

## **SOCIAL INCLUSION OF CHILDREN FROM VULNERABLE GROUPS IN THE CONTEXT OF MODERN MIGRATION – A CHALLENGE FOR THE CHILD- CARE SYSTEM**

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*“Rather than expect everyone to participate equally in formal governance, structures of governance in a way that taps into the informal spaces of community life that they routinely inhabit” Skidmore, P., Bound, K., Lownsbrought, H., Joseph, H., - Community Participation, Who benefits?, Rowntree Foundation, 2006*

### **Abstract**

*The increasing “mobility” of the labour market and the increasing “flexibility” of social life induced in the last decade an abrupt exacerbation of the issues of social inclusion (social integration).*

*Most of the East-European countries and specifically Romania and Bulgaria are newly intensively confronted with the problem of the disadvantaged populations (marginalised ethnic-groups). The improving of the living conditions and the social inclusion of the most disadvantaged/vulnerable people (Roma, persons with disabilities, children at risk, and victims of domestic violence) are the main targets of a large number of international projects and programmes. The Roma population for example focussed in the last decades intensively the public opinion. The debates on the political level and the concerns of the specialists increased in the last years, and this not only in the countries of origin but also in almost all West-European countries.*

*Despite the impressive amount of support programs, aid projects, activities, initiatives, actions on the national, regional and local level, initiated and implemented with the aid of an impressive logistics and financing, the social inclusion of the vulnerable groups remain one of the unsolved problems of modern Europe. In most of the cases the results of such projects remained less relevant and the impact (the gap) between the profoundly different and not compatible cultures also remained significant.*

**Key-words:** social inclusion, care work in social informal areas (social spaces)

Visionary the inclusion can be defined as a socially inclusive society, a society in which all people feel valued and have the opportunity to fully participate in the life of the

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community.

Achieving this vision means that all people will have the resources, opportunities and capability to:

- **Learn** by participating in education and training;
- **Work** by participating in employment, in voluntary work and in family and caring;
- **Engage** by connecting with people and using the resources of the communities; and
- **Have a voice** so that they can influence decisions that affect them<sup>i</sup>.

On the contrary, the social exclusion has multiple impacts. In most cases it is related with a combination of linked problems – unemployment, poor skills, low incomes, poor housing, bad health, family breakdown and characterised by the inter-relatedness of problems that are mutually reinforcing. They create a fast moving, complex and vicious cycle<sup>ii</sup>.

### **The challenge of temporary migration. “Those who remain” – excluded groups?**

The labour force has intensively migrated in the last three decades. The exact migration-routes are difficult to follow, but the axis from East to West is predominating. There are also controversial data about the real dimensions of the migration in each East-European country. The modern migration is mostly only a temporary one and represents anyway a phenomenon that still has to be intensively investigated.

In the case of Romania and Bulgaria for instance some family members (one or in many cases even both parents) leave their country of origin in order to work in some other areas within the European Union. Only the children and the grandparents remain at home. The grandparents are supposed to play a role that overstrains them (exceeds their capacities and competencies). As some recent studies published in Romania indicate, the phenomenon in some areas (the North-East region of Romania for example) is an overall one and the resulting problems regarding the school performance and the social integration of the children became extremely acute. The extension of the temporary migration initially surprised the responsible authorities. An important role in the impact of the phenomenon also played the lack of appropriate responsible bodies, organisations and associations directly responsible and having the necessary logistics and competencies. The schools and the local child care authorities still cannot deal properly with the problem of the “remaining children”, partly because of the dimensions of the so-called collateral effects (regarding schooling, level of participating in the community life, etc.) and partly because of a certain tendency to avoid taking responsibility for a category of population having de facto better financial possibilities as some other categories of population.

Assisting the families at home represents a solution, but the system is costly and the necessary infrastructure simply does not exist or is not functional enough.

The children having their parents “at work abroad” are also in numerous cases confronted with specific social disadvantages and exclusion. Strongly associated with social and educational disadvantage<sup>iii</sup> proliferate between adolescents and young people conduct disorders (considered as „a persistent and pervasive pattern of antisocial behaviour in childhood or adolescence“<sup>iv</sup>).

Antisocial behaviour in childhood can be considered as a major predictor of how much a person will cost society. The cost is large and falls on many agencies, yet few agencies contribute to prevention, which could be cost effective. Antisocial behaviour in childhood can also often lead to lifelong social exclusion<sup>v</sup>.

Temporary migration or simply temporary “re-location”?

The temporary migration is more and more “tolerated” in Western Europe. Each year a large number of people are simply “relocated” and this only for a definite period of time. Despite the political discussions, the underpaid labour force continues to move from country to country, benefiting of professional aid (labour-force agencies, other informal structures operating at international scale).

The high rate of migration in some countries like Romania and Bulgaria is not only an economical problem but also a social one. For instance less than 40 % of employers in these countries would recruit people from vulnerable groups (Roma). Many young people deterred at their turn from applying, especially because of fear of unfair treatment.

In most of the cases the temporary migration cannot be turned into a “permanent migration” because of the restrictive legislation in many of the destination-countries and because of the fluctuations of the labour market.

There are not really coherent efforts to integrate (to include) this labour force, respectively the short-term migrators into the local community. In most of the cases the momentary hired workers are less accepted in the local communities, are in fact isolated and they also do not show very much interest to integrate themselves. They show diminished interest and not much of genuine desire to be in interrelation with a society living on other bases and having for its own communities a differently structured system of rules.

The many and sometimes ingenious ways to avoid such customs, rules, laws, regulations and behavioural models are in most of the cases well known. The changing of the own identity for instance means anyway to remain in fact well integrated in the group of origin. Most of the proposals, projects and implemented programmes have to deal with social groups rejecting the values and local offers of the “destination areas”.

The Roma population developed in the last decades their own “migration itineraries” (routes) and “migration connections” all over Europe.

They also developed their own organisational structures, supporting nets and hierarchies.

### **New social spaces. Rediscovering the ghettos**

There was constantly reported in the mass-media that the “grouping” of Roma people and other categories of population generates new “social areas” (social spaces) in different areas of Europe, mostly in the urban agglomerations. In some big cities for instance appeared rapidly streets and neighbourhoods populated with “temporary migratory population”, acting and living according to their own unwritten rules. The reports are numerous and the phenomenon seems to constantly increase and to aggravate the already existing social problems in these urban areas.

As a matter of fact we are confronted with parallel systems, not compatible but forced to act, to operate together.

In some cases, this form of grouping can dilute the local cultures and traditions and deny context specific realities.

Insecurity and fear of some individuals of an unknown future and instability can result in a forced assimilation into a dominant group, group that takes more and more control and imposes a system of unconditioned submission of each member.

This way of ghettoization has become a strong relevant phenomenon in Europe in the last decades. As intensity and dimensions it can be compared to the similar development of the urban agglomerations in the third and the fourth decades of the 20<sup>th</sup> century in America. "Isolation is common to almost every vocational, religious or cultural group of a large city. Each group develops its own sentiments, attitudes, codes, even its own words, which are at best only partially intelligible to others."<sup>vi</sup>

The new ghettoization is in many ways simply a consequence of the desire not to participate, almost a conscious self-exclusion and adherence (inclusion) only to a smaller informal peer-group.

### **New social areas. Rural ghettos**

Driving through some villages in Romania and in Bulgaria might be in many ways an interesting experience. The most surprising is simply a part of the new rural architecture. Some extremely big houses, richly decorated with small towers, balconies or porches and verandas, with ornamented windows and over-dimensioned doors. A new "architectural style" has been born. It is a mixture of oriental, European and stylised "folklore" architectural elements. In a way it indicates a tendency of a part of the "migratory population" to settle but also represents a constant tendency of establishing a new type of rural ghettos.

The dilemma consists in trying to include a population that is moving most of the time and has also no intension to change this relatively profitable way of living.

A latent conflict develops almost inevitably between the residents, evidently with less material possibilities and the "intruders", respectively the new inhabitants.

The previously acquired professional social-care knowhow does not always seem to be able to find the appropriate ways to deal with the phenomenon of the temporary migration.

In the last years the problem has been increasingly discussed in terms of "social inclusion" or "social exclusion"<sup>vii</sup> and not "integration". Exclusion defines contemporary forms of social disadvantage and refers to processes in which individuals or entire communities of people are systematically blocked off rights, opportunities or resources. It is also interesting to notice that there has been more written about "social exclusion" than about "social inclusion".

### **"Our life, our care, our say"**

Inclusion programmes in social areas (informal life spaces).

*"The places with which people are already familiar – the school gate, their place of worship or their local newsagent or post office – hold the key to engaging them in governance activity. These places and the organisations that occupy them act as the everyday bridge between ordinary people and more formal governance activities".<sup>viii</sup>*

Combating social inequality and exclusion of the children and adolescents can be more efficiently done by direct interventions in predetermined social informal spaces and by using the existing human and material resources, potentials, respectively integration, education and other kind of structures with core elements like low\_threshold, integration, education (schooling) and direct interventions (programmes) in "areas-at-risk" (neighbourhoods in the city, some rural areas).

The good-practice models and approaches are based mostly on the following principles:

- **Practical orientation** instead of theoretical concepts. Direct confrontation with the specific practical aspects (“social realities” of each area). Development and improvement of projects ideas which are already available through experience and resources.
- **Quality orientation.** Learning through positive experience of other projects and the permanent review of its own effectiveness.
- **Linking practice and research.** Transfer of professional knowhow between child care research and care promoting practice<sup>ix</sup>.

The most successfully implemented strategies in the care work oriented towards informal social areas take into consideration following aspects:

- participation
- networking and personal contacts
- conferences and other forms of exchanging professional knowhow on the intra- and inter-institutional level
- adequate communication and confidence
- acceptance
- recognised und also informal established rules and limits
- non-formal education
- axiology, mentality, resources of the community

An evaluation of the socio-spatially oriented child and youth inclusion programmes based on relevant survey results<sup>x</sup>, revealed that the inclusion programmes (projects) are maximum efficient in following key-areas (key-issues):

- care, help and support provided by specialised institutions and organisations
- creating participation opportunities for disadvantaged children coming from vulnerable populations
- delivery of training courses
- reduction of prejudice
- strengthening of self-confidence
- improving the social climate
- Identification with the district and the values developed and promoted inside informal groups and certain social areas.

### **Social cartography and the evaluation of the social inclusion.**

Social cartography has lately become an imperious necessity. To develop coherent social policies and programmes and to successfully face the challenge of including Roma and other categories of vulnerable population, especially in the context of globalisation, of cultural changes and of strong and irreversible axiological restructurings of the fundamental values and life-goals, there is also needed a new evaluation policy and a new understanding of the existing social trends and movements. And this can no longer be only empirically achieved.

Almost all the politicians, social workers, representatives of different NGOs, others organisations and associations, schools we contacted strongly expressed the meaning that they know the real situation of the areas they work in, but admitted that the empirical knowledge is not always enough and suitably relevant.

They also revealed the fact that the specialists and the authorities in charge have not succeeded to properly map the areas-at-risk and to plot in an adequate way the vulnerable groups and their characteristics. Under these circumstances some of the decisions that have to be taken in order to implement or to run programmes and actions are entirely based on subjective perceptions and on empirical know-hows, mostly disseminated by mass media. More objective data and comparative studies were desirable and doubtlessly advantageous, especially for the specialists and the practitioners working in the field and being directly confronted with the implementation of different inclusion projects and programmes. The empirical methods still predominate in evaluating the social inclusion. The descriptive methods are mostly preferred because of the complexity of the numerous qualitative aspects which have to be taken into consideration and of the difficulties of converting them into standardised quotients. We can talk at the time being about a really “inflation” of different types of reports (sociological, psychological, medical, development reports, school reports, etc.) and procedures of qualitative analyses (like for instance charts, behavioural and personality inventories, socio-surveys). Despite of the efforts on regional and national levels to elaborate some standards and standardized methods and procedures, the practitioners have to face an “avalanche” of heterogeneous documents that have to be meticulously fulfilled.

#### **Inclusion Evaluation Scale (IkES)**

Inclusion Evaluation Scale (IkES) was developed in order to facilitate an objective evaluation of the degree of social inclusion of a person in its social proximate environment (social informal area, social space). Original software has also been developed in order to support a very quick final interpretation of the data and to plot an “easy-to-read” evaluation graph.

#### **Characteristics**

a. The Scale is based on a multiple-choice questionnaire containing 80 different evaluation items (“questions”), designated to analyse and to quantify (to evaluate objectively through a standardised scoring system) the position achieved from a person inside its “immediate social environment” (in a community, in different peer-groups, etc.).

b. The questionnaires (IkES Items Inventory) are structured in a way that allows including in a comprehensive final evaluation almost every relevant information about a person, independently from sources, for instance:

(a) direct answers of the interviewed persons (opened-answer questions) or

(b) all previously accumulated data and all kind of heterogeneous preceding information, delivered from different sources (social workers, medical, psychological and social reports, school evaluations, etc.), and this independently from their structure and form

c. The data are graphically presented in the Inclusion Evaluation Charts (IkES Charts). These socio-diagrams (see Diagram) are easy to be “read” and the delivered information is objective, presented in an accessible form.

The items are structured considering eight components of the immediate social environment:

1. Family (including the large family and relatives not living together with the family)
2. Neighbourhood (peer informal groups, other social contacts and nets)
3. Services (health and care services acting in the social area)

4. Leisure 1 (belonging to a club - sport, dance, concerts)
5. Leisure 2 (arts and culture)
6. Education (schooling, different forms of vocational training and professional training or qualifications on-the-job, other forms of permanent learning)
7. Employment (social acceptance and inclusion at work)
8. Volunteering (NGOs activities and programs, for instance)

d. There was also developed a specific software, that permits the simultaneous analysis of the existing IkES Charts belonging to different people (which can be selected according to multiple criteria) and the creation of social maps, respectively the social cartography of groups of population, determined with the help of target oriented selection criteria.

This makes possible an ad-hoc targeted mapping of small social groups, for instance as a result of a social inquiry or of a collateral investigation (similar to some market investigations – SINUS behavioural patterns for example).

The items of the evaluation scale refer to eight principal components of the social life of an investigated person. For each of these considered components there are allocated ten items (called inclusion indicators). The complete set contains:

- (a) a “list of items” – basically an inventory of direct questions (open questions) to lead an interview and
- (b) a “Glossary” containing a description of each item and its sub-components, practically a description of the way certain behaviours, attitudes, reactions or episodes of the personal history could be understood and interpreted according to the main component items of the inventory .

The software can establish, based on the analysis of several questionnaires and criteria of selection determined by the coordinating specialist, a complex social map. This kind of social cartography was less implemented, despite of the fact that such an investigation can be extremely useful to social workers, social-pedagogues, pedagogues, psychologists and therapists and also to care institutions and NGOs working with relatively small groups of vulnerable people living in small areas (rural and urban “ghettos” for instance).

### **Conclusions**

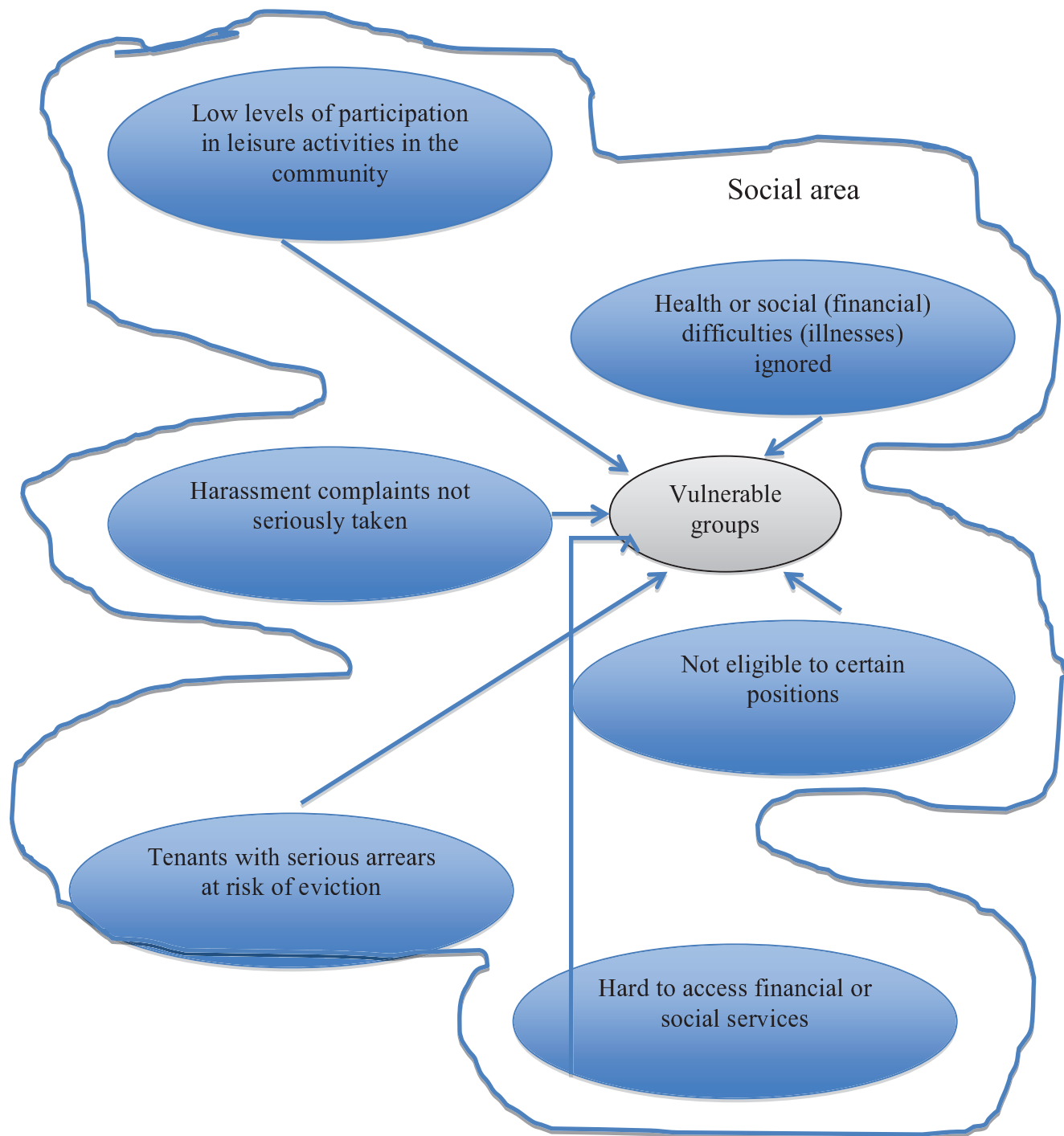
A real inclusion of vulnerable groups is possible only in a certain political context. Some needed policies:

- Provider pluralism, community governance
- Local or government legislation; local area agreements and sustainable communities
- Focussing on health and wellbeing specific problems at the local and regional level
- Individual budgets and self-directed care

Organisational routines, prejudgments and know-how barriers prevent effective service organisation. Many agencies are simply not aware that the non-inclusion during childhood leads to high costs for them. Among agencies working with children (health, education, social services, and voluntary agencies) none is primarily responsible for social inclusion and only a few consistently use evidence based interventions.

The intergovernmental cooperation and the “working together” between different national and international agencies, organisations and formal and informal bodies contributing to the inclusion of varied “populations at risk” function only sporadic and not entirely based on coherent macro, regional and local strategies.

**Different ways of exclusion<sup>6</sup>**

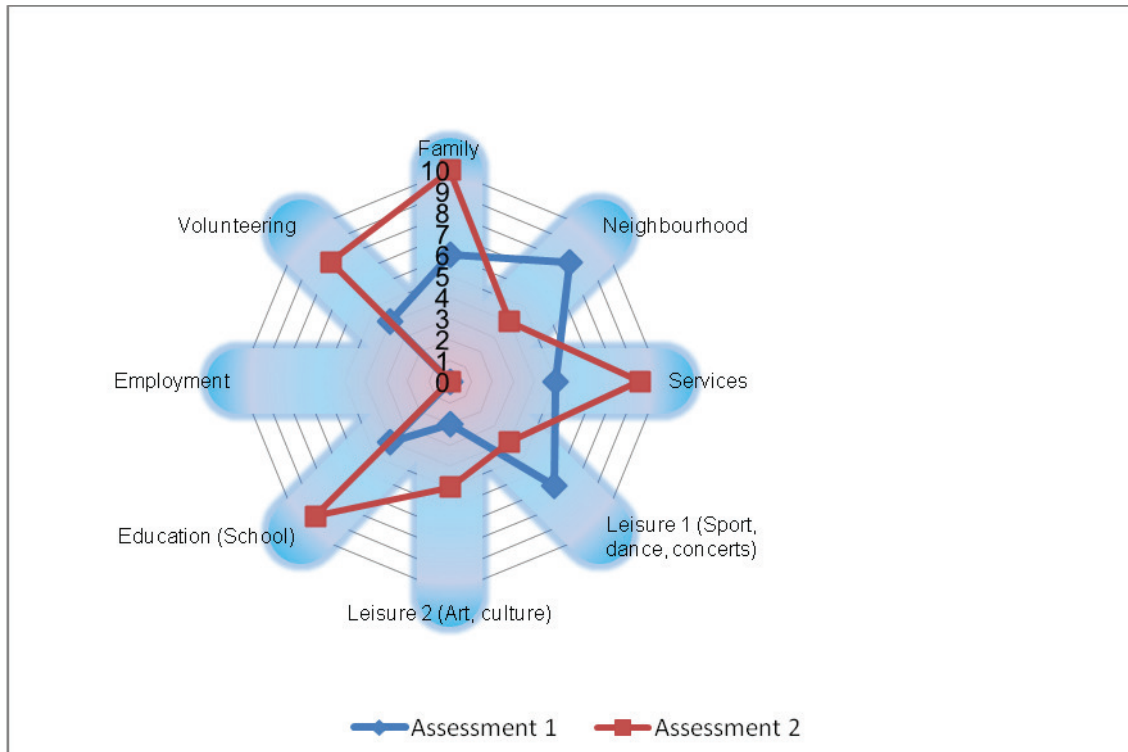


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<sup>6</sup> after Morris, D., - National Social Inclusion Programme, SCIE/NSIP Mental Health Social Care Leadership Symposium, p. 8



### Inclusion Evaluation Scale (IkES) – Assessment chart



It is more efficient to build the capacity of target groups and disadvantaged communities and to let them play a more important role in the development of strategies that will create real and effective changes in the quality of their lives and the opportunities available to them.

Typical actions and programmes might include development work with vulnerable (target) groups in order to build their capacity and organisational structure, © *DraKa* : work with the most marginalised groups, promotion of community participation in partnerships with other local development structures, needs-assessment training and supports for small-scale improvements to the local environment and to community facilities.

An important component of the inclusion refers to the community based youth initiatives, especially those targeted to complement and add value to mainstream educational provision for youths whose needs are not adequately fulfilled within mainstream education or who require additional supports.

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