



socialplatform



# INVESTING IN SERVICES FOR PEOPLE'S WELL-BEING

A collection of case studies

# TABLE OF CONTENTS

<b>Introduction</b> .....	<b>p. 3</b>
<b>The Fredericia Life Long Living Programme</b> .....	<b>p. 4</b>
Long-term care (social care, rehabilitation and re-enablement, prevention, independent living)	
<b>The Health Mediation Programme</b> .....	<b>p. 6</b>
Health and social services for disadvantaged groups	
<b>The Healthy Communities Project</b> .....	<b>p. 8</b>
Health mediation, health and social services for people in vulnerable situations	
<b>The NoRo Centre</b> .....	<b>p. 10</b>
Integrated social and health care services	
<b>The Humanitarian Health Consultation Centre</b> .....	<b>p. 12</b>
Health care for migrant families and undocumented migrants without health insurance	
<b>The Refugee Mission of the Reformed Church of Hungary</b> .....	<b>p. 14</b>
Integration of refugees	
<b>The Magdas Hotel</b> .....	<b>p. 16</b>
Inclusion of refugees in a social enterprise in the tourism sector	
<b>Le Mat Hotels</b> .....	<b>p. 18</b>
Employment services, social entrepreneurship, social inclusion	
<b>Insertadix del Mediterraneo &amp; Armoas y Colores VI</b> .....	<b>p. 21</b>
Work integration for people in vulnerable situations through the social economy	
<b>Reforming Child Protection</b> .....	<b>p. 23</b>
Child protection system	
<b>SOS Children's Villages Latvia Youth Programmes</b> .....	<b>p. 26</b>
Support services for young people leaving care	
<b>Partnerships in Participation Project</b> .....	<b>p. 29</b>
Youth participation and education	
<b>Fa Bene</b> .....	<b>p. 31</b>
Social and employment services, community action for social inclusion	
<b>Cowan Court</b> .....	<b>p. 33</b>
Extra care housing	
<b>Acknowledgements</b> .....	<b>p. 35</b>



**socialplatform**

Social Platform is the largest civil society alliance fighting for social justice and participatory democracy in Europe. Consisting of 47 pan-European networks of non-governmental organisations, Social Platform campaigns to ensure that EU policies are developed in partnership with the people they affect, respecting fundamental rights, promoting solidarity and improving lives.

# INTRODUCTION

## **Investing in services for people's well-being: From good practices to better policies**

Starting from the experience of many Social Platform members, their national members and partners on the ground, this publication is designed to show that investing in high quality health, housing, social, employment and education services and social infrastructures for all is an investment in people and for the future, and not simply a cost.

Promoting investment in services is not only about the amount of resources needed – it is also about the approach taken in their design and delivery.

Services should be people-centred and tailored to meet each individual's needs. They should promote users' human rights and aim to empower people and make them more independent.

In addition to addressing present needs with immediate effect – such as improving people's skills, health conditions and employability – investment in services can prevent or reduce future needs that would give rise to additional costs and reliance on services, including emergency health care, unemployment benefits, correctional facilities and income support.

This approach is known as "social investment".

With our members, their national members and partners, we have developed 14 case studies from 12 EU Member States to illustrate how this approach can be implemented in practice.

The case studies can be divided into five categories:

- 1. Investing in integrated social and health care services**
- 2. Investing in migrants' and refugees' inclusion**
- 3. Investing in people's employability through the social economy and social enterprises**
- 4. Investing in children and young people**
- 5. Investing in the community, housing and independent living to promote social inclusion**





## THE FREDERICIA LIFE LONG LIVING PROGRAMME

### SECTOR

Long-term care (social care, rehabilitation and re-enablement, prevention, independent living)

### COUNTRY

Denmark

### LEAD ORGANISATION

The [Municipality of Fredericia](#), in contact with [AGE Platform Europe](#), the European network of non-profit organisations of and for people aged 50+

### CONTACT

Britta Hallin,  
Communication Advisor,  
Municipality of Fredericia,  
[britta.hallin@fredericia.dk](mailto:britta.hallin@fredericia.dk)



### DESCRIPTION

Like many other cities in Europe, the municipality of Fredericia is undergoing a rapid process of demographic ageing. Fredericia expects an increase in its spending in care services of about €6.1 million by 2020. This pressure on human and financial resources led the authorities of the municipality to profoundly rethink their perspective on care delivery to older people. The ambition was to bring an overall paradigm shift in the sector.

In this context, the Life Long Living Programme was set up in 2008, with the aim to replace a system based on passive service delivery and compensatory care with one driven by the concept of "re-enabling" care. Through this project, the Fredericia municipality has turned the interaction between citizens and the

municipality 180 degrees. The municipality now focuses on the resources presented by older people, instead of looking at their limitations. The intention of this new way of interacting is to assist older people in having control over their own lives.

Older people are helped and trained so that they can regain their autonomy to perform various daily tasks such as cleaning, dressing, shopping, cooking, watering flowers, taking a bath, enjoying leisure activities or socialising with friends and family. Thanks to this support, they gain confidence in their own capacity to live autonomously and remain active in society. Little by little, older people increase their physical abilities and start coping on their own or with less help from the Elderly Care Department. Several partners were involved in the project and

brought their expertise to its design, including the Council of Elderly Citizens of the municipality of Fredericia, several civil society organisations representing older people, as well as researchers from University College Lillebaelt. Caregivers' trade unions were also consulted, and have been involved in the implementation phase as well as assessment of the programme.

### **A SOCIAL INVESTMENT APPROACH**

Empowerment and participation are founding principles of the Life Long Living Programme.

As they gain freedom and independence in performing everyday life activities, older people become able to actively participate in society. Thanks to the programme, they feel empowered; rather than being perceived as a burden, they can be considered as strengths to their community.

Older people also fully participate in the implementation of the programme. A Citizens' Involvement Group, made up of ten senior citizens, has been given the responsibility of providing constructive input into and criticism of the initiative, and to bring feedback from their peers. This Group is vital to promote the engagement of older people in this process that directly affects them and would not work without their support.

With this focus on empowerment and participation, the Fredericia Life Long Living Programme is a brilliant example of good practice in terms of social investment. By

investing in people, improving their lives and preventing hardship instead of trying to repair its damaging consequences, it saves significant costs in the long-term. The fact that every individual's desires, resources and possibilities are taken into account is also essential, since the initiative can only be successful if it is considered to be meaningful by every beneficiary.

### **MAIN ACHIEVEMENTS**

The greatest achievement of this new rehabilitative and practice-oriented approach is of course the satisfaction of older people in the municipality. The results of an evaluation of the programme are extremely encouraging; 84.8 % of the beneficiaries have improved their quality of life, with 45.9 % of them being completely empowered and becoming able to live an independent life again, and 38.9 % of them needing less help than previously required. Employees in the Elderly Care Department also expressed significantly greater job satisfaction and are more engaged with the new working methods and the new interaction with senior citizens. A decrease in sick absence has been observed as well.

Moreover, the project brings very tangible financial gains. The cost of services provided by the municipality has decreased significantly by approximately €170,000 per month – more than €2 million per year. The saved money is directly used to cover the growing number of people in need of rehabilitation services due to an ageing population. Therefore, with the same

amount of money, support is provided to more people.

Finally, the success of the programme also convinced the Danish government to set up a commission to revise the laws on social services in order to incorporate the Life Long Living approach in the legislative framework. Since 2012, the Fredericia Model has been integrated in the Danish national budget as a model of good practice for all Danish municipalities.

### **LOOKING FORWARD**

The approach promoted by Life Long Living in Fredericia could be easily applied to other countries and regions, if care providers receive appropriate training to be able to properly communicate competences and skills.

The city of Fredericia is currently in contact with other municipalities outside of Denmark, including in Finland, Norway, Sweden, France and the Netherlands, all of which show great interest in the project.



## THE HEALTH MEDIATION PROGRAMME

### SECTOR

Health and social services  
for disadvantaged groups

### COUNTRY

Bulgaria

### LEAD ORGANISATION

[The National Network of Health Mediators](#) in Bulgaria, partner of the [European Public Health Alliance](#) (EPHA), Europe's leading NGO alliance advocating for better health

### CONTACT

Dilyana Dilkova, member of the Managing Board of the National Network of Health Mediators Association, Bulgaria,  
[d.dilkova@gmail.com](mailto:d.dilkova@gmail.com)



### DESCRIPTION

The National Network of Health Mediators (NNHM) is a non-governmental organisation founded in 2007 on the basis of a health mediation project initiated in 2001. Its aim is to facilitate the link between members of disadvantaged and marginalised groups belonging to ethnic communities – particularly the Roma population – and health and social services and institutions. This is done with the help of “Health Mediators”, who are themselves members of the targeted community with the necessary language skills. Health Mediators are employed by municipalities that receive national public funding for hiring them. NNHM is governed by a Managing Board of nine members: five of them are practicing Health Mediators belonging to vulnerable Roma

communities, and four are experts and trainers.

Health Mediators spend most of their time carrying out work in the field with the people that they serve. In each neighbourhood they build contacts and collect information on people's health conditions. For example, they might identify children who are not subscribed to a general practitioner or with missed vaccinations, uninsured pregnant women, and chronically ill patients. The role of the health mediator is therefore crucial in ensuring medical follow-up for the most marginalised.

Their role is particularly important in Bulgaria; although Roma people constitute approximately 10% of the population according to unofficial data (about 5% according to official data), they are often treated unequally or openly discriminated against and segregated



because of their ethnic origin. Such discrimination is also reflected in the domain of health care, with some worrying practices such as segregation of Roma people in hospitals, or the reluctance of some general practitioners to add Roma babies to their patient list.

## **A SOCIAL INVESTMENT APPROACH**

Several key aspects of a social investment approach are well reflected in this programme.

Firstly, NNHM endorses an inclusive approach. While it is generally up to patients to come to service providers, it had become clear that this logic was indirectly preventing vulnerable populations from having access to adequate health care in Bulgaria. By working with them on the ground, NNHM ensures that every individual is properly accompanied. The fact that Health Mediators belong to the community also reinforces the population's trust in the system, which is positive in the long term.

Secondly, the concept of prevention is at the heart of NNHM's work. This applies to child vaccinations or regular medical check-ups in cooperation with specialists, but the prevention work undertaken is also much broader. Health Mediators are encouraged to discuss sensitive topics with families, such as risks related to early marriage and early pregnancy, or the harm of early school leaving.

Thirdly, one of NNHM's objectives is to empower Health Mediators, as well as members of the

community as a whole. By appointing Health Mediators among members of the community who have graduated from secondary education at least, the aim is to send the clear message that school is an important inclusion instrument that enables people to integrate in society and the labour market. This is important since the Roma population often has the feeling that public administration is reluctant to hire people belonging to ethnic minorities.

The benefits of the service also cover several other areas: Health Mediators sometimes help people fill in job applications, make them aware of their rights with regard to non-discrimination, work with them on the issue of domestic violence prevention, and even discuss environmental issues with them. The objective is to empower individuals belonging to ethnic minorities and make them active citizens in society.

## **MAIN ACHIEVEMENTS**

The most tangible NNHM achievement is the prevention of the spreading of infections, such as tuberculosis, in the community. Thanks to hygiene recommendations and vaccination campaigns, high treatment and medication costs are avoided. General practitioners acknowledge that the Health Mediators' work increases the vaccination rate among vulnerable populations, including for non-obligatory vaccines.

Since the beginning of the project of health mediation in Bulgaria in 2001, about

350 Health Mediators belonging to Roma communities were selected, trained, and received professional certificates. The fact that the Bulgarian government decided to make this programme a national one in 2007 in order to ensure its sustainability proves that it has been a successful project.

In some municipalities, local hospitals have also decided to work in closer cooperation with Health Mediators who can help them establish better communication with patients belonging to ethnic minorities.

## **LOOKING FORWARD**

The service could still be further expanded to more municipalities where the living conditions of vulnerable communities are not satisfactory in terms of health literacy and hygiene, or access to water and sanitation infrastructure. Given the diversity of communities and the necessity to take into account the specificities of each area, structures to support exchange of experience between Health Mediators, quality training and monitoring of the programme are extremely important. For the moment, this is only possible thanks to European and private funding, and long-term financial support will be needed in the future.

NNHM will also try to find ways to provide an accurate quality assessment of the results of the project in the years to come.



## THE HEALTHY COMMUNITIES PROJECT

### SECTOR

Health mediation, health and social services for people in vulnerable situations

### COUNTRY

Slovakia

### LEAD ORGANISATION

[Platform for Support of Health of Disadvantaged Groups](#) (PSHDG), member of the [European Public Health Alliance](#) (EPHA), Europe's leading NGO alliance advocating for better health

### CONTACT

Magdaléna Rothová,  
Executive Secretary,  
PSHDG; Director,  
Association for Culture,  
Education and  
Communication (ACEC),  
[rothova@acec.sk](mailto:rothova@acec.sk)



### DESCRIPTION

The goal of the Healthy Communities national project is to find a systemic and sustainable solution to the alarming state of health and social conditions of disadvantaged groups in Slovakia – particularly Roma communities – with a specific focus on women and children. The main aims are to promote access to health care and public health, including preventive health care and health education and to reduce the gap in health status between the Roma community and the majority population.

The health situation of numerous isolated Roma communities in Slovakia has been characterised by a high frequency of illnesses, chronic and infectious diseases, permanent reductions in physical and mental performance, and low life

expectancy. All this is caused by poor hygiene conditions, low education levels, and limited access to drinking water.

The project's mediation concept was originally developed in 2003 by the non-governmental organisation Association for Culture, Education and Communication (ACEC). At the core of this concept is the work of Health Mediators who are members of the Roma community they serve and in which they live. With the support of coordinators, Health Mediators are actively engaging with their local communities and informing local people of the services offered by the project. They invite clients for vaccinations and preventive check-ups, organise home visits and follow-up visits for mothers with newborns, and accompany patients to their doctor or to the hospital.



Health Mediators regularly host education sessions to raise awareness within the Roma community of the importance of hygiene and healthy habits, and risks linked to sexually transmitted diseases. With the support of coordinators, they are also responsible for presenting the project's services to the local authorities, general practitioners and other local doctors.

In 2012, ACEC helped to establish another association, the Platform for Support of Health of Disadvantaged Groups (PSHDG), through which the project spread from its original 68 locations to 108 locations throughout Slovakia. In 2014, the Slovak Ministry of Health assumed main responsibility for the project and together with PSHDG established the non-profit organisation Healthy Communities NPO. Now they are jointly responsible for the implementation of the Healthy Communities national project, which was co-financed by the European Social Fund in 2014-2015.

### **A SOCIAL INVESTMENT APPROACH**

The innovative character of the programme is that it combines empowerment of Roma Health Mediators, service users, and the wider Roma community. The programme adopts an integrated approach; while aiming to improve Roma health conditions, it also generates positive effects on both education and employment.

Health Mediators and coordinators are the most important components of the programme. Health

Mediators are recruited and employed among people belonging to Roma communities. Formal education requirements were reduced to facilitate their employability, while motivation to do something beneficial for the community was given more importance. Targeted education and the personal and professional development of Health Mediators and coordinators are two specific objectives of the project. They are involved in the planning, implementation and monitoring of the project's education and training activities, as well as in the mediation work in the field.

Moreover, members of the community as a whole have also been empowered. Improving health conditions of Roma communities also contributes to reconnecting them with the labour market.

The project's success also stems from a wide partnership between different actors across public, civil society, and academic sectors. Health Mediators cooperate on a daily basis with general practitioners, paediatricians, hospitals, and nurses. Nowadays, the project counts on the collaboration of over 750 doctors. Doctors play a key role in order to connect clients with the health service. Other important stakeholders are local officials like mayors and the local authorities. With their cooperation, Health Mediators can resolve issues related to the social and health status of their clients. As families and children are two of the main target groups of the project, cooperation with schools is needed for

effective early detection of diseases and education on health and hygiene.

### **MAIN ACHIEVEMENTS**

Over the years, the project has delivered concrete results. It has created 257 full-time jobs (234 Health Mediators and 23 coordinators) in the poorest regions of Slovakia, with 95% of Health Mediators being members of targeted groups. More than 67,000 people are registered with the project in 239 different locations, with an indirect impact on approximately 700,000 Slovakian residents, since the support provided to one community also improves the health situation in the wider area. In some regions, Roma Health Mediators managed to completely stop the spread of infectious diseases thanks to cooperation with doctors and state health organisation staff. The professional titles of Roma Health Mediator and Health Field Worker were recognised and certified by the Slovak Ministry of Education.

### **LOOKING FORWARD**

This successful project could be scaled-up in the future, both geographically and in terms of the fields that are covered: it could be extended to cover social services, housing, and after-school education. The project could be transferred to other countries, by taking into account national or regional specificities. A similar programme is being successfully implemented in Bulgaria.



## THE NORO CENTRE

### SECTOR

Integrated social and health care services

### COUNTRY

Romania

### LEAD ORGANISATION

The [NoRo Centre](#), partner of [Eurordis](#), a non-governmental patient-driven alliance of patient organisations and individuals active in the field of rare diseases

### CONTACT

Dorica Dan, President of Romanian Prader Willi Association / Romanian National Alliance for Rare Diseases / Romanian Association of Rare Cancers; member of the Board of Eurordis; Coordinator of the NoRo Centre,  
[dorica.dan@eurordis.org](mailto:dorica.dan@eurordis.org)



**EURORDIS**  
Rare Diseases Europe

### DESCRIPTION

The NoRo Centre is a resource centre providing therapeutic and medical services. Its main objective is to provide integrated social and care services to people affected by rare diseases and their families through improving access to care, information, research, and education.

The NoRo Centre regularly organises training for patients; groups of 12-14 patients with the same rare disease participate in one-week sessions where they are provided with therapy, education, and rehabilitation. It also provides training for people with intellectual disabilities with the aim to teach them independent life skills.

Moreover, the Centre is in charge of a day care centre that organises individual and group therapy for around 50 children with

rare diseases and autistic spectrum disorders.

A help line is available for clients or professionals looking for information and support.

The Centre has set up a network of videoconference facilities with seven medical universities across Romania, contributing to continuity of care and direct access to information and meetings between patients and professionals while avoiding travel costs. Sharing knowledge and exchanging good practices on remote management consultations, medical and social advice and training are essential in the sector of rare diseases, since expertise is scarce.

To make this project a success, the Centre cooperates with non-governmental organisations, health care providers, social workers, teachers, employers, and

several institutes with expertise in rare diseases. At local level, the Centre organises meetings with kindergarten and schools where children from the day care centre are integrated. The Centre also works in partnership with public authorities and stakeholders at national level, which is important to promote positive measures in the areas of health, fighting poverty and social exclusion, and education. It collaborates with the Ministry of Health, the National Authority for Disabled People, and the Romanian National Alliance for Rare Diseases (RONARD).

The day care centre is partly funded by the local council and the county council, and the medical outpatient clinic of the Centre has a contract with a health insurance company.

### **A SOCIAL INVESTMENT APPROACH**

Through collaboration with experts, medical universities and social services at different levels, the Centre is able to bring together new ideas. It also contributes to the European Union's INNOVCare project, representing an innovative care pathway that brings together national resource centres for rare diseases in partnership with public bodies.

Participation is a guiding principle of the project. The Centre holds regular meetings with service beneficiaries and their families to discuss potential improvements. They are involved at all stages of the process, from planning to implementation. Every patient has the chance to fill in a questionnaire about

the quality of services provided. Moreover, the managing board consists of seven people living with rare diseases and family members, which guarantees that every decision takes into account service users' concerns.

The activities undertaken by the project are meant to empower people and strengthen their skills and capacity. The objective is to enable them to fully participate in community life and advocate for their fundamental rights; for example, through access to therapists who conduct home visits to families in order to help parents to continue care interventions for their children.

The Centre embraces a preventive approach through the therapeutic education of beneficiaries and by connecting with other services to ensure continuity of care. For people living with rare diseases early and continuous intervention is very important.

Once combined, these factors produce a return on investment in the long-term, since family members are more likely to remain in employment as their child or relative is well cared for and provided with the necessary skills for an independent life.

### **MAIN ACHIEVEMENTS**

Thanks to the high quality social and integrated services the Centre provides, it is now recognised by the Ministry of Health as a health care provider and a specialised social service with research capacity. In the last three years, 479 people have registered to its therapy and therapeutic education

services. Many other beneficiaries take part in information and training services.

### **LOOKING FORWARD**

Securing funding from local and national authorities for the medium- and long-term will be important for the Centre. Public authorities should provide support equivalent to at least the minimum costs standards for service provision established by the Ministry of Health and the Ministry of Work in Romania. Moreover, having one point of contact for accreditation and recognition of integrated services and another for funding integrated care would make the work of the Centre much easier.

Through the INNOVCare project, opportunities to upscale the model of integration are analysed with the intention of extending it to other Member States and beyond rare diseases. Partnerships between public, private, and civil society organisations will also have to be strengthened.





## THE HUMANITARIAN HEALTH CONSULTATION CENTRE

### SECTOR

Health care for migrant families and undocumented migrants without health insurance

### COUNTRY

Germany

### LEAD ORGANISATION

[Maisha e.V. – African Women in Germany](#), member of the [Platform for International Cooperation on Undocumented Migrants \(PICUM\)](#)

### CONTACT

Virginia Wangare Greiner, Executive Director, Maisha e.V., [maisha-african-women@gmx.de](mailto:maisha-african-women@gmx.de)

Dr. Petra Tiarks Jungk, Health Department, City of Frankfurt, [petra.tiarks-jungk@stadt-frankfurt.de](mailto:petra.tiarks-jungk@stadt-frankfurt.de)



### DESCRIPTION

Maisha e.V. is an organisation that aims to assist African women in Germany in dealing with the German authorities, and society in general. In 2001, Maisha e.V. helped to introduce the Humanitarian Health Consultation Centre in Frankfurt as a support service to undocumented pregnant women. This service is essential, since it is common to see undocumented expectant mothers contacting medical services too late in their pregnancies as they fear being reported to authorities, or disappearing soon after birth even if there are complications because they have no money to pay for longer stays in hospital. The objective in designing this programme was therefore to enable mothers to have healthy babies without fear and to provide post-natal care to mothers and their

newborns. The main daily task of the service is to help women get an appointment with a clinic and to process their paperwork. Other services include information on sexual and reproductive health and provision of social and psychological counselling with the assistance of cultural mediators.

The City of Frankfurt responded positively to the initiative, considering the important contribution it makes to improving the basic health needs of undocumented, pregnant, and vulnerable women.

Over the years, the organisation has also built partnerships with a wide array of different actors. The City of Frankfurt's Women's Department has provided financing for the organisation's work, the Health Department has facilitated cooperation with doctors, and the Social

Care Department has provided medicine. Moreover, based on information provided by the organisation about the financial difficulties of its client group and with the support of the former Director of the Health Authority, Maisha e.V. was able to negotiate arrangements for special reductions of the normal costs and additional costs for medical complications with a few customer-friendly hospitals.

Initially, this service was entirely dedicated to African women. However, due to high demand it was later enlarged to other undocumented foreign nationals, European nationals without health insurance, rejected asylum seekers, and other expectant mothers.

Services are provided anonymously to address migrants' fears of being denounced or otherwise detected, as required under German law.

### **A SOCIAL INVESTMENT APPROACH**

The Humanitarian Health Consultation Centre endorses a life-cycle approach. Helping pregnant women and newborns has important long-term positive effects by enabling them to develop themselves in a safe environment and progressively become included in society. This is achieved through medical and psychological support, both of which are essential in circumstances such as unwanted pregnancy, miscarriage, or victims of female genital mutilation. Additionally, it is important to remember that investment in health care for people in vulnerable

situations brings far-reaching benefits for society as a whole, not the least through prevention; for example, offering service users detailed information about malaria, AIDS, or any other health issue for which they need medication or medical attention prevents the spread of infectious diseases.

More generally, the project has a positive impact in other areas, too. During their visits, women in need often share numerous other issues with volunteers concerning housing problems, alien status, discrimination, health, nutrition, or child care, and Maisha e.V. workers try to provide valuable advice.

It is also very important for the organisation that women are actively involved in designing the service provision, and they are therefore regularly asked to comment on it. Clients do not consider it as another top-down initiative, and they trust Maisha e.V. and the Health Authority that cooperates with them. This is partly due to the fact that the organisation's directors are not distinct from the community and represent various African nationalities.

### **MAIN ACHIEVEMENTS**

Every year, Maisha e.V. helps some 1,500 people in need. This tremendous work has been largely recognised and praised. In 2002, the organisation was awarded the Integration Award by the City of Frankfurt.

Since then the organisation has received many other awards, and several other major city administrations

have implemented similar drop-in centres that have 'humanitarian consultation hours' for providing medical consultations.

Maisha e.V. has become one of the leading members of the European Network of Migrant Women.

### **LOOKING FORWARD**

Other cities often ask to visit the Humanitarian Health Consultation Centre, and members of the organisation are regularly invited to talk about the project. It is encouraging to see that it is becoming a benchmark for service provision in Germany and that similar programmes are being developed in other cities.

However, while the benefits of these promising practices are recognised throughout the country, the legal and practical environment is still problematic. The current situation leads to legal inconsistency, unregulated provision of public health services, strain on health professionals (in terms of professional ethics, stress, time and resource limitations), and serious challenges to individual and public health. This situation will have to be improved in the future.



## THE REFUGEE MISSION OF THE REFORMED CHURCH OF HUNGARY

### SECTOR

Integration of refugees

### COUNTRY

Hungary

### LEAD ORGANISATION

[The Refugee Mission of the Reformed Church of Hungary](#), member of [Eurodiaconia](#), a European network of 47 churches and Christian NGOs providing social and health care services and advocating social justice

### CONTACT

Dóra Kanizsai-Nagy,  
Director, Refugee Mission  
of the Reformed Church of  
Hungary,  
[oikumene@reformatus.hu](mailto:oikumene@reformatus.hu)



### DESCRIPTION

The main goal of the Refugee Mission of the Reformed Church of Hungary is to offer an integrated approach to fulfil the diverse needs of refugees, enabling them to feel at home in their host country and start a new life. People of any age or gender are welcomed by the Mission, reflecting the diversity among refugees fleeing to Hungary.

The main nationalities are Afghani, Syrian Pakistani, Iranian, Iraqi, Palestinian, Somalian and Nigerian. These people have very diverse skills levels, ranging from basic to higher education, and trauma or addiction are just two of the possible additional problems that contribute to making this population highly disadvantaged.

The Mission focuses, firstly, on providing housing services for groups of young refugees, either through the direct provision of apartments or through rent subsidies. Its activities, however, go well beyond housing. The Mission provides a series of different services aimed at the complete integration of refugees in Hungarian society. Language courses are organised, and the Mission also acts as a facilitator between refugees and the public employment authority.

The expected outcome is to offer a solid, comprehensive and long-term basis for the successful integration of refugees. Refugees therefore continue to be monitored for a year after they become involved with the project, which ensures that their integration is sustainable. Integration is considered successful when families, or single refugees,



are able to fend for themselves and their home after one year.

Because all of the services provided by the Mission act as substitutes to state-provided services that are not accessible to refugees, direct coordination with reception centres is very important. However, communication with public authorities is also essential and the staff of the Mission participates in round table meetings in the Hungarian Ministry of Home Affairs, together with other non-governmental organisations, and they have the possibility to raise their issues.

The project is funded mainly by European grants in the framework of the Asylum, Migration and Integration Fund (AMIF) and the European Social Fund (ESF), and by private funding and funds of the Hungarian Church.

### **A SOCIAL INVESTMENT APPROACH**

Through social investment in education and skills development, the Mission actively promotes the inclusion of refugees in the long-term. This is of course challenging, as they present a huge range of diverse needs, which often require a personalised approach. Nevertheless, the project tries its best to provide tailor-made support to each refugee, especially in the area of employment, where people are integrated in job fields related to their previous work experience and skills when possible. The main goal is to transmit the message that, in spite of trends of islamophobia and xenophobia in Hungary, refugees can improve their lives in their host country.

This is a long-term motivation for succeeding in their efforts, and it is often associated with family reunification.

With regards to children, the Mission prevents social exclusion and a lack of integration via partnerships with schools in Budapest that accept to take refugees among their pupils. The Mission sends teachers to these schools to complement and support them in this effort.

The Mission also tries to directly integrate refugees in the labour market, having contact with public employment services and local employers who are open to hiring them. Moreover, from 2010 onwards, the Mission itself has been able to hire refugees among its workers as social advisors, translators and co-workers. Having staff that experienced the same difficult transition in their life allows the organisation to interact better with service users. It facilitates the development of community life.

### **MAIN ACHIEVEMENTS**

The full integration of refugees in Hungarian society is of course the main achievement of this project. Its rapid development can attest to its success. The project was launched as a small programme addressed to people leaving a reception centre in Budapest, which serves the vast majority of refugees arriving in Hungary. It has dramatically increased in size since then. Starting with only two families in 2007, it has now provided support to about 260 people.

There are also tangible examples of how the Mission has concretely helped refugees to improve the provision of services and foster inter-cultural dialogue. One case regards the project of a Hungarian-Somali dictionary, which was written by a large group of Somali minors learning Hungarian. As this project promotes their abilities, it also simplifies the work of language teachers by creating a tool that did not exist before. Another example is the creation and circulation of intercultural calendars to facilitate dialogue between refugees and local students in schools that were at first reluctant to cooperate with the Mission.

### **LOOKING FORWARD**

The social impact of the Mission critically depends on its public perception. The political environment in Hungary constitutes a very challenging scenario; indeed, it is not very supportive of refugees' integration and the project risks closure every year. In this context, it is essential for the Mission to advocate on a daily basis for the reception and integration of refugees and to underline the benefits they bring to society.

The Mission has already, on a small scale, contributed to the evolution of public perception. This example could therefore be transferred to other Central European countries with less experience in refugees' integration, but should in any case be adapted to local circumstances.



## THE MAGDAS HOTEL

### SECTOR

Inclusion of refugees in a social enterprise in the tourism sector

### COUNTRY

Austria

### LEAD ORGANISATION

Magdas Social Business was set up by Caritas Vienna, member of Caritas Europa, the network of Caritas organisations on the European continent

### CONTACT

Gabriela Sonnleitner, CEO, Magdas Social Business, [gabriela.sonnleitner@magdas.at](mailto:gabriela.sonnleitner@magdas.at)



caritas europa

### DESCRIPTION

Magdas, a member organisation of Caritas Vienna, was founded in 2012 with the aim to create new job opportunities for people living in poverty who have lower chances of entering the job market.

Over the last few years, Austria and its capital Vienna, as well as many other cities in Europe, have experienced very significant increases in the number of people seeking refuge in its territory. Once settled there, refugees often face enormous difficulties in integrating into the labour market, for example because of a lack of proficiency in the language of the host country, or because of discrimination and unfair treatment. As a consequence, they face further problems in accessing housing, and often end up in situations of precariousness, including

extreme poverty and social exclusion.

At the same time, however, there is a lack of qualified staff in the tourism industry in the region. Convinced that many refugees had the potential to work in this sector, Magdas realised that both issues could be addressed together.

The organisation developed the concept of a social business hotel run by refugees accompanied by experienced staff. The idea was that a hotel could easily become an engaging and motivating project that could bring together people with very different cultural, professional and social backgrounds.

The hotel, a former retirement home owned by Caritas, was designed through a co-creation process involving several companies, neighbours, refugees, and artists; for example, some of the

furniture was constructed from material that was reused, recycled and recovered during workshops with these groups. The Academy of Fine Arts was also involved in the project.

After nine months of intensive work, the Magdas Hotel could officially open on 14 February 2015. Its inauguration was received with extensive media coverage, as this was the first project of its kind in Austria and in the European Union as a whole. Numerous Austrian newspapers, but also well-known foreign news outlets such as the Guardian, NZZ, Die Zeit, Süddeutsche Zeitung, CNN, BBC and many more reported on the hotel and the innovative idea behind it.

The project is funded by loans from Caritas and Erste Bank; the bank took some convincing of the project's potential due to its innovative nature. Nevertheless, Magdas was able to demonstrate its expertise as a social business, and to show that they had developed a strict strategy and budgetary plan that would be adapted to the market situation every year.

### **A SOCIAL INVESTMENT APPROACH**

As a social business, Magdas tries to solve both economic and social problems using entrepreneurial tools. The focus is not the maximisation of profit, but the maximisation of societal benefits, solidarity and openness.

By focusing on the skills, talents and motivation of refugees rather than seeing them as a burden upon

their hosting country or municipality, Magdas has made an investment in the future. With this unique initiative, refugees are recognised by the population as people involved in the community's activities, and not as people relying on public aid.

Public money is saved in the short-term since the refugees no longer rely on benefits, and in the long-term, as these refugees will contribute to the Austrian economy in the years to come. In this regard, by cooperating with training institutions and the tourism industry, the Magdas Social Business is able to provide refugees with training that will serve them throughout their life.

### **MAIN ACHIEVEMENTS**

The Magdas Hotel project has been an undeniable success. The hotel employs thirty people, out of which twenty are refugees. They come from sixteen different countries, including Nigeria, Guinea, Syria, Iran, and India. They also feature very different religious backgrounds, and there is a perfect gender balance among employees. All these people cooperate with one another, united by this common project, which sets an excellent example for other organisations.

In the year after its creation, approximately 22,000 guests stayed in the hotel, and were able to admire the skills, potential and ambition of the refugees working there.

Another significant achievement of the project is its public outreach. More than 100 articles in regional, national and international newspapers

and magazines – both online and offline – have been published. This is important because it has already changed the perception of refugees among the public in a positive way.

About a thousand pupils and students, as well as staff from various companies, politicians and ordinary citizens have also visited the hotel to learn more about the project.

### **LOOKING FORWARD**

Magdas has two main objectives for the future. The first is to ensure the financial sustainability of the Magdas Hotel in Vienna in the medium-term. To fulfil this goal, the staff are working hard to achieve an average booking rate of 75%, which is deemed sufficient to ensure that the business continues to prosper. The second objective is to develop a Magdas Social Franchise to facilitate the creation of other Madgas Hotels run by refugees throughout the EU. Magdas is therefore currently looking for new partners in other Member States.





## LE MAT HOTELS

### SECTOR

Employment services,  
social entrepreneurship,  
social inclusion

### COUNTRY

Italy

### LEAD ORGANISATION

Le Mat, a social brand and  
social franchising system  
standing for sustainable  
and inclusive tourism

### CONTACT

Renate Goergen, Director,  
Le Mat Italy; President, Le  
Mat Europe,  
[Renate.goergen@gmail.com](mailto:Renate.goergen@gmail.com)



Special Places, Special People  
& Special Values

### DESCRIPTION

Le Mat is an organisation that has developed practical knowledge on how to set up and manage "type B" social cooperatives in the tourism sector. Type B social cooperatives contribute to the social and professional integration of disadvantaged people, including people with physical and mental disabilities, people with drug or alcohol addictions, or former prisoners.

Over the years, Le Mat has collected information on good practices that can be applied to help make such initiatives a success. This information is shared through manuals and training tools, with the aim to encourage the creation of bars, hostels and other tourism infrastructure functioning as social cooperatives, both in Italy and other European countries. Le Mat also helps

existing structures to revitalise their business by working on the quality of the services provided, their identity, and their branding. This is important since many projects promoting a sustainable form of tourism are not viable in the long-term because of a lack of support and expertise.

The very first initiative developed by Le Mat gives a clear idea of the kind of project they coordinate. The first Le Mat Hotel was the Hotel Tritone in Trieste, opened in 1985. It was launched by a group of young unemployed and excluded people who wanted to start their own activity. They found a poorly-performing hotel, which was a property belonging to a local bank that had been managed for the last forty years by a man who now wished to retire. The manager helped Le Mat to keep his clients and assisted them during

the early days of the initiative. After a few years, the cooperative deemed it necessary to renovate the building, and they received funding from the region and an agreement with the bank for this purpose. The hotel was restored and acquired three stars. In 2015, the bank, still owner of the building until then, decided to sell it and made a first offer to the cooperative at an affordable price. After thirty years of successful management, the cooperative finally became the owner of the hotel. In the last three years some rooms have been used as shelters for asylum-seekers.

In 2005, thanks to the European Union's EQUAL programme, several hotel and tourism experts, the Italian Federation to Surpass Disability, the Ethical Bank and many different cooperatives in Italy and other countries gathered to learn more about the Hotel Tritone initiative. This was the starting point for others to replicate Le Mat's business model.

Le Mat is now a registered and well-known brand that can help organisations wishing to initiate a similar project by facilitating their development. Its revenue comes mainly from payment for services offered to organisations willing to join Le Mat, such as training, consultancy, follow-up, and coaching. Sometimes EU funds, and in particular the European Social Fund, can provide additional support, which is very important as Le Mat clients (the social cooperatives) are rather small and cannot pay significant amounts of

money for consultancy work.

### A SOCIAL INVESTMENT APPROACH

The main rationale underpinning the Le Mat project is that there are many strongly motivated people with the desire to learn something new, assume additional responsibilities and be active in their own recovery, but obstacles remain in including them in the labour market. By supporting the setting up of social cooperatives in the tourism sector, unemployed people and people suffering from marginalisation or stigmatisation are supported in creating their own project and learning how to value each other's work.

This empowerment process is also strongly reflected in the decision-making model of social cooperatives. Le Mat hotels are developed together with all members in a bottom-up approach from the first stages of the planning process. Cooperatives are democratic organisations controlled by their members, who actively participate in setting policies and making decisions. Moreover, members contribute equitably to – and democratically control – the capital of their cooperative. This is a powerful tool to ensure respect for diversity, and it is also essential in empowering people.

Moreover, it is worth mentioning that Le Mat hotels must be cost-effective, meaning that they have to be able to cover all their costs, in addition to investing in

maintenance of the buildings and development of new services. If successful, they become completely sustainable and independent from funding sources, while serving their social aim.

### MAIN ACHIEVEMENTS

When Le Mat collaborators started their mission, they were first told that former prisoners and people with mental health problems or drug addiction were not able to become entrepreneurs or members of cooperatives because they were judged as unable to make appropriate decisions. The legal framework has now evolved in Italy, and disadvantaged people may set up their own businesses. However, many battles still have to be fought all over Europe for the rights of people to take control of their own destiny.

The Hotel Tritone in Trieste is an excellent example of what Le Mat can achieve. More than forty people learned how to work in the hotel industry; they found employment and consequently no longer rely on public assistance. Thanks to Le Mat's manuals and advice its experience has been widely shared. The 2009 opening of Le Mat Hotel Göteborg in Sweden was an important step in the development of the project beyond Italy.

### LOOKING FORWARD

The objective is to continuously expand the Le Mat chain of hotels in order to function more and more as a support platform for new projects. Le Mat is steadily growing, although its development may be deemed to be slow;

however, the project could become sustainable if the number of Le Mat hotels in Europe further increases. Le Mat has already established itself in Sweden, Bosnia and Herzegovina, Hungary, the United Kingdom and Poland, and would like to raise its visibility and open another hotel in Brussels.



Le Mat's unique experience in setting up social cooperatives in the tourism sector and in welcoming travelers looking for a different type of holiday is definitely worth sharing. To this end, additional resources would be required in order to send experts to other EU Member States.





## INSERTADIX DEL MEDITERRANEO & AROMAS Y COLORES VI

### SECTOR

Work integration for people in vulnerable situations through the social economy

### COUNTRY

Spain

### LEAD ORGANISATION

[Asociación El Cerezo](#), partner of the [European Network of Social Integration Enterprises](#) (ENSIE)

### CONTACT

Maria Nieves Ramos, President, Federation of Associations for the Professional Integration of Communities at Risk of Exclusion (FAEDEI), [nieves.cerezo@hotmail.com](mailto:nieves.cerezo@hotmail.com)  
Ana Bello Morales, Project Coordinator, Aromas and Colores VI, [info@elcerezo.org](mailto:info@elcerezo.org)



### DESCRIPTION

El Cerezo is a non-profit organisation founded in Alicante (Spain) in 1996 that is in charge of two main projects:

1. **Insertadix del Mediterraneo**, a work integration social enterprise (WISE).
2. **Aromas y Colores VI**, a training service to improve disadvantaged people's employability.

The two projects were introduced in a context of extremely high unemployment rates in the region, particularly for young people aged 35 years and under, women, and people over 45 years old who face enormous difficulties in re-entering the labour market if they lose their job.

El Cerezo has sole responsibility for the WISE Insertadix del Mediterraneo. It was founded in 2010 with the ambition to bring people who are the furthest away from the labour market

back into employment. Like all WISEs, it is an enterprise that provides goods and services while favouring the social and professional integration of people in vulnerable situations.

Insertadix works in close cooperation with the regional government, including Valencia's employment services that recognised it as a WISE and evaluates its work on a monthly basis. The employment services also provide funding to Insertadix; this public funding complements the

revenue created through service provision. Insertadix is engaged in various economic sectors: gardening and maintenance services, construction and renovation, plumbing, cleaning, environmental services, recycling, and decorating. With regards to the latter, Insertadix is specialised in “trencadis”, a ceramic coating technique used, for example, to build Park Güell in Barcelona.

The service Aromas y Colores VI was also introduced in 2010. It was set up in a context of economic crisis, high levels of poverty, and digital and gender gaps that impede the development of an inclusive economy. The objective of Aromas y Colores VI is to improve the employability and professional qualifications of people in vulnerable situations through comprehensive training programmes. They are provided in a safe and supportive environment, which allows for each individual to realise their full potential. The training programmes are funded by the Social Affairs, Health and Equal Opportunities Ministry.

### **A SOCIAL INVESTMENT APPROACH**

In the region of Alicante there is a lack of adequate resources to support youths and older people experiencing long-term unemployment. As a consequence, these groups can lose working habits and motivation to work, study or participate in training. Insertadix plays a crucial role in promoting the social and professional integration of people at risk of social exclusion by providing them with tools to (re-)enter the regular labour

market. Its work focuses on empowering users by developing personalised pathways that combine training with on-the-job support and supervision. The aim is to improve users’ sense of responsibility, social skills, and technical capabilities. Users are encouraged to adopt a positive stance and to become actors of their own future. They are involved in the design, implementation and evaluation of their personalised pathways from the beginning, as well as in the economic activities of Insertadix.

This approach reflects Aromas y Colores VI’s understanding of social investment, rooted in the concept of quality. The objective is to create training, employment and personal development opportunities adapted to the current economic reality of the rural region in which the service is active. This allows service beneficiaries to achieve their personal goals and, at the end of the process, finally (re-)enter the labour market, either in Insertadix, the mainstream labour market, or as a self-employed person.

### **MAIN ACHIEVEMENTS**

Some figures can attest to the added value of El Cerezo’s work. Insertadix currently employs four disadvantaged people who are completing their work integration period (which can last a maximum of three years in Spain). Insertadix is an economically and financially sustainable enterprise.

With regards to Aromas y Colores VI, more than 70 users benefited from its training activities over the

last year. Among them, five have been able to enter the labour market and three decided to become self-employed.

In 2015, an important achievement of El Cerezo was the signing of an agreement with associations of small- and medium-sized enterprises in Villena and La Comarca. This agreement defines concrete actions and ways of collaborating to promote greater and better inclusion of people at risk of social exclusion, thus contributing to the implementation of companies’ policies on corporate social responsibility. All participants of El Cerezo’s two projects benefit from the agreement.

### **LOOKING FORWARD**

El Cerezo has very clear expectations and targets for the years to come, notwithstanding the difficult economic context, especially in the construction sector. It intends to sign at least 15 framework partnership agreements with public authorities, civil society organisations and companies that are interested in engaging in their work integration activities. It also aims to increase the number of service users, ensure that at least 80% of users finish their training with a positive assessment and obtain a diploma, and create at least two jobs linked to the project every year.



## REFORMING CHILD PROTECTION

### SECTOR

Child protection system

### COUNTRY

Romania

### LEAD ORGANISATION

[Hope and Homes for Children](#), member of [Eurochild](#), the network of organisations and individuals working in and across Europe to promote the rights and well-being of children and young people

### CONTACT

Stefan Darabus, Country Director, Hope and Homes for Children, [stefan@hhc.ro](mailto:stefan@hhc.ro)



**Hope & Homes**  
for Children



**Eurochild**  
Putting children at  
the heart of Europe

### DESCRIPTION

Hope and Homes for Children (HHC) is an international charity working to ensure that all children living in institutions and orphanages have the chance to grow up surrounded by the love of a family. The organisation aims to achieve this objective by encouraging the closure of institutions and preventing the separation of children and their families.

The county of Bacău, in Romania, is an excellent example of the tremendous work undertaken by HHC. In Romania, residential care had generally been considered as the main solution to child poverty and social exclusion, with little effort directed towards support for families. In Romania the economic crisis has had devastating effects on social services,

including services for children. In particular, the services that suffered the majority of reductions in staffing are those tailored towards children without parental care and those with special needs. Also, a moratorium on employment of new staff in social services was imposed, which led to further issues in the system. The lack of funding also had an impact on the training of the staff, with training budgets and opportunities reduced. Due to inadequate resources and improper financial allocation, families and communities already experiencing extreme poverty grew in number and were faced with separation, exacerbating their social exclusion.

Using an evidence-based approach, HHC managed to demonstrate to public authorities the added value of a reform of the child protection system. The



reform process, carried out by HHC in partnership with the Romanian Child Protection Directorate (CPD), has led to the closure of institutions, accompanied by the identification of best possible placement options for every child or young adult leaving an institution. Other key elements of the reform process include: development of community-based services; prevention of separation of children and families; family reintegration; training provided to professionals; and technical assistance to authorities.

The whole reform process was designed in consultation with professionals and practitioners involved in plans for the National Strategy for Child Protection, as well as with representatives of 47 county and local authorities. Thanks to this investment in family reintegration, children have been able to develop a sense of belonging to a community and increase their self-confidence, enabling them to fully participate in society.

Moreover, the actions of HHC have also had a positive impact on other policy areas, particularly the fight against poverty, by encouraging parents to secure jobs or engage in training or education in order to provide for their children.

### **A SOCIAL INVESTMENT APPROACH**

This project endorses a preventive and integrated approach, and aims for the empowerment of people – in this case children and their families – which is a

key aspect of social investment.

An important part of the work of HHC is dedicated to prevention. The organisation tries to avoid children being sent to institutions by working at a very early stage with families that are at risk of poverty. This support is essential; not being separated from family is important for the development of children, and for parents as well since it increases their self-esteem and sense of responsibility towards their children.

HHC developed an integrated set of interventions at regional level based on prevention, family reintegration, family support and alternative care. It designed affordable and quality services for children and their families with a special focus on disadvantaged groups, and especially children with special needs.

Interventions are personalised for each child, covering a wide range of needs. Psychological and social assessments are always carried out before making a decision, in full respect of children's privacy.

Decisions regarding the transition into an alternative service take into account the needs of the children, the need to keep siblings together, friendships, and proximity to parents' homes. Family reintegration consists of reuniting children with their families, so that they can develop their full potential, benefit from a feeling of identity and belonging, and strengthen their self-esteem.

The empowerment of children and families is also at the heart of HHC's actions. Instead of being passive service beneficiaries, children and their families are participants in the decision-making process. When closing down institutions, children are asked for their opinion and are kept informed of the solutions identified for them. Families are considered as partners and fully consulted. Young adults leaving the child protection system are assisted in every decision they take towards independent living.

### **MAIN ACHIEVEMENTS**

Given the success of the experience in Bacău, local and county authorities have become active advocates of HHC's work, sharing this example with other councils in regions where institutionalisation is still the preferred option. Systemic reform of child protection services has been achieved in about twenty regional administrative units in Romania.

Thanks to HHC's work, in 2014 a state ban on the institutionalisation of children under three years old was introduced. Moreover, the Romanian Government acknowledged that care provided by alternative services is not only of higher quality, but also less expensive than care in institutions. In Bacău, for example, about 600 children remained with their families instead of being placed in institutions, leading to an economic saving of 40% per year compared to the costs of institutional care.

Furthermore, prevention became an increasingly



important aspect, high on the agenda of local and county authorities. Due to HHC's advocacy work, a legal initiative regarding nationwide prevention and regulations on prevention was introduced.

The initiative of Bacău CPD demonstrates that the costs incurred by a traditional institution with 117 beneficiaries were LEI 2,023k (€44,580,000). After the closure of the institution and the set-up of four small family homes (for 12 children each), the necessary budget was LEI 1,212k (€26,708,000), meaning a saving of LEI 811k (€17,872,000).



According to recent figures, in Romania the number of children in institutional care has dropped from 105,000 in 2004 to 9,000 today.

### **LOOKING FORWARD**

One of the objectives of HHC is to expand the programme to other countries in Europe and in Africa. The organisation has already provided technical expertise to several national and regional authorities, while fully respecting cultural differences and taking into account local needs.



## SOS CHILDREN'S VILLAGES LATVIA YOUTH PROGRAMMES

### SECTOR

Support services for young people leaving care

### COUNTRY

Latvia

### LEAD ORGANISATION

[SOS Children's Villages Latvia](#) is a member of SOS Children's Villages International, member of [Eurochild](#), the network of organisations and individuals working in and across Europe to promote the rights and well-being of children and young people

### CONTACT

Linda Ziverte, National Programme Development Director, SOS Children's Villages Latvia,  
[linda.Ziverte@sosbca.lv](mailto:linda.Ziverte@sosbca.lv)



### DESCRIPTION

The youth programmes of SOS Children's Villages Latvia were introduced to respond to a situation where young people leaving care were not prepared or supported enough to lead an independent life.

The main aim of the youth programmes is to equip young people leaving care with the tools they need to live an independent life and ensure that they are fully integrated in society. A study carried out in Latvia in 2014 showed that this was far from being the case; a substantial number of young people who have left care neither work nor study, they often do not have sufficient income, which can lead to poverty and social exclusion, and some experience anxiety, insecurity, and depression.

Through the provision of support in an integrated way during this crucial transition phase from youth to adulthood, SOS Children's Villages Latvia aims to make sure that they have a good start in their adult life and have equal opportunities to finish education, find decent employment and housing, and have access to quality health and well-being support services.

In this regard, SOS Children's Villages Latvia provides professional foster care to children and young people. Starting from the age of 15, young people receive support with the objective of acquiring the necessary skills for daily life, including education, social skills, career planning and independent living. Step by step, they learn how to live more independently. These services are provided in foster families or in SOS Children's Villages' youth

facilities, depending on the needs of each individual. In the next phase, young people have the possibility to live semi-independently in apartments that are provided by municipalities. SOS Children's Villages Latvia provides financial, psycho-emotional and practical support until the age of 24.

The organisation introduced a youth facility in Jelgava in 2006, and also manages semi-independent living programmes in Riga. The organisation has developed close cooperation with [Mentor.lv](http://Mentor.lv), a non-governmental organisation (NGO) that provides the support of a mentor to care leavers transitioning to independent life, and also collaborates with employers, entrepreneurs and education institutions. The costs of the services are covered by local government funding, local fundraising and subsidies from SOS Children's Villages International.

### **A SOCIAL INVESTMENT APPROACH**

Through an integrated approach that connects different sectors such as education, employment, housing, health and well-being, the youth programmes aim to ensure that young people leaving care are well prepared for their future independent life. In the long-term, this is an investment in the human capital of the country, since one of the most underprivileged groups in society is supported and has better future prospects. It also helps to break the cycle of disadvantage, as it prevents the future children of these young people from growing up to experience poverty or social exclusion.

To make the approach truly empowering, youth participation is a core element of the services offered by the organisation. An individual development plan that covers all aspects of transition to independent living is drafted and implemented for each young person leaving care, and they are able to take part in the planning process according to their level of maturity.

Given these elements, it is clear that the youth programmes reflect all three pillars of the [European Commission's Recommendation on Investing in Children](#), namely access to adequate resources, access to affordable quality services, and children's right to participate.

### **MAIN ACHIEVEMENTS**

Although SOS Children's Villages Latvia has not yet conducted a systematic analysis of its youth programmes, contact with former users of the service shows that they perform better on average than other young people formerly in care, particularly in terms of finishing education and finding decent employment. SOS Children's Villages Latvia organises self-assessments in accordance with the International Safeguarding Standards of Keeping Children Safe.

Some concrete initiatives led by SOS Children's Villages Latvia that have had a tangible impact can also be cited as important achievements. For example, young people leaving care have been encouraged to develop a peer-support home page that provides information

and advice for other young people in similar situations. This participative toolkit is available online. In 2011, SOS Children's Villages Latvia and seven other NGOs providing services to children and young people launched the Alternative Child Care Alliance. This Alliance has advocated for better protection of the rights of children in alternative care and young people transitioning to adulthood. It has elaborated its advocacy messages in consultation with young people with an alternative care experience.

As a result of their joint work, a more robust legislative and policy framework has been developed in Latvia in recent years. This framework includes: the State Family Policy 2011-2017, which states that young people who have left care should receive special support from their municipality until two years after having left care; the Social Service Development Strategy 2014-2020 that foresees the development of 35 youth homes across Latvia using EU structural funds; the Action Plan for the Implementation of a De-institutionalisation strategy for 2015-2020; and the 2012 Requirements for Social Service Providers that increased the maximum age at which young people can receive support in youth homes to the age of 24.

### **LOOKING FORWARD**

Even with these encouraging political decisions, at the moment the costs of the care and support services provided to young people leaving care until the age of 18



years are only partially covered by local authorities. Moreover, in many municipalities the costs of services provided to care leavers aged 18 years and older are not covered at all by local governments. To make the services financially sustainable, local governments must allocate sufficient funding. SOS Children's Villages Latvia still has a lot of advocacy work to do on this issue.



The project could also be scaled-up to other countries. According to research, adequate services to support young people leaving care in their transition to independent life are missing in many countries across Europe. SOS Children's Villages runs programmes in many of these countries. All programmes have in common that they apply an integrated and rights-based approach to support young people leaving care, and are adapted to local needs.





## PARTNERSHIPS FOR PARTICIPATION PROJECT

### SECTOR

Youth participation and education

### COUNTRY

Finland, Latvia, Germany, Spain, Cameroon, Bolivia, Colombia, Peru and Indonesia

### LEAD ORGANISATION

[The International Falcon Movement – Socialist Educational International](#) (IFM-SEI), member of the [European Youth Forum](#), the platform of youth organisations in Europe

### CONTACT

Christine Sudbrock,  
Secretary General, IFM-SEI, [christine@ifm-sei.org](mailto:christine@ifm-sei.org)



### DESCRIPTION

The project "Partnerships for Participation" took place in 2015 in nine local communities in Finland, Latvia, Germany, Spain, Cameroon, Bolivia, Colombia, Peru and Indonesia. It was managed by the International Falcon Movement-Socialist Educational International (IFM-SEI), an international umbrella organisation of 50 national and local children and youth movements active all over the world.

This 12-month long project aimed to increase young people's participation in the democratic life of local communities in Europe, Africa, Asia and Latin America, through the building of genuine and sustainable partnerships between young people, schools and local authorities.

Children can bring a lot of innovative ideas and solutions to the table, if they are empowered and listened to. The objectives of the project were therefore to provide a space for young people, youth workers and decision-makers to discuss and exchange experiences of youth participation, to inform local decision-makers on its benefits, and to share, analyse and adapt youth participation approaches already in place in schools and local authorities. To support their participation and involvement in local, political and civic life, one European Voluntary Service (EVS) volunteer accompanied and guided each group of children and teenagers throughout the project.

The participants of the local groups were aged between 13 and 18 years old. In most cases, the projects involved a majority of

children from a disadvantaged economic background, and most groups were gender-mixed. They engaged in various types of activities. In Germany, they decided to work with a local neighbourhood council that had not involved children in the policy-making process in the past, and they managed to have two children invited to attend meetings. In Colombia, the organisation engaged directly with the Interior Ministry, and established youth community citizen councils that have the same rights as adult councils to advise on decision-making in local communities. In Latvia, they provided a school with resources to conduct after-school activities for pupils.

The project was funded by an Erasmus+ grant for the paying of EVS volunteers, and by a mixture of private and public grants for local projects.

### **A SOCIAL INVESTMENT APPROACH**

The main feature of the project was of course its focus on the promotion of children's right to participate. It was also important to ensure that participation practices are inclusive and accessible for everyone, as they usually tend to mainly involve children from affluent backgrounds.

The project worked with quality standards for child participation established by UNICEF. The lead volunteers learned about them in their first training session and the groups of children and teenagers attended an international training course on the topic, so they could evaluate their own projects

in regard to these standards.

Empowerment of users was another main concern of the organisation. The planning of the local projects was conducted directly by the teenagers; they decided what to do and how they wanted to do it.

Finally, by involving children in shaping decisions that affect them, the project helped politicians to make appropriate choices, adapted to everyone's needs. Policies obviously improve if lots of people are consulted beforehand, and children are important stakeholders to consider.

### **MAIN ACHIEVEMENTS**

Thanks to the project, nine local partnership projects between youth organisations and local communities have been set up, and hundreds of young people in the world have been empowered to engage in local decision-making. They have improved their self-confidence, their knowledge about political participation, and practical skills such as team work, communication, training and research. The local projects evaluated the satisfaction of the participants, and in all cases they were satisfied. They considered the initiative as very positive, even though cooperation with local authorities did not always work as well as they hoped. The project has also contributed to the cultural openness and internationalisation of youth organisations, by working with EVS volunteers coming from other continents.

The project also had an

added value for local authorities themselves by raising decision-makers' awareness of the benefits of youth participation, and encouraging them to ensure this principle is properly implemented. It is also a good response to the scepticism and frustration of some young people towards political institutions. Moreover, it creates a group of trained and motivated teenagers who are eager to take part in community life as active citizens.

A tangible output of the project is the production of a Child Participation Handbook with training activities for young people and youth workers that was published online, so that the lessons drawn from the different initiatives can be shared with as many people as possible.

Even though most of the benefits of the project will only be visible in the long-term, it is safe to say that a positive impact is likely to be seen in the areas of education, combating poverty, and social inclusion, since they were the topics that the different groups were most interested in.

### **LOOKING FORWARD**

The objective is that these kinds of initiatives are replicated in as many local communities as possible. Educators can use the Child Participation Handbook as a reference toolkit to launch such projects. The project was a success in different regions of the world, so there is reason to believe that it could be implemented in other contexts.





## FA BENE

### SECTOR

Social and employment services, community action for social inclusion

### COUNTRY

Italy

### LEAD ORGANISATION

**FA BENE**, partner of [Caritas Europa](#), the network of Caritas organisations on the European continent

### CONTACT

Tiziana Ciampolini, Caritas Torino, [ciampolini@s-nodi.org](mailto:ciampolini@s-nodi.org)

**fa bene.**

**caritas europa**

### DESCRIPTION

FA BENE is a project launched in 2013 in Turin and meant to challenge the widespread view that charity is the best method to solve social problems, rather than promoting systematic engagement of the community against poverty.

The project works as follows: quality fresh food donated by stall sellers is distributed by logistics operators – who have experienced unemployment or exclusion from the labour market – to families that are experiencing economic difficulties. The families receiving fresh food packages agree to support the community by providing dedicated activities listed in a signed 'reciprocity pact'. More specifically, they commit themselves to deliver at least 20 hours of activities per month in their

community. This mechanism helps to build a network of meaningful relationships and supports integration processes. There is no charge for the beneficiaries, but they must agree to the terms of the reciprocity pact; older people or people with disabilities who benefit from this service, however, are not bound to sign it.

The establishment of this new programme against poverty is based on the observation that social intervention is more likely to bring positive results when it involves different local actors in the various phases of the project, and guarantees an outcome in terms of both social and economic added value. This is why FA BENE aims to build a sense of community and positive relationships between all people directly or indirectly involved in the project, through exchange of goods and services but



also of skills, time, and non-material resources.

Moreover, the project supports refuse reduction plans and food waste prevention programmes by promoting responsible use of food resources.

So far, FA BENE has been funded by Caritas Italiana and the local Caritas Torino, by grants from a bank foundation, and contributions from public institutions at various levels. Essential contributions to the FA BENE project come from donations in kind – mostly food – coming from actively engaged citizens, and from activities carried out by volunteers.

### **A SOCIAL INVESTMENT APPROACH**

The objective of FA BENE is to build innovative community welfare models, by replacing traditional charity-based assistance approaches with co-ownership-based models, empowering all actors involved.

The concept of reciprocity is therefore essential in the project. Food represents a vehicle towards the establishment of reciprocal support actions; those who receive food enter a 'refund' process for the benefit of the whole community. They are not merely regarded as people in need, but also as a resource, eager to share their skills and time with the community. In this way, families, market sellers, FA BENE operators, and the community as a whole become both contributors and beneficiaries. This has had a strong immediate impact on the behaviour of beneficiaries in terms of

increasing their cognitive abilities, level of well-being, and self-esteem.

This also positively affects employment inclusion, since some activities conducted as part of the reciprocity pact have led to job offers or the development of a network that has later resulted in new employment opportunities. Moreover, logistics operators hired by FA BENE are people who have been excluded from the labour market in the past. Last but not least, the local economy is also revitalised, and market sellers benefit from increased sales of fresh food as customers are able to buy extra food to donate to users of the FA BENE service.

### **MAIN ACHIEVEMENTS**

Research carried out by the Centre for Research in Arts and Economics (CREARE) Foundation of the University of Rotterdam has found that the FA BENE project has increased the social skills of service users, had a consistent immediate economic impact on the logistics operators by generating new income, and has fostered growth in sales for market sellers. It has also generated a feeling of belonging to a community for the beneficiaries and promoted solidarity among all actors involved.

The FA BENE project has brought many other tangible results. About 200 families have been supported in the five neighbourhood markets currently active, each of them receiving the equivalent of €1,400 worth of food every year, and providing reciprocity pact activities for at least 20 hours per month. Even

more importantly, an average of 80% of the families leave the project after having overcome the difficulties they experienced and having restored confidence in their own skills.

### **LOOKING FORWARD**

In order to promote the sustainability of this programme, the FA BENE project intends to create a social enterprise with the goal of co-financing socially-responsible businesses. The idea is that customers buying goods through a FA BENE web-based platform would automatically support FA BENE social shares. All revenues generated by the web-based platform would be channelled to create additional employment and carry out activities in the local community.

The FA BENE project will also be extended to other municipalities on the outskirts of Turin, with the support of the city, local communities and market sellers' unions. Although the project is still in the test phase, many large national and international cities have shown interest in the initiative and are eager to experiment with it in their own territories, including Milan, Florence, Catania, Trieste, Barcelona, Marseille, and Skopje.



## COWAN COURT

### SECTOR

Extra care housing

### COUNTRY

United Kingdom

### LEAD ORGANISATION

The care home [Cowan Court](#), in contact with Housing Europe, the European Federation of Public, Cooperative & Social Housing

### CONTACT

Stephen Clark, Housing Planning and Performance Manager,  
[stephen.clark@midlothian.gov.uk](mailto:stephen.clark@midlothian.gov.uk)



### DESCRIPTION

In 2013, the local council of Midlothian, Scotland, had to close an elderly care home. It was then decided to use this context as an opportunity to change the way care was provided to older people in the area. In order to pursue more cost-effective approaches to housing and social care, the local council made the decision to turn to an "extra care housing scheme".

A working group was set up to discuss all the practical aspects of this initiative, in cooperation with prospective residents. The group involved members of the local council interested in the project, academics from the University of Sterling who provided technical support and advice on how best to implement the project, and different services providers.

The objective was three-fold: providing a type of housing and care services that did not previously exist; responding to high demand and long waiting lists for elderly care homes; and contributing to the global goal of enabling people to live longer in an independent setting. The project mainly targets people over 65, with a particular focus on people with specific needs and people with lower incomes who cannot afford private market rental housing. Rent in extra care housing schemes is indeed cheaper than in the private sector; in Scotland, the average cost of rent is circa £320 per month (depending on the care services required), whereas it reaches £650 per month in the private sector.

These discussions resulted in the construction of Cowan Court, a residential complex of 32 flats adapted to older people with specific

physical and mental care needs. Flats were also designed to accommodate spouses, partners or siblings. The objective is to enable older people to live autonomously in their apartment as long as possible. Care and support staff is present on the site 24 hours a day, seven days a week. Therefore, they are familiar with all the residents and their health conditions and can respond with flexibility to any problematic situation.

The design of the buildings was thoroughly thought through, with support from the University of Sterling: corridors are wide enough to be accessible for wheelchairs; clear signage and memorable images and colours are used to help residents – and especially those suffering from dementia – to easily identify where they are in the building; and sufficient lighting is ensured for residents with deteriorating eyesight. There is also a garden and outdoor gym exercise equipment. Moreover, all steps are taken to ensure that Cowan Court is able to welcome external visitors. There are plenty of parking places, a common area with a lounge, restaurant and café, and even a hairdressing salon.

The total cost of the development of the project was £6.1 million, financed by the Scottish Government, the local council and, for the most part, rent revenue.

### **A SOCIAL INVESTMENT APPROACH**

For the Cowan Court project social investment is understood as a commitment to enable people to live

independently in their apartment, while receiving the health care support they need. Cowan Court also adopts a long-term view, taking into account the fact that people's needs are going to evolve and that the facilities must therefore be flexible enough to adapt to these changes. In this sense, the project also endorses a preventive approach. It can be considered a viable alternative to hospitalised care.

Social inclusion is another important principle of the project. The complex was designed in such a way that it would not contribute to ghettoisation. Cowan Court is not far from a home for young people, and everything is done in order to attract external guests and families to the Cowan Court facilities. These contacts are very important for the residents, as they feel that they are part of a wider community.

In terms of empowerment of users, it is worth mentioning that all residents played a crucial role in the early stages of the development of the proposal, giving their opinions on its design.

### **MAIN ACHIEVEMENTS**

One very significant achievement that must be mentioned is that Cowan Court is now a self-sustained project that is financed by rent revenue alone. A small surplus could even be used in conjunction with a loan from the Government to invest in new housing facilities to be built in the future. This is even more remarkable since, as explained above, rent at Cowan Court is much more affordable for people with

lower incomes than rent in the private sector.

Together with the financial sustainability of the project, the quality of service provision is another essential aspect, especially given the social investment approach endorsed by the initiative. A satisfaction survey of residents was conducted, and demonstrated an overwhelming level of satisfaction. A [2015 care inspection report](#) also indicated a positive view of the staff and management team, presenting them as "being committed to delivering a high standard of care and support to tenants."

### **LOOKING FORWARD**

It is hoped that the extra care housing scheme will become a benchmark for local authorities wishing to change the way care services are provided to older people. It represents a shift away from institutionalisation to an approach that pays more attention to people's desires and needs.

In order to achieve the objective of replicating the project in other locations in the future, the question of financial resources needed at the start of such initiatives will have to be tackled. Public authorities have an important role to play in this regard.



# ACKNOWLEDGEMENTS

This publication was coordinated by Valentina Caimi and Maxime Gehrenbeck, and edited and designed by Helen Joseph, Social Platform.

**Social Platform wishes to thank the following people and organisations for their contributions to this publication:**

## *Social Platform members*

- Borja Arrue (AGE Platform Europe)
- Valentina Bottarelli (European Organisation for Rare Diseases)
- Patrizia Bussi (European Network of Social Integration Enterprises)
- Raquel Castro (Rare Diseases Europe)
- Agata D'Addato (Eurochild)
- Alexander Elu (Eurodiaconia)
- Antonio Fantasia (Caritas Europa)
- Agata Krause (Housing Europe)
- Zoltán Massay-Kosubek (European Public Health Alliance)
- Clémentine Moyart (European Youth Forum)
- Shannon Pfohman (Caritas Europa)
- Alyn Smith (Platform for International Cooperation on Undocumented Migrants)

## *Social Platform members' national members*

- Ana Bello Morales (Aromas and Colores VI)
- Tiziana Ciampolini (Caritas Torino)
- Dorica Dan (Romanian Prader Willi Association; Romanian National Alliance for Rare Diseases; Romanian Association of Rare Cancers)
- Dilyana Dilkova (National Network of Health Mediators Association)
- Britta Hallin (Municipality of Fredericia)
- Dóra Kanizsai-Nagy (The Reformed Church of Hungary)
- Maria Nieves Ramos (Federation of Associations for the Professional Integration of Communities at Risk of Exclusion)
- Adrian Oros (Hope and Homes for Children)
- Florian Pomper (Caritas Austria)
- Magdaléna Rothova (Platform for Support of Health of Disadvantaged Groups)
- Gabriela Sonnleitner (Magdas Hotel)
- Christine Sudbrock (International Falcon Movement – Socialist Educational International)
- Dr. Petra Tiarks Jungk (Health Department, City of Frankfurt)
- Virginia Wangare Greiner (Maisha e.V.)

## *Partners*

- Stephen Clark (Midlothian Council)
- Miriana Giraldi (SOS Children's Villages)
- Renate Goergen (Le Mat Hotel)
- Caroline Van Der Hoeven (SOS Children's Villages)
- Linda Ziverte (SOS Children's Villages Latvia)



# socialplatform



[www.socialplatform.org](http://www.socialplatform.org)



[facebook.com/socialplatform](https://facebook.com/socialplatform)



[@social\\_platform](https://twitter.com/social_platform)



Social Platform acknowledges the financial support of the European Commission's Europe for Citizens programme, managed by the Education, Audiovisual and Culture Executive Agency (EACEA). This publication reflects the author's views. The Commission is not liable for any use that may be made of the information contained in this publication.

Published in February 2017.