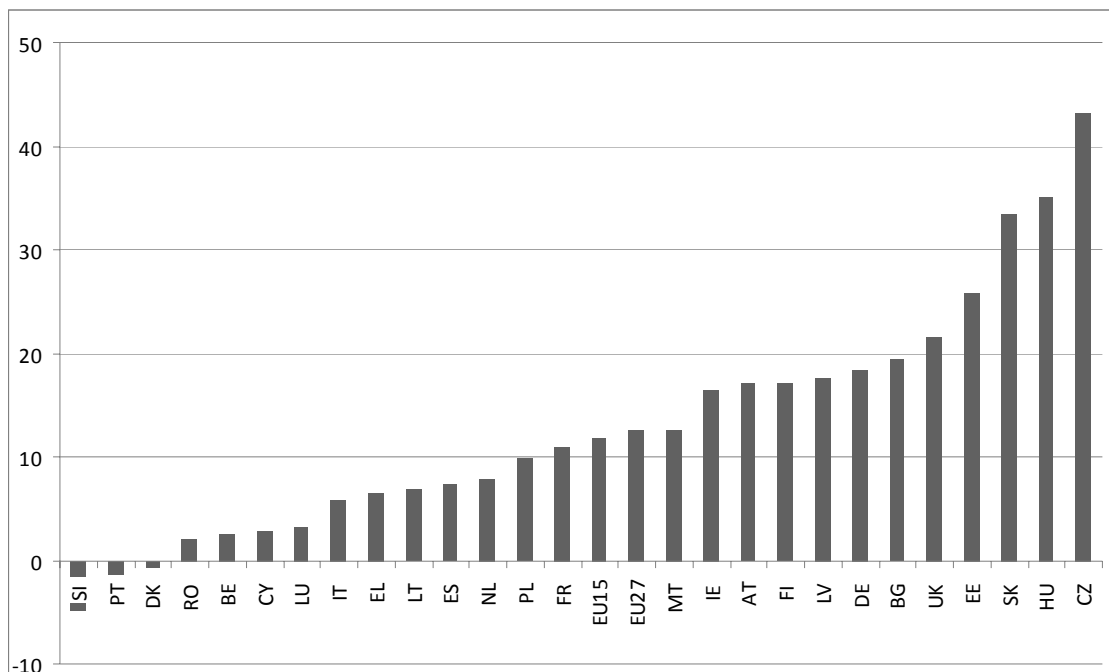
¹⁶ The Social Protection Committee (2008). op. cit.

¹⁷ Esping-Andersen, G. (2009): *The incomplete revolution: Adapting to women's new roles*. Cambridge: Polity Press.

¹⁸ <http://ec.europa.eu/social/main.jsp?langId=en&catId=89&newsId=650&furtherNews=yes>

includes the possibility for parents to request changes to their work schedules for a limited period and for employers to assess the situation of employees with children who have a disability or long-term illness.

Employment impact of parenthood (2007)¹⁹



Another important area of work of the EU is promoting the creation of childcare places through the Barcelona targets. The number of childcare places set out by the EU as a target for 2010 has not been achieved by Member States, which should lead to a reconsideration of the approach taken at the European level to promote services for children. Besides focusing on the quantity of childcare places, national governments and the EU should focus on access to services for families living in disadvantaged areas. Access is constrained by affordability: European funding instruments can make a difference for these families by supporting services for children in disadvantaged areas. ESN recommends making family policy one of the priorities of the EU 2020 Strategy.

¹⁹ The difference in percentage points in female employment rates (age group 20-49) without the presence of any children and with presence of a child aged 0-6. Source: EU Labour Force Survey.