My Village, My Second Family: A Rural Community that Cares		
Organisation(s):	COCEDER- CDR GRIO	
Country:	Spain	
Contact:	policy@esn-eu.org (we will function as an intermediary between you and interested organisations who want to learn more about the practice)	
Theme: *Choose at least one option*	☐ Ageing & Care ☐ Asylum & Migration ☒ Young People ☒ Support for Children & Families ☒ Community Care ☒ Integrated Care & Support ☐ Co-Production ☐ Disability ☐ Housing & Homelessness ☐ Artificial Intelligence ☐ Digitalisation ☐ Quality Care	☐ Labour Market Inclusion ☒ Social Inclusion ☐ Technology ☐ Workforce and Leadership ☐ Social Benefits ☐ EU Funding ☐ Social Services' Resilience ☒ Mental Health ☒ Person-Centred Care ☒ Research & Use of Evidence ☐ Management & Planning ☐ Other, please specify:
Principles of the European Pillar of Social Rights: *Which principles does your practice cover?Check the 20 principles here.*	☒ 1. Education, training, life-long learning ☐ 2. Gender equality ☒ 3. Equal opportunities ☐ 4. Active support to employment ☐ 5. Secure and adaptable employment ☐ 6. Fair Wages ☐ 7. Transparent employment conditions ☐ 8. Social dialogue ☐ 9. Work-life balance ☐ 10. Healthy, safe work environment	☒ 11. Childcare and child support ☒ 12. Social protection ☐ 13. Unemployment benefits ☐ 14. Minimum income ☐ 15. Old age income and pensions ☒ 16. Health care ☒ 17. Inclusion of people with disabilities ☐ 18. Long-term care ☐ 19. Housing and assistance to homeless ☐ 20. Access to essential services
Current status of the practice:	☐ Concept and Design Phase ☐ Testing or pilot phase ☐ Temporary practice that has terminated ☐ Temporary practice that is ongoing and has a termination date ☐ Established and ongoing practice ☐ Scaling Up and Transformation Phase ☒ Other (please specify): Long-established practice with demonstrated outcomes.	
Summary: *Please summarise the practice in maximum 3*	CDR Grío supports children and young people under the child protection system in the rural municipality of Codos, Zaragoza. Through the Río Grío Children's Centre, it provides personalised socio-educational and therapeutic care, using the rural environment and local community as active agents for emotional recovery, social	

sentences. This will be the disclaimer of your project on our website. Example here.	development and belonging. Since 1997, the project has supported 203 children and demonstrated improvements in behaviour, wellbeing, school attendance and community engagement.
Context/ Social issues addressed *Please explain the problem you attempt to solve with your practice.*	Children and young people under guardianship, including those with disabilities, often require stable, protective and therapeutic environments that can respond to complex life histories, emotional trauma and disruptive behaviours. In rural areas, social services may face structural challenges, but CDR Grío turns the strengths of the village of Codos into a care asset: proximity, neighbour participation, contact with nature and strong community relationships. The practice addresses the need for holistic child protection that combines professional support with a safe, welcoming community capable of helping children heal, learn and develop a sense of belonging.
Objectives: *Please provide **a maximum of three** objectives in bullet points.*	1. Protect children and young people under the child protection system by providing stable, safe and personalised residential care. 2. Promote emotional healing, self-regulation, social skills and school participation through socio-educational and therapeutic support. 3. Mobilise the rural community and natural environment as active resources for inclusion, mutual care and long-term personal development.
Activities: *Please describe the activities put in place to achieve the objectives (maximum 400 words).*	The practice is delivered through the Río Grío Children's Centre in Codos, a rural village of 217 inhabitants. The centre has five residential units for minors, with or without disabilities, who are under guardianship. Each child receives personalised socio-educational and therapeutic support designed around their needs, life history and best interests. The methodology combines individualised care, repair of harm, conscious affection, preparation for autonomous adult life and the development of emotional self-regulation and social skills. A multidisciplinary team of psychologists, educators, social workers, a psychiatrist, sociologists, nurses and doctors coordinates holistic care and links the children with wider community networks. The rural setting is intentionally used as a therapeutic and educational resource: nature, community spaces and everyday village life provide opportunities for learning, coexistence, responsibility and belonging. Local residents, older people, families, children and young people participate in shared activities, creating an extended family environment and strengthening mutual care. The project also promotes community activities, family involvement and neighbourly support, enabling children to build reference relationships and experience the village as a safe and welcoming place.
Outcomes: *Please explain what the results were/are so far and how you evaluated this (i.e. statistics, a study, or feedback)*	Since 1997, 203 children have been supported by the project. Quantitative and qualitative developmental evaluations have assessed progress among children, professionals, families and the community environment. Results show a 46% reduction in disruptive behaviours, with monthly incidents per child falling from an average of 1.8 to 0.97. Emotional wellbeing has also improved: average SDQ questionnaire scores decreased from 22 to 15, with significant improvement in 64% of the sample. School attendance increased from 68% to 91%, while expulsions and suspensions fell from six cases per year to one. Community engagement is strong:

	120 activities have involved local residents, 65% of the local population has taken part in at least one annual activity, and 62 village families have welcomed children into family and community life. Semi-structured interviews show that 78% of professionals and 72% of minors perceive improvements in emotional regulation and sense of belonging.
Funding Source	EU Funds: ESF+ ☒ INTERREG ☐ ERDF ☐ ERASMUS☐ RRF ☐ other ☐ ☐ National Government Funds ☒ Regional Government Funds ☐ Local Government Funds ☐ Private Sponsorship / Public-Private Partnership ☐ Financial contribution of People using Services ☐ Other, please define:
Links to supporting documents: *e.g. project website or report of the practice, articles*	El proyecto del CDR Grío, el centro de menores Río Grío, seleccionado como buena práctica
Comments and tips *i.e. for people willing to implement your Practice in their service*	Rural communities provide an ideal environment for the emotional healing of children and young people. The project's success is based on the intervention team's methodology. The approach is twofold. On the one hand, it is essential to focus on each child and young person, designing a personalized process. On the other hand, there is community activation work developed with careful consideration over the years. Our experience is open to being shared and transferred to other contexts.