

Poland

# Tackling child poverty and promoting the social inclusion of children

## A Study of National Policies

Irena Wóycicka

The Gdansk Institute for Market Economics

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## 1. Preface

Poland is the country with the highest percentage of children living in poverty among the Member States. According to the latest data published by Eurostat<sup>1</sup>, 29% of children and young people under 18 lived below the poverty line equal to 60% of national median equalised income. Also, the relative poverty gap experienced by children and youth in Poland is the deepest for all EU-25 countries.

A significant poverty risk among children and dimensions of social exclusion that afflicts children in Poland are a long-lasting phenomenon. Among factors which lead to poverty, such as low education and low occupational activity of parents, a large number of dependent persons and living in rural areas have remained invariable for many years. However, new factors have appeared, which lead to an increased poverty risk for families with children. High unemployment, which had prevailed particularly during the years 1999 – 2005 contributed to a considerable increase of the poverty risk among the whole population of Poland, including children. Transformations in the labour market (increased competition and requirements regarding employees), as well as changes in the household structure: increasing number of single parents and nuclear families, causes a long-lasting deactivation of women, who bring up children, particularly those with lower education. Cultural factors, such as the attachment to traditional distribution of roles in the family, as well as a serious shortage of child care services contribute to that situation.

In many areas, such as access to education, health or housing standard, one may notice clear progress since 1989. Notwithstanding major advances in many fields, Poland still continues, in many areas, such as health, housing and access to child care, to remain among those member countries of the EU which record worse results. Access to education for children and youth has improved considerably, yet access to kindergarten care looks much worse, and differences in quality of education still persist. Health indicators have improved significantly since 1989, but families with children continue to experience difficulties in accessing health care services. The situation of disabled children in educational, health care and rehabilitation systems is especially difficult and calls for substantive improvement. The housing situation, particularly of families with larger numbers of children, is very bad.

Underdevelopment of public services, such as day care and pre school educational facilities for children, health care allowing for early diagnosis and corrective treatment, family and pedagogical-psychological counselling, particularly in rural areas and small towns, reflects negatively on the wellbeing of children. Significant financial limits in the families lead to the lack of access for children from poor families to such services, which are of the market nature, like leisure and culture.

Policies addressing children should cover both efforts to counteract poverty and to extend as well as improve the quality of public services. Policies for eradicating poverty among children should focus, above all, on measures allowing for combining employment with family life as well as supporting employment and education of women raising children, in particular ensuring better access to low-cost high quality day care and educational services for young children. Consideration should also be given to the possibility of providing additional financial support, particularly to the poor families with multiple children.

There is a need for developing the social infrastructure, particularly in rural communities and small towns. The observed improvement in certain areas, such as care for children deprived of

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<sup>1</sup> Income reference 2004 based on SILC 2005.

parental care, development of counselling, intervention in critical situations and social therapy or integrated and early diagnosis and help for disabled children, proceed too slowly. Many projects remain still on paper or at the stage of pilot programmes, limited in their reach.

There is also a need for stronger preferences for preventive actions rather than a treatment of long-lasting and hard to reverse negligence. A particularly significant area where expedited intervention is required includes inequalities in the education system for children and young people, including disabled children, and the development of continuous education and vocational training, particularly among women who bring up small children.

Unfavourable situation of children in Poland should find a response in the strengthening of policies, to a little extent oriented on the problems of children so far. Open Method of Coordination positively influenced the perception of problems related to poverty and the risk of children exclusion. However, a decisive improvement requires a strategic approach, consistence in activities and breaking through the sectoral divisions, which dominate Polish policies. Problems regarding coordination, governance and policy monitoring weaken the effect of even the best programmes.

## 2. Child poverty and well being in Poland

### 2.1. Poverty

Information concerning child and youth poverty in Poland is very limited. Data regarding poverty, published so far by the Central Statistical Office and estimated on the basis of HBS, to a limited extent only included the issues of child poverty<sup>2</sup> and failed to allow also for systematic measurements of persistence of poverty. Basic data resulting from the SILC research, which was conducted for the first time in Poland in 2005, were published by Eurostat. However, a more extensive SILC research report will be made available by Polish Central Statistical Office only by the end of 2007. The SILC research data change the picture of child poverty, resulting from previous HBS based estimates. Attention is drawn, first of all, to a much larger range of poverty among single-parent families and households with two adults and two dependent children, as compared to both previous HBS based estimates, published by the Central Statistical Office and the HBS based estimates for Eurostat. This issue requires further methodological explanations<sup>3</sup>.

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2 Until 2006, the only systematic information, published by the Central Statistical Office, regarding child poverty consisted of the HBS based estimates of poverty dimensions among biological types of households.

3 The Central Statistical Office is currently preparing a paper which explains methodological differences of applied approaches to the poverty estimates in Poland.

### 2.1.1. Extent of Material Poverty of Children

SILC research confirms previous results of national statistics, which indicate that children and youth in Poland are particularly exposed to the poverty risk. According to the newest data published by Eurostat, Poland is the country with the highest percentage of children living in poverty among the EU countries. In 2004<sup>4</sup>, 29% of children and young people below 18 years of age lived below the poverty line equal to 60% of national median equalised income<sup>5</sup>. Although Poland is characterised also the highest indicator of the poverty rate for the total population, nevertheless this fact does not fully explain such a high percentage of children and young people at risk of poverty. Differences between the risk of poverty of adult population (18 years old and over), and the at risk poverty rate among children and young people are much larger than average in the EU-25 countries (comp. Table 1).

Table 1. At risk poverty rate by age 2004 (poverty line: 60% of national median equalised income after social transfers)

Age	Poland	EU-25
Less than 18 years old	29%	19%
18 years old and over	18%	15%
Total	21%	16%

Source: Eurostat

Poland is in the group of the EU countries<sup>6</sup> where the poverty rate of households with dependent children is higher than the poverty rate for the whole population.

With the exception of families with one child, all types of households with dependent children in Poland are exposed to a higher than average risk of poverty. The highest risk of poverty applies to children who live in families with three or more children (45%), and to children depending on a single parent (40%).

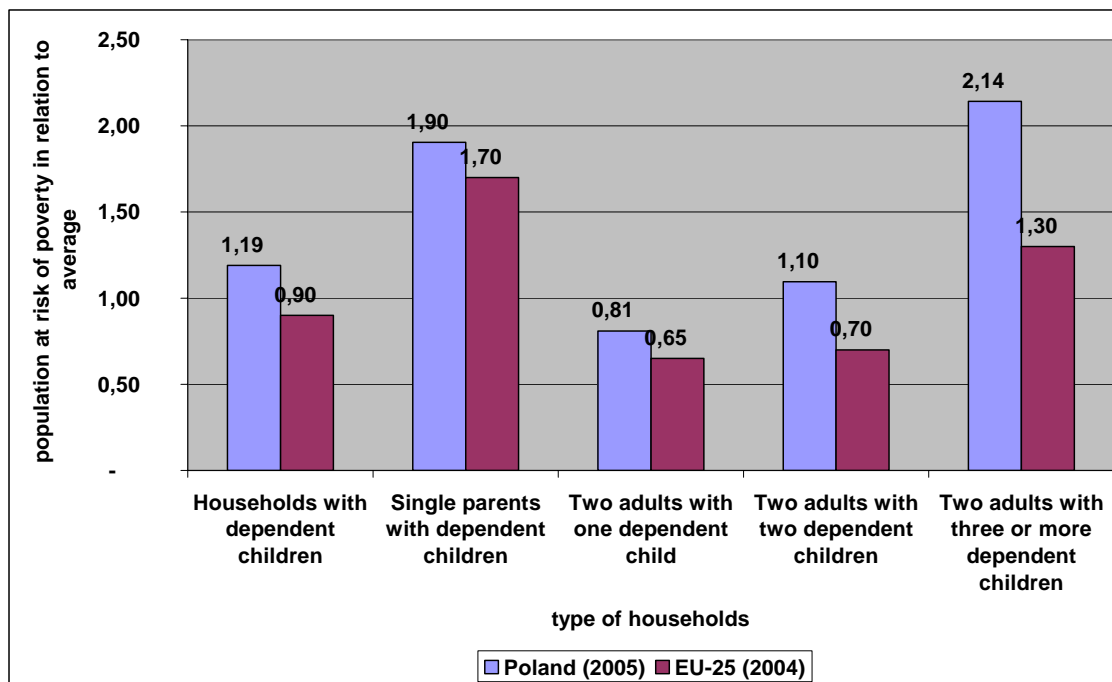
Differences in the risk of poverty of specific types of household with children are larger than average in the EU (see: Graph 1). This applies first of all to couples with three or more dependent children, which in Poland are at risk of poverty two times more frequently than the total population. Poland is in rather small MS group where higher than average risk of poverty rate applies to couples with two children. In spite of a high risk of poverty for children who live in single-parent households their poverty rate, as compared to the national average, is not as high as in many other EU countries.

<sup>4</sup> Income reference 2004 based on SILC 2005.

<sup>5</sup> These data, based on the SILC research conducted in Poland for the first time in 2005, do not include in-kind income, what, due to a large share of population making their living in the agriculture, may overstate the range of the child poverty problem. On the other hand, however, the applied equivalent scale results in a lower child poverty range in Poland than it would have been if the scale closer to the structure of Polish households expenditures was applied.

<sup>6</sup> This group includes, besides Poland, Slovakia, Romania, Holland, Austria, Malta, Hungary, Luxembourg, Lithuania, Italy and the Czech Republic.

Graph 1. Population at risk of poverty by type of households in relation to average at risk poverty rate (poverty line: 60% of median equalised income after social transfers)



Note: Dependent children are defined as all persons aged less than 16, plus those persons aged 16-24 who are in education.

Source: Eurostat, data for Poland for 2004, based on SILC 2005.

As it is in the case of the poverty rate, also the poverty gap, that children and youth suffer from in Poland, is particularly large. Average poverty gap for children and youth in Poland is larger than poverty gap for the total population of Poland and than average poverty gap in EU-25 (see: Table 2).

Table 2. Poverty gap in 2005 (for poverty line: 60% of national median equalised income after social transfers)

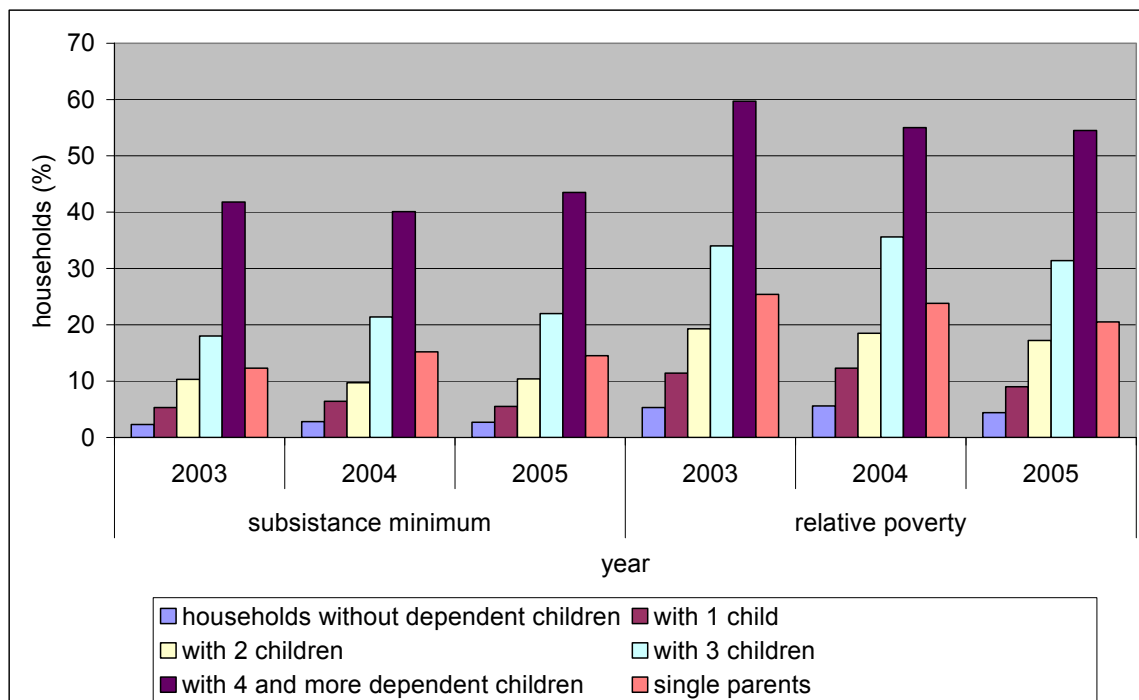
Age	Poland	EU-25
less than 18 years	33%	22%
18 years and over	29%	22%
Total population	30%	22%

Data for Poland 2004, based on SILC 2005.

Source: Eurostat

Changes in the methodology of poverty rates calculations, discussed earlier, make it impossible to present the poverty dynamics over time on the basis of Eurostat data. Available national HBS based data show certain reduction of the percentage of households with children, whose expenditures are below the relative poverty line, in 2003-2005, with concurrent increase of poverty rate measured in absolute terms (extreme poverty). (see: Graph 2).

Graph 2. Percentage of households which live in poverty, according to national statistics in 2003-2005.



Note: Relative poverty line – 50% of mean of equalised expenditure;

Extreme poverty- the extreme poverty is defined by the basket of goods and services, which covers only basic needs, whose satisfaction cannot be delayed.

Source: authors' calculation based on Polish CSO data, (GUS, Zasięg ubóstwa materialnego, 2003, 2005, [www.stat.gov.pl](http://www.stat.gov.pl))

Previous research does not allow for the assessment of the persistence of poverty<sup>7</sup>. However, some qualitative and quantitative researches point out that poverty becomes a persistent feature (Tarkowska 2005; Topińska 2005). It is a new phenomenon as compared to the beginning of 90<sup>8</sup>. The panel data of Households Budgets Survey in 2002 and 2003 show that almost every second person living in extreme poverty in 2001 lived in the extreme poverty also in 2002<sup>9</sup>. The research of Topińska shows that the factors contributing the most to permanent nature of poverty in Poland are first and foremost unemployment and the size of a household (number of children less than 14 years old)<sup>10</sup>. Also the place of residence differentiates the risk of permanent poverty to the disadvantage of those living in rural areas. A research conducted by Domański (2002)<sup>11</sup> and Warzywoda-Kruszyńska (2005) point out to occurrence of an advanced phenomenon of poverty inheriting in Poland.

7 SILC panel research, commenced in 2005 will allow for monitoring of this issue in the future.

8 The World Bank study conducted in Poland in the first half of the nineties pointed out to an impermanent nature of poverty. (World Bank 1995).

9 The studies of households budgets in Poland are not panel ones, so only fragmented data regarding permanence of poverty are available.

10 Topińska concludes that "...the household size is one of the most important determinants of the poverty dynamics. The basis for such a conclusion is constituted by very low "probabilities" of staying in poverty for persons, who live in small households, and relatively high for those who live in large ones." (Topińska 2005, p. 82-83).

11 Based on representative research conducted in 2000 in Bulgaria, Poland, Russia, Romania, Slovakia and Hungary, (Domański 2002, pp. 85-100).



### 2.1.2. Factors which Lead to Poverty among Children

Unfortunately, a complete analysis of the factors of high poverty risk among children and young people in Poland is not available. The analysis is limited by the fact that the existing data from SILC is not available in the full range yet. We can, however, mention several most significant factors which impact the high poverty in this age group: employment, education, demographic structure and regional differences.

**Employment.** A high unemployment constitutes a basic factor, which leads to a high poverty in Poland. In a particular way it affects young families, bringing up children, since young persons are more exposed to the unemployment risk than older people. Another factor, which leads to poverty of families with dependent children, is high occupational inactivity of women.

The risk of poverty of households with dependent children is strongly related to the employment status of the adult members of the households. According to the preliminary estimation of CSO based on SILC 2005, the poverty risk of the population living in households with dependent children where all adults are not in employment is significantly higher than in households with dependent children where all adult members of the household are in employment. In households with dependent children, where all adult persons are occupied, the risk of poverty is almost four times lower than it is in the households, where all persons are out of the labour market. The economic inactivity of adults is an obvious factor of poverty among children. However, we can also observe in-work poverty of households with children. Although the risk of poverty for jobless households with children is the highest, it is also high when there is only one person in employment (see: Table 3).

The data of Eurostat indicates that 16% of the active population living in households with dependent children are poor. Unfortunately, the data on the proportion of children living in poverty in the households with one or more adults in employment is lacking<sup>12</sup>.

**Table 3. Poverty rate of households with dependent children by employment status of the adult members of the household**

Number of adult persons in employment	Households with dependent children	Households without dependent children
no persons employed	56%	16%
one person employed	27,50%	12%
all persons employed	15%	8,5%

Note: For poverty line: 60% of national median equalised income after social transfers.

Dependent children: children living in households up to 16 years old or up to 24 years old in education.

Source: Preliminary estimation of CSO for 2004 based on SILC 2005.

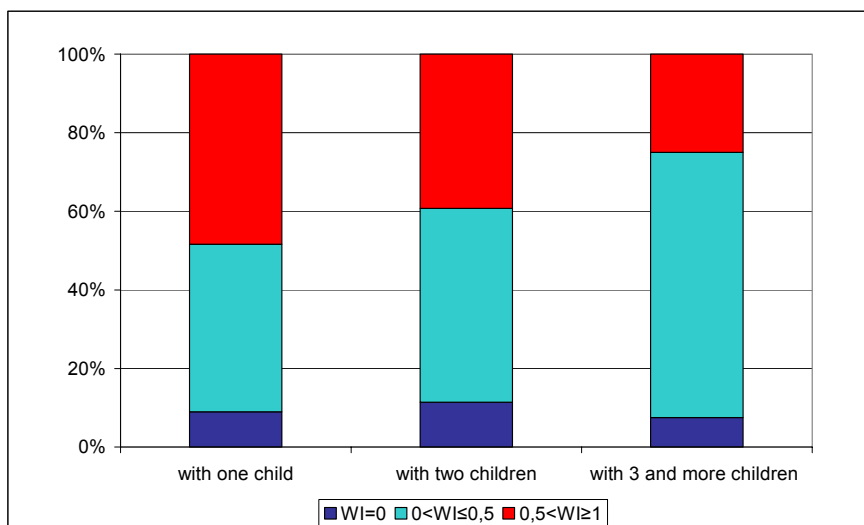
What is more, the impact of the labour market status on the poverty risk of the household members is clearly stronger in the case of households with dependent children than in the case of households without such children. These differences may be explained by the fact, that households with children are younger persons' households, where the deterioration of their economic status is under the influence of both the unemployment and the economic inactivity of the household members. In line with the age, economically inactive persons more and more intensively use the social benefits, which substitute for the employment income (disability pensions, early retirement and old-age pensions).

<sup>12</sup> According to the information of the CSO, this data will be published by CSO by the end of this year.

While the impact of the employment status of the adult members of households on the poverty rate is obvious, it would be useful to answer whether the adult members of households with children are more exposed on economic inactivity than those from childless households.

The research conducted by the Gdansk Institute for Market Economics shows that the proportion of households with the high employment activity of the adult members drops with the rising of the number of children in the household (Graph 3). It was also observed, that women often withdraw from the labour market when their child is small (0 – 3 years old), and then they face barriers coming back to work, what leads to their extended inactivity or unemployment<sup>13</sup>.

**Graph 3. Households by employment status of adult members of household by and type of household (for households with head aged 24-44)**



Note: WI - Employment status: percentage of the number of the employed persons in relation to the number of the adult persons (18 years old and more) in the household..

Children – person up to 14 years old.

Source: Own calculations based on research conducted by the Gdansk Institute for Market Economics, Project: Economic and educational activity and family responsibility financed by ESF. Representative study (6531 persons), data not published yet.

The results of the research of the Gdansk Institute for Market Economics point out the fact how important are those policies which would mitigate the conflict between the occupation and family responsibilities for reduction of unemployment and increase employment of women. They also indirectly point out the importance of such policies to counteract child poverty.

**Education.** A low education level of the household head clearly increases the poverty risk (see: Table 4). The impact of a low education on income results from both higher unemployment risk, higher economic inactivity risk and also lower remuneration. The research shows that the education is the most important factor that impacts occupational activity of women and men in Poland (Sztanderska, Grotkowska, 2007).

<sup>13</sup> The Study of the Gdansk Institute for Market Economics under the project: "Economic and educational activity and family responsibilities" financed by ESF. Representative study (6531 persons), data not published yet.

Table 4. Poverty risk related to the average as per education of the family head (2003- 2004)

	Extreme poverty <sup>a</sup>	Relative poverty <sup>b</sup>	Extreme poverty <sup>a</sup>	Relative poverty <sup>b</sup>
	2003		2004	
	Poverty risk related to the average			
Education of the family head				
Tertiary	0.1	0.1	0.1	0.1
Secondary	0.4	0.5	0.4	0.5
Primary vocational	1.4	1.4	1.4	1.4
Primary or none	1.8	1.6	1.7	1.6

Note:

a – extreme poverty line – the extreme poverty is defined by the basket of goods and services, which covers only basic needs, whose satisfaction cannot be delayed.

b – relative poverty line equal 50% of mean equalised expenditure

Source: Own calculations based on GUS, 2006. p. 101 and 195, table 103 and 104.

The education factor has an obvious impact on an increased risk of poverty particularly among single parents and couples with three or more dependent children. It is so, because in such types of family parents have, in average, lower education level than in the total population (see:

Table 5). It may be assumed that the comparison of education levels by age would reinforce this thesis. One should remember that heads of families with children are younger, in average, than childless family heads, and the education level of the population increases clearly within younger generations. These findings are supported by the results of the lone parents households research, which shows that lone parenthood in Poland is strongly related to fairly substantial risk of educational disadvantage (Trifiletti, 2007).

Table 5. Families with children by parents education level.

	level of education (for couple-the higher of both partners)	Total	families with dependent children up to 24 years old					
			Total	1child	2 children	3 children	4 children	5 and more children
couple	tertiary	17%	18%	21%	19%	12%	7%	4%
	secondary	44%	46%	47%	48%	44%	37%	28%
	primary vocational	29%	29%	25%	29%	38%	45%	51%
	primary or none	11%	7%	7%	5%	7%	10%	17%
single mothers	tertiary	10%	13%	15%	12%	7%	3%	2%
	secondary	36%	43%	45%	43%	34%	26%	17%
	primary vocational	20%	24%	22%	26%	33%	35%	34%
	primary or none	34%	17%	15%	16%	25%	35%	46%
single fathers	tertiary	10%	12%	13%	11%	7%	4%	1%
	secondary	26%	31%	32%	31%	25%	17%	13%
	primary vocational	31%	37%	35%	39%	44%	49%	47%
	primary or none	33%	18%	18%	16%	22%	29%	37%

Source: Own calculations based on National Census 2002 ([www.stat.gov.pl](http://www.stat.gov.pl))

**Demographic factor.** Poverty rates of children and youth in Poland, as compared to the EU-25 average, are impacted by the demographic features of households in Poland. Obviously, the demographic structure alone is not a factor, which explains the poverty phenomenon. However, if we take into consideration a high poverty risk, which applies in Poland to single parents and families with three or more children, it may partly explain high poverty rates for children in Poland. Poland is characterised by a high, as compared to other EU countries, share of households with three dependent children (13%). Share of single-parent households is also high. There are 14% of them among families with dependent children below 18 years old or in education.

The size of households is an important factor which impacts a higher risk of poverty. The economic status of single-parent households and complete families with one or two children depends to a larger extent on the employment status of the adult household members. Such findings result from the research conducted by the Gdansk Institute for Market Economics.<sup>14</sup> The study shows also that the impact of employment status of adult members of households on the average incomes of the families with three or more children is relatively small. This indicates that the activation policies must be supported by adequately directed income support policies. It applies in particular to the needs to support families with three or more children, where the income effect of an increase of the work of the adult members of the households is the lowest<sup>15</sup>.

**Regional differences.** Poland is a country with large regional differences in the life standard. Particularly significant differences exist in the area of income as well as availability of services between rural and urban areas. According to data from the national statistics, living in rural areas increases the risk of poverty more than two times (CSO, 2005)<sup>16</sup>.

**Table 6. Poverty risk by place of residence in relation to average**

	Extreme poverty <sup>a</sup>	Relative poverty <sup>b</sup>	Extreme poverty <sup>a</sup>	Relative poverty <sup>b</sup>
Year	2003		2004	
Urban	0.6	0.4	0.7	0.7
Rural	1.6	1.6	1.6	1.5

Note: see Table 4

Source: Own calculations based on GUS, 2006. p. 101 and 195, table103 and 104

<sup>14</sup> The Study under the project: "Economic and educational activity and family responsibility" financed by ESF. Representative study (6531 persons), data not published yet

<sup>15</sup> Research shows that the strongest marginal effect of an increase of the employment of adult members of the households takes place in households with two children, and that an increase of the average net income of households resulting from an increase in the proportion of the employed adult members in the total number of adults in the household from 0.5 to 1 decreases in line with the household size and in the case of households with 3 or more children it amounts only up to 0.1 (GIME, 2007)

<sup>16</sup> It should be noted, however, that application of the same national poverty line to measure the poverty in rural and urban areas results in a distorted picture, since the subsistence expenses in rural areas are lower than in urban areas.

## 2.2. Education

### 2.2.1. Access to Education

Although according to the UNICEF report (2007) Poland is at the top position among OECD countries for its educational outcomes indicator, decomposition of such an indicator shows significant problems of the Polish education system. If from the point of view of the availability of education for children and young people at the school age the results of Polish education system are very good, the problem in Poland consists in the quality of education and its differentiation. Additionally, UNICEF indicators do not include the availability of preschool education, which constitutes a huge problem of contemporary Poland.

In 2003 – 2005, an improvement in the access of children and youth 7 – 15 years old to the education took place. Enrolment rate in 2005 was 94% for children 7 - 15 (79% in 2003), it is lower than in 2000, however.<sup>17</sup> The enrolment rate for youth 16 – 19 years old was 92% for young people, and it improved as compared to 2003 and 2000<sup>18</sup>. The existing geographical differences in the education availability for children and young people 7 – 19 are insignificant and became even smaller during the past few years (Social Diagnosis, 2005).

The access to kindergarten and day nursery care looks much worse. Regardless of considerable improvement in 2005 as compared to 2003, still only 20% of children up to 6 years old use the preschool care (2003 – 14%). As compared to 2003, geographical differentiation of the child care availability increased. In urban areas, the access to small child care is over twice as large as it is in rural areas where only 11% were covered by such care. (see: Table 7). Paradoxically, the worst access to kindergartens applies to children from neglected communities and Disabled children, i.e. the very children for whom preschool education is a significant tool of equalising their educational chances in the future. Scientific research proves that the preschool period has a significant importance for the child development, its school career and future life. Positive influence of preschool education is particularly significant among children from neglected communities (Zahorska, 2003).

<sup>17</sup> Deteriorated rates for 2003 as compared to 2000 result from the fact, that it was one of the initial periods after educational reform when the 7 – 15 age group included not only children and young people from primary schools, but also from grammar schools.

<sup>18</sup> The data differs from the official Polish statistics, due to the different methodology. The data of Social Diagnosis are based on households surveys, while data of official statistics on administration data.

Table 7. Children and young persons in households by educational status and place of residence (percentage of persons of given age and place of residence using specific educational service, 2000 – 2005 (%)).

Educational status	Class of residence place						Total
	Towns over 500 thous.	Towns 200-500 thous.	Towns 100-200 thous.	Towns 20-100 thous.	Towns below 20 thous.	Rural areas	
Children 0 – 6 years old using a day nursery or kindergarten	24.17***	31.23	20.46	32.12	20.84	10.78	19.77
	19.13**	19.52	20.42	19.93	12.18	7.74	13.51
	31.16*	22.33	14.51	33.71	27.34	12.58	21.40
Children 7 - 15 years old attending schools	92.80	91.95	92.64	95.97	95.55	93.22	93.92
	76.74	77.07	81.36	78.27	79.88	80.14	79.23
	99.41	98.74	99.17	98.79	98.17	97.89	98.48
Young persons 16 – 19 years old attending schools	92.78	93.67	94.34	91.69	89.68	92.93	92.39
	93.67	91.07	93.85	89.12	94.01	87.74	90.39
	89.40	97.63	86.30	90.03	87.55	85.43	88.47

\*\*\*results of 2005 research.

\*\*results of 2003 research.

\* results of 2000 research.

Source: Social Diagnosis 2005.

The access to the institutional small child care is treated not only as a tool of equalisation of children's opportunities but also as a basic instrument of social policy oriented on supporting women in reconciliation of work and family life. Difficulties related to such a reconciliation lead to an increased economic inactivity of women, who bring up small children, and difficulties with their re-entry into the labour market. An improvement of availability of child care is a prerequisite for the improvement of women situation in the labour market, an increase in their employment, thus the improvement of financial condition of families with children. Unfortunately, the availability of this form of care in Poland is among the lowest in the EU countries, it is also distant from the Lisbon Strategy indicators regarding coverage of children with preschool care.

Regardless of an improvement, the situation of Disabled children within the education system is not positive. Disabled children continue to be too often separated from the regular education system and sent to special schools. Over 40% of Disabled children learn at the special primary schools, and at the grammar school level – 60%<sup>19</sup>. Development of integration schools and classes is too slow, quite often such schools do not have adequate personnel for work with dysfunctional children. Special schools offer is limited and not adjusted to potential development abilities of pupils. Disabled children are also frequently bound to be socially isolated due to limited access to general education and integration kindergartens. Lots of disabled children, due to the lack of an adequate school in the proximity of their place of residence and of adequate transportation are frequently excluded from the general education system and stay in special educational centres, separated from their families (some 30,000 children) (Helsinki Human Rights Foundation, 2002). Nursing services for families with disabled children are lacking, particularly in rural areas (Government Population Council, 2004).

<sup>19</sup> CSO, Statistical Yearbook 2005, table 8 (246)

### 2.2.2. *Quality of Education and Its Diversification.*

The Polish educational system is characterised by a low and a very significant diversification of the education quality. Comparison of results of the OECD PISA study in 2003 and 2000 indicates a general improvement in the quality of education in Poland. It also shows a simultaneous decrease in the differentiation in quality of education between schools and higher diversification within schools themselves. This could be the effect of the educational system reform, introduced in 1999<sup>20</sup>. The PISA study shows that differences in test results persist, depending on the social and economic status of the parents. As compared to other OECD countries, the differences observed in Poland continue to be relatively high<sup>21</sup>.

### 2.3. Health

Basic indicators regarding the health condition of children and young people locate Poland in the group of new EU members, characterised by worse health results than the EU-15 countries. One should note, however, a significant improvement of such indicators during the years 1970 – 2004, in particular during the period after 1990. Also from the point of view of subjective perception of the health condition of young people, Poland is located together with the new member states below the indicators for the EU-15 countries. According to HSBC results “young people from Baltic states (excluding Estonia) and the eastern countries in the European Region tend to have higher rates of poorer health and lower rates of life satisfaction. (HBSC, 2001/2002, chapter 3).

The access of disabled children in to health care services is extremely difficult. Some 3.3% of the 0 – 15 years old children in Poland suffer from being disabled. Disabled children in Poland have no access to early diagnostics and adequate rehabilitation. Diagnosis of the condition of disabled children is performed too late although symptoms of disorders may be noticed earlier and are reported by worried parents. Physicians who examine children in the first period of their lives inadequately react to alarming symptoms and fail to refer children to specialists. The access to specialised medical care is difficult (physicians are grouped in large centres, clinics, there are a few of them) and the information for parents – by far insufficient. This leads to considerable reduction of chances of complete elimination of disorders – in the cases of smaller developmental delays, or mobilisation of positive potential of children in the cases of more extensive disorders. Branch and organisational divisions, which exist in Poland, are the reasons why early help is provided in a fragmentary way, separated from each other or is not provided at all.

### 2.4. Housing

Housing situation of Polish people is the worst among all EU-27 countries. Number of rooms per 1 inhabitant in Poland is the smallest among all EU-27 countries (0.9). Also, housing conditions of both lone parents and families with children belong to the most difficult in EU-27 countries<sup>22</sup> (European Foundation, 2003).

20 The reform, has among other things, extended the period of mandatory education by one year (up to 15 years old).

21 Compare with the results of the PISA study (PISA 2003).

22 Single parents with a child up to 16 years old had an average of 2,4 rooms, a couple with one or 2 children under 16 – 2,6, a couple with 3 or more children under 16 years old – 2,9 room dwelling (European Foundation, 2003)

Also the dwelling space is small, although over the recent period it has been improved to some extent, as is the space per 1 inhabitant. The number of inhabitants per dwelling decreased in all types of households in 2003 – 2005. The households with numerous children had the smallest average housing space in 2005 (Social Diagnosis, 2005).

Regardless of significant improvement, which has taken place since 1989, 28% of households continued to live in bad housing conditions.<sup>23</sup> To the largest extent, bad housing conditions apply to families with numerous children and lone parents with children.

**Table 8. Households in bad housing conditions.**

Household	Percentage of households with dwelling			
	without bathroom	small space	cheap dwelling	Presence of at least one of the three symptoms
Total	10,77	8,27	15,49	27,64
Couples without children	8,19	1,23	13,23	19,63
with one child	5,68	5,04	15,12	22,12
with 2 children	6,35	14,56	15,07	27,24
with 3 children	8,59	25,69	17,10	38,71
with 4 and more children	14,31	46,41	17,53	54,59
Lone parents with children	14,04	9,71	27,94	37,73
Other	17,20	6,76	15,36	29,36

Source: Radziukiewicz, (2006), Data on the basis of HBS.

Households in Poland have frequent problems with payments of due rates for the accommodation. The group of households, which most frequently have overdue payments of rates for housing and for gas and energy in 2005, included households of families with numerous children (21% and 12% of households respectively) and single-parent households (over 19% and almost 12% of households respectively). It should be noted, that single-parent households most frequently have payments overdue for more than 12 months. (Social Diagnosis, 2005).

## 2.5. Culture and leisure

Economic family condition translates into conditions of participation in culture and leisure activities. Households of single-parent and families with numerous children resigned of selected forms of participation in culture most often (over 50%). Frequency of resignations of participation in cultural activities among families with numerous children has increased between 2003-2005. For economic reasons over a half of households refrained from sending children to summer rest centres and camps, and almost 60% - from family vacations. In 2005, resignation of vacationing took place most frequently in the households of couples with numerous children<sup>24</sup>. Giving up

<sup>23</sup> When determining bad housing conditions, presence of at least one of three factors was taken into consideration: the lack of bathroom, space per person - not more than 10 m.sq., and living in social dwellings or ones with regulated rent.

<sup>24</sup> From almost 73% of the households – adult vacations to some 66% of the households – children vacations.



vacation trips has also increased in this group of households within the last years (Social Diagnosis).

## 2.6. Children from Dysfunctional Families and Deprived of Parental Care

In 2006 over 30 thousand children were brought up outside their natural family environment in foster care institutions due to the social orphanhood (less frequently biological). Over 60 thousand children were brought up in foster families<sup>25</sup>.

Children are taken into orphanages and other child care institutions usually after a long process of deepened and reinforced dysfunction of the family. Many years of neglect and a creeping process of exclusion of dysfunctional environment children from the education system and social relations makes the process of their re-socialization and returning to regular life (including education obligation) extremely difficult. (see: Hrynkiewicz, 2006).

Excessive number of children are placed in large centres<sup>26</sup>. Educational conditions in such centres are inadequate. A tutor in the orphanage takes care for a dozen or so children, usually in need of special care, specialist treatment and rehabilitation due to many years of neglect. They are usually chronically ill, disabled, underprivileged, demoralised, psychologically hurt due to traumatic life experiences, for whom it is very difficult to find a foster family or another form of care<sup>27</sup> (see: Hrynkiewicz, 2006, p. 215; Kolankiewicz, 2005, p.26).

## 2.7. Violence Against Children

Information regarding breaking of children rights, including such drastic cases as home violence against children, is fragmentary. Public opinion surveys show that child beating is a frequent disciplining practice. Every fifth parent, who brings up children under 19 years of age, admits beating them sometimes. Almost 2/3 of parents declare that their children have never been beaten. An attention is drawn by a large group of those surveyed who do not remember such events (16%). During the last five years, the number of parents who admit beating their children has clearly dropped. It is difficult to estimate, however, to what extent it is the result of changing educational methods, and increasing attention in declarations, on the other hand (CBOS 2005).

Number of children and young persons registered by the police as home violence victims increases what probably results from more active participation of public authorities in intervention in critical situations concerning children. (see: Table 9).

<sup>25</sup> 46 831 thousand in families related to child, 9 661 in families not related to child and 5 062 in professional foster families (information of the Ministry of Labour and Social Policy).

<sup>26</sup> According to the law on Social Assistance (Official Journal 04.64.593) and Regulation of the Ministry of Labour and Social Policy dated on 14<sup>th</sup> February 2005 (Official Journal 05.37.33), the number of children in one institution of foster care should not exceed 30. The regulation has to be implemented until 2010.

<sup>27</sup> According to the law on Social Assistance (Official Journal 04.64.593) and Regulation of the Ministry of Labour and Social Policy dated on 14<sup>th</sup> February 2005 (Official Journal 05.37.33), the number of children under the care of one tutor in the foster care institutions should not exceed 10 children (or 14 in the small institutions). The regulation has to be implemented until 2010.

Table 9. Number of home violence victims

	1999	2000	2001	2002	2003	2004	2005
Total number of home violence victims	96955	116644	113793	127515	137299	150266	156788
Children under 13 years old	23929	27820	26305	30073	32525	35137	37227
Juvenile from 13 to 18 years old	13546	15540	14908	15955	17062	17527	17800

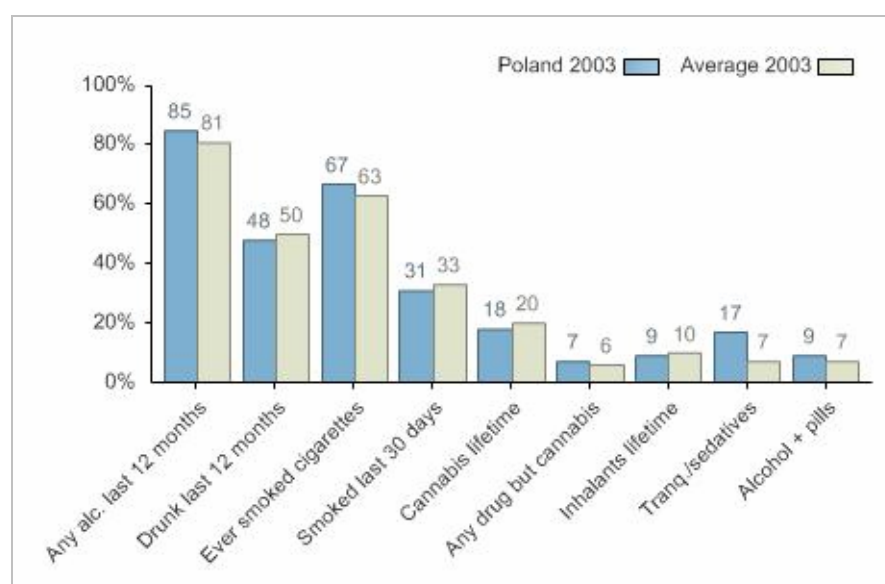
Source: <http://www.rodzina.gov.pl/?1,11,139>,

## 2.8. Juvenile Crime and Alcoholism, Drug Abuse and Nicotine Addiction Among Children and Young Persons

According to police statistics, the total number of minors, to whom a crime was proven has been declining systematically since 1995, however, it is still significant. In 2006, criminal acts were proven to 53 thousand minors (and 77 thousand such acts). The improvement cannot be noted, however, in the case of the most severe crime: against health and life. A significant social problem consists in the participation of children up to 13 years old in the crime. In 2006, 2000 criminal acts of children up to 13 years old were registered<sup>28</sup>.

The research conducted in 2003 within the framework of the European Survey Project on Alcohol and Other Drugs, with participation of 35 European countries shows that Polish young people slightly more frequently, than average youth in the countries covered by the research, use alcohol, smoke cigarettes and concurrently use alcohol and drugs. As compared to 1995, certain increase of alcohol and drugs consumption and reduced frequency of smoking took place.

Graph 4. Alcohol consumption and nicotine and drugs addiction among young persons 16 years old.



Source: Espad, 2003.

<sup>28</sup> Data of the Police Headquarters, <http://www.policja.pl/porta/pol/4/306/>.

The research shows that Poland is among the countries with the highest percentages of students reporting use of amphetamines, binge drinking, and tranquillisers or sedatives without prescription (see: The ESPAD Report 2003)

### 3. Policy framework

#### 3.1. General policy framework

A characteristic feature of the social model in Poland consists in a low level of social transfers, addressed to families with children, and the underdevelopment of social services. A strong cultural and structural conflict in the area of combining the occupational and family roles leads to deactivation of women who bring up children, which constitutes a significant reason for a high poverty risk among children.

The instruments of poverty counteracting among families with children concentrate on social transfers of income-tested character. Such benefits, besides the universal family allowance take into account also specific needs related to nursing disabled children, or during the child care leave. Family benefits system is consistent and well addressed. Due to the dimensions of the child poverty risk in Poland, the lack of social benefits for families of universal character (with the exception of tax reduction) is not a deficiency. Efficiency of social transfers is limited due to a large scale of poverty before social transfers and a marginal role played by the transfers to families with children within the total social expenditures.

Services are dominated by the universalistic approach. Policies are first directed to provide universal access to basic services, to education and health care services. The approach to services shows an imbalance between the universalistic approach and the targeted approach: there is a lack of adequate response addressed to satisfy specific needs of children in difficult situation, disabled or coming from dysfunctional families. General underdevelopment of services in Poland increases difficulties in their availability for children with special needs.

Neglected service categories include in particular day care services for children (crèches and kindergartens, extramural offers), medical care services in schools, specialist health services enabling early diagnosis, medical rehabilitation, family and pedagogical-psychological counselling. Density of such service offer is very modest, particularly in the countryside and small towns (vide Government Population Council, 2004).

The network of services addressed to support dysfunctional or at risk families, such as family and psychological counselling, critical intervention centres, social therapy centres etc., is inadequately developed, although a progress in this area should be noted. Even if in some areas there are integrated prevention programmes, which address specific problems of children with special needs, in general the policies concentrate on post-crisis intervention measures rather than preventive activities.

Social policies fail to take into account the problem of employment barriers faced by women who bring up children, and their consequences. They are directed more to the formal protection of employment and income support for persons who resign of their jobs to take care for their children, rather than facilitation of combining work with child care. The issue of difficulties in the

area of reconciliation of work and family life was partially addressed in the governmental programme of family policy announced in March of 2007 and in NAP/Inclusion 2005-2008.

Child poverty and well being problem is not the central focus of social policies. There is a lack of consistent multidimensional approach to the problems relating to children. Policy concerning children is subjected on the one hand to sectoral approach, on the other hand it is located within the broader context of family policies.

In the second half of the 90', responding to demographic processes related to decreasing birth rate, a policy framework of the family policy started to be developed. In 1999, for the first time, the national four-year programme of "Pro-family Policy of the State" was formulated. Subsequent family policy programme was presented in March of the current year. Also NAP/Inclusion 2006-2008 presents under Priority 1(Support for families with children).

Generally, family policy programmes concentrate more on actions to promote a higher birth rate and improve the situation of Polish families, rather than on multiple aspects of the situation encountered by children. This is not to say that the problems of children are completely overlooked by such programmes, at least in as far, as the situation of children reflects on functioning of families. This applies to such elements as access to health care and rehabilitation for disabled children, child care services or work with dysfunctional families.

The approach taken to problems of children by family-oriented policies varies, depending on the programme concerned. While the Governmental programme on family policy from March 2007, focuses more on actions involving income support for child-bearing and families with children (tax credits, longer maternity leave, higher pension fund credits for the time devoted to child-rearing leave), the NAP/Inclusion 2006-2008 presents numerous projects on development of social services for families with children.<sup>29</sup> In neither of the two programmes is there consistent treatment of the child-related problems, particularly as far as equality of opportunity in education, access to rest, recreation and sports, or family violence against children.

General tasks in the field of family policy are also written in the acts of law, constituting the basis of the activities of local self-governments created within the framework of the state administration reform of 1999. These tasks, however, are of a very general nature and do not relate to specific problems of children. Regional self-governments, and sometimes lower level self-governments create the family policy programmes or they include activities, related to such policies, into programmes in the field of social policy. Child poverty and well being in these programmes is often understated and overly subjected to a wider perspective of the family problems. Nevertheless, one may notice examples of interesting regional programmes concentrated on problems of the children, as for example the Małopolskie voivodship pro-family policy programme<sup>30</sup>.

Opportunities to implement policies taking a multidimensional approach in relation to selected groups and their social problems (including children) are limited due to the difficulties in coordinating social policy (vertical and horizontal). Under national administration reform 1999, the questions of social policy (education, elements of health care, social assistance, employment, other public services) have been transferred for management by the three devolved autonomous

<sup>29</sup> This includes development of such family-oriented services as day-care facilities for children and dependents, socio-therapy centres and other prevention or inclusion-oriented forms of support for youth with special needs, development of specialised family counselling and of foster parenting.

<sup>30</sup> See: Małopolski Program Polityki rodzinnej na lata 2004-2007, <http://www.rops.krakow.pl/index.php?sid=4>

council levels (communes called *gminas*, districts called *poviats* and regions called *voivodships*). In addition, there is an ever more dense network of non-public institutions involving themselves with social policy questions. While the multitude of partners planning, financing and providing social policy is unquestionably a positive development, so far there is clear absence of an effective approach to coordination and management of social policy in a devolved model, with multiplicity of partners. For several years now approaches have been tried to institute administrative coordination of the social policy planning process, yet they all seem to be not sufficiently effective.<sup>31</sup> The bill on principles to govern social policy, currently in Parliament, aimed at comprehensive regulation of questions relating to programming, implementing, monitoring and evaluating of social policy on national, regional, and local levels, has been evaluated negatively by experts<sup>32</sup>.

### 3.2. Ensure adequate income - social transfers and employment

#### 3.2.1. Social transfers

High poverty rate among children and a relatively poor effect of social transfers on its reduction points out to the major problem of the Polish social protection system, which provides insufficient protection of younger families with children against poverty.

Social expenditure in Poland is characterised by a very high share of expenditure for retirement and disability pensions and a low share of other social expenditures related to children and families. As a result, although total social expenditure in Poland is relatively high, social expenditure allocated for the social policy addressed to children and families is very low. Also other social expenditure, which are directed, among others, to families with children who require support, such as the social assistance expenditures, are low, as compared to the EU-25 average (see:

<sup>31</sup> The regional and local governments should prepare the strategies on social policy (social problems resolution). However, in most cases communes and districts either failed to draft any strategy at all, or have completely useless documents lacking an in-depth diagnosis of social needs related specifically to their local community, and still less propose truly relevant solutions.

<sup>32</sup> The proposed bill has been evaluated negatively by experts, due to absence of solutions guaranteeing consistency of the efforts taken in different areas of social policy and integrating actions of institutions subordinated to different Government departments. In particular, it was pointed out that such fields of social policy as culture, family-oriented policies or environment protection have been omitted entirely in the proposed legislation. Concern is also raised by the fact that the bill proposes relying on solutions which have already been in force for several years, but have proved ineffective in practice, that is formalised (commune, district and regional level) strategies for addressing social problems (vide report from discussion during the seminar of expert organised by the Public Affairs Institute on May 14, 2007 regarding the bill on principles to govern conduct of social policy, <http://www.liskow.org.pl/content/view/160/34/lang.pl/>).

Table 10).

Table 10 Social expenditure by functions in 2004

	as percentage of GDP	as percentage of total social expenditure
Poland		
Children/family	0,92	4,6
Housing	n.a.	n.a.
Social exclusion	0,12	0,6
EU-25		
Children/family	2,13	7,8
Housing	0,55	2
Social exclusion	0,41	1,5

Source: own calculations based on Eurostat data.

A comparison of the impact of social transfers on the reduction of poverty in Poland with the average for the EU-25 countries (see:

Table 11) allows for the following conclusions:

- The relative poverty rate before social transfers in Poland is the highest among EU-25 countries; it applies to both the percentage of the total population at risk of poverty (51%) and also to children and young persons up to 18 years old (46%),
- Comparison of at risk poverty in Poland before and after social transfers shows that the impact of social transfers on reduction of poverty in Poland is the smallest in the case of children and young persons up to 18 years old. If before the social transfers the at risk poverty is comparable for both children and adult persons, after the social transfers the at risk poverty rate for children is by 1/3 higher than the poverty risk of adult persons,
- The impact of social transfers on reduction of poverty among children in Poland is similar to the EU-25 countries, nevertheless transfers other than pensions have significantly less importance.



Table 11. Impact of social transfers on poverty reduction (%) n 2004.

Age	at risk poverty rate before social transfers (pensions included)	at risk poverty rate before social transfers (pensions excluded)	at risk poverty rate after social transfers	impact o social transfers on poverty reduction (pensions included in the social transfers)	impact o social transfers on poverty reduction (pensions excluded from the social transfers)
	1	2	3	1- 2	1- 3
Poland					
Total	51	30	21	30	9
less than 18 years old	46	39	29	17	10
18-64	45	31	20	25	11
65 years old and more	90	23	19	71	4
EU25					
Total	43	26	16	27	10
less than 18 years old	36	34	19	17	15
18-64	33	25	14	19	11
65 years old and more	88	11	5	83	6

Source: own calculations based on Eurostat data.

### 3.2.2. Social protection benefits and services

Income support programs for families with children are generally based on income test and alleviate successfully income poverty. However, taking into account the extent of poverty among families with children before social transfers and limited financing of those programs they cannot be successful in reduction of poverty.

Income support for families with children is mainly implemented through five social programmes:

- Basic programme is the family benefits system addressed to all families with children who meet the income test. Besides the universal family allowances, whose amount depends on the child age this programme includes also specific benefits related to particular situation of families which bring up children, such as: supplements for families with numerous children, benefits for persons who resign their jobs to care for a disabled child, allowances payable during the child care leave, allowances for single parents, if the other parent is unknown or is not alive, child birth allowances, allowances related to commencement of school education, education and rehabilitation of a disabled child or starting the education by a child beyond its place of residence, child support advances payable for single parents who will prove that due to objective circumstances they are not able to collect awarded alimonies from the other parent of the child.
- Financial support for poor families is also implemented through the social assistance system. Persons and families which are temporarily in unfavourable economic situation are paid a periodic allowance equal to at least 25% of the difference between the poverty line, applicable for the purposes of the social assistance and the amount of the family income. As of 2008, the minimum amount of the allowance will be increased up to 50% of such a difference. Additionally, poor families can receive an assistance to finance heating expenses and accommodation (housing benefits).

- As of 2007, some small tax reductions were introduced for families with children, amounting up to PLN 120 (around EURO 30) a year per one child. The family policy programme draft announced in March of the current year provides for gradual increase of this relief up to PLN 200 still this year and to PLN 500 in 2013. While assessing this proposal one has to take into account the fact that many families with children living in poverty will not be covered by such aid, as they do not pay taxes (this relates to farmers and people living on other than pensions social allowances).
- Scholarships and other forms of support for pupils from poor families were introduced in 2004 and financed out of national resources and from European structural funds. This system provides for material aid for pupils in a difficult material situation, performance-based scholarships and sport scholarship schemes.
- The state aid programme for nutrition financially supports the gminas which organise, among others, additional nutrition of children at the preschool and school age.

### 3.2.3. Access to employment

Low occupational activity of parents, combined with low education constitutes a basic factor which increases the poverty risk among families with children. Therefore, an increase of the access to employment and the improvement and updating of professional skills of the adult members of households with children (including first of all women) should become a principal instrument of the policy of poverty reduction among children.

The dominating economic model of the family (*male breadwinner*), serious shortage of services, including in particular child care services, and the existing legal solutions concerning the parental leaves lead to the withdrawal of women with small children from the labour market for some long periods related to child upbringing. This leads to a de-capitalisation of their capital, resulting in difficulties they face regarding their return to work, and creates a barrier against their professional advancement in the future.

Improvement of the economic condition of families and persons, who bring up children, through intensification of activity and occupational opportunities of women requires comprehensive actions related to both the development of various forms of care for small children and school age children, development of inexpensive services to support housework, facilitation of the access to education for persons, who bring up small children, and an adjustment of the benefits system in order to reduce alternative cost related to taking up a job by persons, who bring up small children, especially those with lower qualifications. An important element should consist in facilitating professional education and updating professional skills of women, who bring up small children, when they return to the labour market.

A draft of the governmental family policy programme announced in March of the current year<sup>33</sup> proposes actions, which may introduce facilities in reconciliation of work and family life. It should be considered as good signal regarding the appreciation of the importance of problems related to difficulties with reconciliation of work and child care duties, however, it misses a comprehensive concept of changes, and the proposals contained therein are often of a very general character.

<sup>33</sup> Rządowy program polityki rodzinnej (projekt), [www.rodzina.gov.pl](http://www.rodzina.gov.pl)

Except for the part related to income support<sup>34</sup>, this programme also fails to provide for any significant funding of its implementation, what may reduce its effectiveness.

### 3.3. Access to essential services

#### 3.3.1. Education and child care

In 1999 the education system reform was introduced, whose purpose included, among others, an improvement of the education level and equalisation of differences in the quality of education. The reform extended education period (it introduced compulsory education from 7 years until 18 years of age). As of the school year 2004/2005, it became mandatory for 6 years old children to attend a one-year preschool preparation at schools or kindergartens. School management was transferred under the administration reform (1999) to local self-governments (gminas) which receive an educational subsidy for that purpose.

As a result of the reform, a large number of small schools were closed, and the education is organised in larger ones, quite often, however, distant from pupils' place of residence. Therefore, the gminas were obligated to provide free transportation of children or to refund the cost of such a transportation to preschool classes, primary and grammar schools, if the distance to such schools exceeds the distance defined in the act of law<sup>35</sup>. It also applies to providing transportation for disabled children, regardless of the distance.

As one may assume, the reform had a positive influence on the reduction of significant differences in students' skills between the schools, which were shown by PISA research in 2003. Concurrently, a probable effect of this reform consists in an increased differentiation of students' skills within the schools.

Transportation of children to schools, particularly where it is distant from their homes, facilitates the access of children to education. However, many students must cover large distances and lose a lot of time to get to school. Organisation of transportation of disabled children continues to be a serious problem. The act regarding the education system does not define the requirements to be met by the organisation of transportation of disabled children to schools, and serious negligence in this field results in a reduced availability of education for disabled children. In spite of the reform guidelines, school infrastructure and equipment is inadequate. (see: Helsinki Human Rights Foundation, 2002).

The Helsinki Human Rights Foundation report shows the lack of reliable system of control of implementation of compulsory education. Full information on children subject to compulsory education is missing, the fate of children who "fall out of the school system" is not followed up, a serious problem consists in the lack of reaction to a prolonged absence of students at school without justification (in particular in grammar and high schools). The authors of the report believe that official data indicating a low percentage of school leavers result from weaknesses of the compulsory education control system<sup>36</sup>.

34 Expenditures included in the programme provide for increasing the income tax relief for families with children, earning the maternity leave and increasing the retirement insurance premium payable by the budget for persons on child care leave.

35 3 km for younger children and 4 km for the older ones.

36 Early school leavers problems were included in the draft of the Operational Programme "Human Capital" to be cofinanced by EFS in 2007 – 2013. However, they do not apply to monitoring of threats, but to actions aimed at equalising the delays in children education. Controversies are raised first of all by centralisation of funds for that purpose, while the responsibility for educational policy and implementation of compulsory education rests with local self-governments.

Education of small children is a serious, unsolved problem. The lack of political determination to make the preschool education universal and to lower the age of starting the education at school, partly ideologically motivated, is quite clear. In spite of certain actions in a good direction, the progress in this area is obviously too slow<sup>37</sup>. In spring of 2001, the Ministry of National Education announced the "Small Child" programme, which was dropped, however<sup>38</sup>. This project was to be an important instrument of equalisation of opportunities in the education system: it provided for the reduction of the compulsory education age by 1 year and covering children at the age of 5 with compulsory preschool education, as well as early support for disabled children.

### 3.3.2. *Housing*

The social housing (aimed at the poorest people) deficit in Poland amounts to some 125 thousand units<sup>39</sup>. Availability of housing for the people at risk of exclusion is to be fulfilled through the continuation of the social housing pilot program undertaken in 2004-2006. In 2006, the parliament adopted the act regarding financial support of creation of social accommodation, protected flats, night shelters and dwellings for the homeless.<sup>40</sup> This law defines the systemic regulation of the issue of state support for the undertakings aimed at the acquisition of accommodation and dwellings for the poorest, allows for an increase of the number of dwellings and living spaces of a decent technical standards. Financial support is directed to the entities, which due to their tasks resulting from the law or their statutes are involved in providing accommodation or shelters: gminas, poviats, associations of gminas and non-government organisations. The Act introduced solutions which reduce negative effects of the previously implemented pilot programme, related to the phenomenon of creating enclaves of exclusion and stigmatisation in separated buildings with social flats. The NRP implementation report envisages the sum of PLN 470 million for implementation of the project of support for building dwellings for the poorest as well as night shelters and accommodations for the homeless in years 2005-2008. Taking into account a huge shortage of social flats this amount is certainly not sufficient to considerably reduce their deficit and significantly improve the situation of poor families, which live in sub-standard accommodation.

### 3.3.3. *Access to health care*

The principal health care reform, which took place in 1999, introduced health insurance to replace the hitherto existing health care service financing from taxes. Its purpose was to rationalise the system and provide better access to health benefits, limiting increasing health care cost. In spite of elapsed time and many corrections, not always delivering positive effects, principal objectives of the reform have not been achieved. The system continues to be wasteful and inefficient.

<sup>37</sup> In 2004, 6 years old children were included in compulsory preschool education. Also, initiatives are being developed to create alternative forms of preschool education in rural communities (e.g. see Komenski Memorial Foundation for Children Development, <http://www.frd.org.pl/>). Support is assumed for the development of preschool education centres in rural communities, co-financed by ESF projects for 2007 – 2013. Development of diversified forms of preschool education is also included in the government family policy draft programme announced in March of the current year. These initiatives, although very useful, seem to be not enough extensive in view of huge dimensions of delays in this area.

<sup>38</sup> This programme provided for:

- Reduction, in stages, of the compulsory education age during subsequent three years,
- Covering children at the age of 5 with compulsory preschool education,
- Organisation of assistance centres for children and their families in rural communities, on the pilot basis,
- Implementation of training project: „Small Child Teacher”,
- Early support of development of children with detected disabled condition or development disturbances.

<sup>39</sup> Data of the Urban Development Institute (2006).

<sup>40</sup> The Act of 8 December of 2006, Official Journal, 251/1844/2006).

Expanding segments of private insurance, private providers and informal payments for more expedited and better service, deliver timely health services to a more affluent part of the society. Those who are not able to pay must wait in lines. The access to specialist care is limited, and patients who live in rural areas must cover long distances to get to the specialist physician. The lack of doctor's supervision over children at schools makes the child health control dependent on the initiative and abilities of parents, who quite often do not comprehend health risks children are exposed to. Although children and school students have the access to the health care assured regardless of whether their parents are covered by health insurance or not, actually a poor access to health care too often causes too late a diagnosis and doctors intervention. The Report of the Ombudsman for Children informs on a high number of claims related to difficulties in access to doctors (Ombudsman for Children, 2005). The Project of the Governmental Programme on Family Policy announced assumes legislative changes focusing on improvement of access to health care services for children.

### 3.4. Promote care and protection of children at risk

#### 3.4.1. *Disabled Children*

Difficult situation of disabled children in health care and educational system is partially addressed in the already implemented or planned programs.

Serious problems with diagnosing and rehabilitation of disabled children caused the development and the start-up of the government pilot programme "Early, Multi-specialist, Comprehensive, Coordinated and Continuous Help for Children at Risk of Being Disabled or Disabled, and Their Families"<sup>41</sup>. This programme has been implemented throughout the years 2005 – 2007, and its objective is to implement and verify organisational concept for early, multi-specialist, comprehensive and coordinated medical, rehabilitation and therapeutic help for Disabled children at the age of 0 – 7 and their parents. The pilot programme is to provide basis for the development of legal and organisational framework for integrated, early intervention in the situation of small children who are Disabled.

The problem of barriers in the access of disabled children to schools is addressed in the project of the Operational Programme 'Human Capital' to be co-financed by ESF in the years 2007 – 2013.

### 3.5. Care for Children from Dysfunctional Families and Children Deprived of Parental Care

System of caring for children deprived of parental care, inherited from the communist period, was based on large care institutions with low standard. As of 1998 this system has undergone changes consisting in:

- Development of unrelated foster families and family emergency homes,
- Transformation of care and education establishments into smaller structures,
- Entrusting the child care tasks, management of related establishments and centres to non-public entities – non-government organisations.

<sup>41</sup> [http://www.men.gov.pl/ksztzspec/programy/pomoc\\_dziecku](http://www.men.gov.pl/ksztzspec/programy/pomoc_dziecku)

Although direction of these changes is correct, their pace is not satisfactory. The uncertainty of financing of the establishments and the weakness of non-government organisations delay the transfer of the tasks of institutional child care to non-public entities. The lack of resources for development and investments causes continued existence of a large number of places in large child care institutions.

In the local environment, child risk situations are tolerated for too long, leading to negative effects which are difficult to reverse. Experts generally agree on the need to strengthen and coordinate local activities directed to early detection of risks, and the assistance to families, including in particular the cooperation between the school, physicians, social workers and family courts.

Taking into consideration the weakness of the assistance system for children at risk of crisis situations in the family, the Ministry of Labour and Social Policy intends to develop the system, which will enable the flow of information among all institutions which accompany the child in its development, assuming that this system will allow for a faster identification of the existing threats in the family. While evaluating this proposal, one should take into account the fact that, as shown by the research, the lack of or delayed reaction of public authorities to the critical situation in the family results first of all from unclear competence of social institutions and social consent for practices, which break children rights (Raclaw-Markowska, 2005, Hryniewicz, 2006). It may be expected that one of the reasons of delayed reaction comes from the general weakness of the poviats social assistance structures (poviat centres of family assistance) which are responsible for the activities related to critical family situations. An unquestionable weakness of the system, indicated also by the experts, consists in the underdevelopment of various family support services, such as counselling establishments, ambulatory assistance, aid in household management, as well as development of care and education activities for children, combined with information and education actions for parents. The lack of diversified assistance offer for families and support for parents through the development of diversified care services is also of importance. (Kolankiewicz 2005).

### 3.5.1. *Counteracting Family Violence*

The Act of 29 July 2005 regarding counteracting the family violence defines the tasks of public institutions regarding counteracting the family violence and mitigation of its effects. Among others, this law obligated the territorial administration to develop their programs to counteract family violence and the local social assistance centres to create adequate units responsible for preventing family violence. As a result of this act, the National programme of counteracting the family violence<sup>42</sup>, adopted by the Government in 2006, was developed. It provides, among others, for:

- undertaking the activities aimed at increasing the level of social sensitivity to the family violence phenomenon,
- training of services dealing with the family violence,
- development of organisational and personnel resources to provide professional aid to home violence victims,
- reinforcement of violence victims protection.

<sup>42</sup> see National Programme of Counteracting the Family Violence, Warsaw 2006, <http://www.mpips.gov.pl/index.php?gid=990>

The programme coordinated by the Ministry of Labour and Social Policy is already at the start point.

### 3.5.2. *Prevention of Juvenile Violence*

There is lacking on preventive measures for children and young people from dysfunctional families in Poland<sup>43</sup>. Unfortunately, the importance of preventive activities in stopping aggressive attitudes and the crime among minors also has not been included in the draft of the programme co-financed by ESF in 2007 – 2013.

In March of 2007, the Government adopted the programme “Zero Tolerance for Violence at School”<sup>44</sup>, which was developed as a result of a dramatic event at one of the schools in Poland, which was interpreted by the educational authorities as a signal and indicator of the Polish pupils being at risk of violence at school. The programme was criticised by many teacher communities and experts.

The criticism concerning the programme applies, among others, to the persuasive diagnosis and data of doubtful reliability regarding the reasons, range and type of the aggression of young people. Attention is drawn to the fact that the “accent in the programme was placed on legal and administrative instruments, while the role of other subjects in the programme is marginalized” (Kolbowska 2007) and that “the programme proposes first of all disciplining and restrictive activities. There is a lack of positive examples, actions oriented on elimination of the reasons of school pathologies, on prevention starting at the earliest years.” (Dzierzgowska 2007). In general, the programme is inadequately specific both in the area of objectives and monitoring its effects.

## 4. Monitoring

Although NAP/Inclusion 2004 - 2006 announced the creation of the monitoring system regarding poverty and social exclusion in Poland, this idea has not been implemented until today. A monitoring system in the area of child poverty and well being in Poland, which would include basic problems such as: poverty, health care, education, access to culture and leisure or housing, and the situation of children at risk is also lacking. There is lacking of the ex ante mechanisms for evaluating the impact of regulations on poverty, family/households or children<sup>45</sup>. The Polish Ombudsman for Children presents every year the Report on observance of the children rights. The Report contains information about individual claims sent to Ombudsman by parents or other persons and does not include any analytical approach to describe children rights observance, however.

NAP/Inclusion 2007 – 2008 contains a design of the system of monitoring of the progress in implementation of activities related to priority 1: Support for families, however, its usefulness for the monitoring of the situation of children from the perspective of poverty and well being is limited. Majority of proposed indicators do not raise objections from the point of view of monitoring the

43 In 2005, the Ministry of Labour and Social Policy started the implementation of the programme „Community Centre, Work, Practice – social therapy in rural community”, which provides support for rural gminas in creation of social therapy community centres and promotion of good practices in the area of organisation of local cooperation regarding the operation of gmina community centres. This programme, however, has limited financial resources.

44 Programme “Zero tolerancji dla przemocy w szkole”, [www.edu.gov.pl](http://www.edu.gov.pl)

45 The regulatory impact assessment covers only: competition and entrepreneurship, public finance, labour market and situation of regions.

progress in implementation of specific activities provided for in NAP/Inclusion.<sup>46</sup> However, the indicators are mainly of administrative character and do not allow for the monitoring of the children situation. The set of indicators is rather simple (relates to the amounts of funds spent for the implementation of specific programmes or the numbers of children covered by such programmes) and do not allow for evaluation of the programs. The exception includes indicators, which relate to poverty and the programme of reconciliation of work and family responsibilities<sup>47</sup>

There is no institutional arrangements for cooperation of different partners in the monitoring of NAP/Inclusion The tool prepared for purpose to monitor NAP/Inclusion 2006-2008 has an administrative character and is not even accessible for public at the websites<sup>48</sup>.

The existing information resources, coming from statistical research conducted in a continuous way (public national statistics, continuous national research, Eurostat, international research) contain extensive information resources, which could be used to create the system of diagnosing and monitoring child poverty and well being at the national level<sup>49</sup>. The existing resources of national statistical research have been hitherto utilised to a small extent only in diagnosing the children situation. Also some research centres and academic institutions continue research on poverty and exclusion including child poverty and well being. It would be useful to build a network of institutions (research and academic centres, Central Statistical Office, ngo-s and representatives of administration at various levels) to develop and coordinate the evaluation and monitoring of child poverty and well being. The already completed research project: 'Bieda' (Poverty) implemented by the Institute of Labour and Social Affairs could be an example of cooperation between research and academic centres and CSO.

There are problems with horizontal and vertical coordination of the collection of administrative data in order to monitor the social policy. Many aspects of the policy in respect of children are implemented by two levels of local self-governments (*gminy and powiaty*). The national statistics system limits the possibility to collect administrative data concerning local policy if it is not financed from the central budget. The Ministry of Labour and Social Policy has the administrative data bases regarding family benefits and social assistance. However, data from the existing administrative systems of data collection from the local level are incomplete and inaccurate. Moreover, they do not include, with some exceptions only, data concerning children as the beneficiaries of the benefits. There is a need to improve administration statistics as well as to enable central government to collect information from different levels of state administration. As shown by *Questionnaire on existing tools to monitor child poverty and social exclusion at national level*, The Ministry of Labour and Social Policy intends to improve and extend the system of collection of data which apply to social assistance and family benefits system. Another problem consists in the difficulties to coordinate activities in the field of collection and making available the

<sup>46</sup> Such as the development of social housing, development of social therapy activities in rural communities, development of the day support establishments, development of the child nutrition programme, development of services for families and children, development of scholarships programme, development of civic offices network or income support programmes within the framework of family benefits.

<sup>47</sup> Number of children covered by various form of institutional care, employment of women by number of children, dissemination of flexible forms of employment.

<sup>48</sup> Only as a part of National Report on Social Protection and Social Inclusion.

<sup>49</sup> However, a lot of relevant information, which would allow to diagnose the situation of children in difficult condition, as for instance disabled children, early school leavers, children exposed to dysfunction in the family, is missing. A serious problem is also constituted by the lack of tools to diagnose children situation at the local and regional level. The Ministry of Labour and Social Policy is working together with UNDP Poland on development of tools for monitoring poverty and exclusion on local level.



administrative data, which appear between various policy sectors represented by various ministries.

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