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Editorial

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Editorial

This issue of the Journal is based to a large extent on a selection of invited papers from the European Research Institute for Social Work conference organised and hosted by Trnava University, Slovakia, on the theme of Children in Social Work in autumn 2019. From amongst a collection of excellent presentations, a number of presenters were invited to submit manuscripts, which were then subject to our usual selection procedure where our reviewers and editors ascertained the submissions which have rigour, and provide the most useful knowledge for social work students, social work academics, social workers, and policymakers. In addition, they are the ones which we believe best meet the Journal's aim to source and publish original research and theoretical papers which enhance social work knowledge and practice, within its mission

- to tackle the problems of people´s lives through social work
- to support the quality of social work and the professionalisation of social work practice
- to contribute to the development of social work as a science to the improvement of the education in social work, and
- to support the interests of the social services providers and users.

We believe that the articles in this edition do indeed support the development of social work capacity and knowledge in these ways.
The International Federation of Social Workers and IASSW Global Definition of the Social Work Profession https://www.ifsw.org/what-is-social-work/global-definition-of-social-work/ sets out how
"*Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work.*

Underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing". We also hope that the articles in this issue demonstrate these aims and values well.
Authors from a number of countries across Europe and beyond have presented their work here.
2 of these relate to people with disabilities. *Parents Subjectivity in a Family with Disabled Children and Choice of Education Model* by Valeria Sizikova and Olga Anikeeva is based on the author's study of parental views in families where they have a child who is disabled, examining the parents' awareness of their role in raising their child and their choice of a behavioural model in so doing. The article presents the findings of this work concerning parent`s self-esteem, their preparedness to fulfil parental responsibilities in raising a child with disabilities and identifies patterns of parent behaviour in the disabled child's development process. The research used semi-structured in-depth interviews as well as an expert survey of specialists and managers of organizations providing social and pedagogical support. The article contends that identifying these assessments and models of parental behaviours are important components for further developing the formulation of professional support for such parents, and the formation of meaningful social partnerships between the family and professionals.
The second one on this theme authored by Beata Balogova and Leon Szot, *Selected Socio-Cultural Aspects of Disability in the Arab World – Sociological Approach*. The article undertakes an analysis of research and theoretical approaches towards people with disabilities in the Arab region, with particular reference to socio-cultural aspects, exploring the nature of 'disability' concepts and notions in the Arab region. The article presents the results

of quantitative research which used statistical indicators of relevant institutions with subsequent comparison between them. The authors examine issues related to employment, education and the social protection of people with disabilities in the Arab region. The article demonstrates how the research highlighted the differences in approaches to people with disabilities, and in particular the lack of social interventions. The authors deal with important issues   such as social diversity and social stigmatization, which are seen as the greatest threat to   positive social worker interventions. The article recommends greater focus on the potential value of the role of social work in exploring and developing ideas and practices about the issue of disability in the Arab world with regard to social policy and specific welfare state interventions,   which it is argued remains only on a declarative level, without their practical application.

A further two articles relate to issues of how social work might relate to housing.

One of these is the article on *Preparing Young People for Leaving Children's Homes* by Petra Anna-Marie Blahová, which sets out to understand the place of   social work interventions when young people are being prepared to leave children's residential units. Based upon theoretical ideas of participatory social work, methods used included a situational analysis of the data, presenting ontological and epistemological foundations, and the use of tools to examine reality. As well as setting out the aims and processes used to prepare young people for such transfer, the limitations of direct social work in the institution is examined. The article makes the recommendation that in order to adequately support young people in preparation for leaving institutions   social workers need to be involved more in this work in   residential units for children, not only indirectly but also directly, while preparing young people for leaving.   Importantly, the article recommends that the explicit participation of young people themselves should also be a source of support during their preparation for leaving.

The second article, by Soňa Vávrová and Alice Gojová in this vein, concerns itself with families with children who are in a homeless situation. *Emerging Models of Social Work Accompanying Housing, or How Czech Social Workers Treat Homelessness in Families with Children, while Having No Legal Support* sets out to describe emerging social work models accompanying housing that are implemented in work with families, including where those families are at risk, and where the children may be at risk. In so doing, it examines Czech social work support for such families and children by the use of two approaches to reintegration of people without a home, Housing Ready and Housing First. The work made use of situational analysis, and used qualitative data analysed from interviews with 29 social workers. It found that 5 dominant identifiable social work models were in use: the protective model; promoting autonomy; and the model based on the extent into which the social worker accepts the demands of the client and the environment. 2 further   models were specialising in competence in housing, and the comprehensive model. The article discusses how such recognition and exposition of Czech social work models in relation to family housing can be of value in formulating plans with regard to the needs and difficulties of at-risk families with children.

The article *Early Care in the Context of the Czech and Foreign Retrospective and its Current Situation: The Particular Statistics in the Pardubice Region* by Zdenka Šándorová and Jaroslav Myslivec sets out to answer the question as to whether early care as a social prevention service is effective and justifiable in the social service system. Drawing on the theoretical background of the process of transformation and consolidation of childcare for children at risk in the Czech Republic, it provides an account of current early care systems in the Czech Republic, but also with implications further afield.   The authors analyse key literature and documents before setting out their longitudinal research- not so common in social work research- used to collect statistical data from the existing records of an early care provider. This enabled the

authors to evaluate legitimacy and effectiveness of the service provided to a very vulnerable target group, i.e. those families with a young child with health impairment that limits opportunities to socialize. It then sets out how the findings can be used to inform social policy, with recommendations on how such early care can help meet families' needs by supporting the psychological, social and somatic development of children.

Social work role in the use of family mediation is the focus of the article *The Place of Family Mediation as a Form of Support and Protection of Children's Rights in Social Assistance Activities,* authored by Joanna Rajewska de Meze. It sets out the potential importance of mediation as a form of conflict resolution as a tool for social workers where they are working with divorcing parents, and how this can affect the need to protect children's interests, and how to attempt to stabilise child's situation. It does this by examining the extant literature, statistical evidence, and relevant research. In basing the work in Poland, it sets out how its institutional social assistance offering clients a free-of-charge mediation proceedings. It emphasises the interpersonal dimension of mediation as important for community social work, and the skills social workers can bring to such work.

Veronika Mia Zegzulková and Marie Špiláčková's article on *Reflection of the Impacts of the Society Transformation in Relation to Education in Social Work* reflects on the impact of current trends in societal transformation and its relationship with the education of social workers, by examining the second stage of modernisation within neoliberalism. The article analyses this from a critical theory perspective, dealing with the impacts of such societal transformation that has changed not only the content of education of social workers and social work as a profession (as found in the examples of Great Britain and Scandinavia) with results suggesting new ideas and challenges for expert discourse regarding the topic of education at the national and international social work levels.

On the related theme of new formulations of social work in different countries, *Empowering Community Work in Elastic-Reflexive Transformation – A Nordic Perspective from Sweden* by Päivi Turunen highlights community work within the transformation of professional social work in the Nordic context, with the background of the neoliberal transition of the welfare state in Sweden. The article describes, analyses and compares 2 case studies from Sweden for community work in a suburb, consisting of a municipal offering as well as an association-based community project, are described, analysed and compared, using perspectives of empowerment and community work from socio-spatial perspectives in local communities. The research examined relevant documents and webpages, and made use of interviews, field visits and observations, with a follow-up survey. The ways in which community work has been transformed and has almost disappeared from professional social work in Sweden since the 1970s, with it becoming less political, structural or collectively challenging of the status quo. The argument is put for the need to develop community work and associated empirical research within professional social work in order to empower communities, paying more attention to changes in the everyday lives of people in marginalised urban and rural housing areas.

The book review of Laura Béres and Jan Fook's edited book *Learning Critical Reflection: Experiences of the Transformative Learning Process* by John Paul Anastasiadis sets out how the book offers insights for an important area of social work practice, i.e. exploring critically reflective practice and the process of learning to be critically reflective. The value of exploring the emotional and cognitive experiences which can take place for learners in becoming more critically reflective is discussed.

We hope that you enjoy them and find them valuable in your learning for social work as much as we did as editors.

Dr Karen Mills and *Prof Brian Littlechild,*
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Parents Subjectivity in a Family with Disabled Children and Choice of Education Model

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Abstract

OBJECTIVES: The article is based on the authors' study of parental views in a family with a disabled child, the study of the parent`s subjectivity (awareness of their role in raising a child) and their choice of a behavioural model in the upbringing process. THEORETICAL BASE: Includes concepts of social views (Moscovici, 1973; 2000), subjectivity of individual personality (Leontyev, 1975), the concept of social design based on social perceptions (Lahlou, 2015), and the social concept of disability, socialization, and social adaptation of a child with disabilities. OUTCOMES: The research studies parent`s self-esteem, gives an assessment of their readiness to fulfil parental responsibilities in raising a disabled child, and identifies patterns of parent behaviour in the child raising process. METHODS: the study used a pilot questionnaire (n56), a semi-structured in-depth interview method (n12), an expert survey of specialists and leaders of social organizations providing social and pedagogical support (n12), as well as modelling method. SOCIAL WORK IMPLICATIONS: The identified assessments and models of parental behaviours are important components for further developing the formation of professional support views and programmes, the support for changing problematic parental approaches and shortcomings, and the formation of meaningful social partnership between the family with a disabled child and specialists who provide professional assistance.

Keywords

disabled child, family with a disabled child, parenthood, parents' subjectivity, parenting models, patterns of behaviour, parenting process, professional social assistance

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INTRODUCTION

According to the World Health Organization, the proportion of world citizens with disabilities is 15% (World Report on Disability, 2011:8). This is a 5% increase compared to 1970. In absolute numbers, it is about 1 billion people, including 95 million children aged 0 to 14 years old, where 13 million disabled children (13.7%) suffer from severe forms of various disorders, and as a result have significant limitations in their lives. This percentage is also observed in several specific countries, where the proportion of people with disabilities in the population is about 12–15%, and continues to grow.

In the past, medical care and medical rehabilitation were offered as solutions to the medical concept of disability. Today we understand that this is not just about medicine. The idea is to help people with disabilities become equal members of society, as much as possible. This is a transition to the social concept of disability in its inclusive and socially acceptable form. It requires the adaptation of our environment to the life of people with disabilities. An accessible environment is provided in almost all developed countries: transportation, equipment on premises, and public buildings. This side of the problem is reflected in international documents and in government documents of certain countries,[3] and in reviewing scientific works (Romanov, Yarskaya-Smirnova, 2006; World Report on Disability, 2011).

But much more important is the social readiness to accept persons with disabilities as equal members of society. Professor Stephen W. Hawking wrote in the preface to the book World Report on Disability: *"In fact we have a moral duty to remove the barriers to participation, and to invest sufficient funding and expertise to unlock the vast potential of people with disabilities"* (World Report on Disability, 2011:IX).

Many experts in this field face a two-sided task: they need to teach people (self-organization people) how to communicate and interact with people with disabilities. But disabled people also should get an education in such communication and interactions. We need to go towards each other. This path is complex and contradictory. It starts with the family.

A family with a disabled child in addition to routine tasks, such as household chores, education, and sociocultural functions, also conducts certain tasks of behavioural al development, a compensatory function and social rehabilitation. All of them are aimed at restoring the child's psychophysical and social status, at achieving material independence and social adaptation (Kamyshova et al., 2013). Adults become the main educational tool in the family (Savinov, 2018). An example of parents, their way of thinking, values, model of behaviour, life routine, family relationship style, all becomes an object of imitation for the child with any condition. If parents underestimate these factors, then no single suggestions will replace it. Such mechanisms operate in any family (Bird, 2016).

But a family with a disabled child requires special knowledge and skills related to the special condition of the child. Parents can be considered to be successful in raising their children only when they have a firm knowledge of what they are achieving, and what social and pedagogical tasks they set for themselves.

This is the reason that the authors chose the research problem: the willingness of parents to raise a disabled child. The problem is conceptualized through the notion of «parent's subjectivity», which is formed by the parents after the birth of a child with disabilities in the family. Basic concepts used in the research and writing process:

«Parenting» in scientific literature is understood as biological and social ties between spouses and children, including the birth and upbringing of a child, which provide that he or she is involved in the cultural, spiritual, and moral values of society. The "subjectivity of the parent" is the awareness of the intricacies related to specific tasks facing him/her and the self-assessment of willingness to perform the role of the parent of a child with disabilities. The authors assume that a high level of

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[3] In Russia, such a state document is the State Programme of the Russian Federation "Accessible Environment" for 2011–2020 (available from: https://rosmintrud.ru/ministry/programms/3/0).

subjectivity is the decisive condition for the successful adaptation of a child with disabilities and their inclusion in society. This idea is designed on the basis of the concepts of "the subjectivity of the personality" (awareness and personality traits of their identity, activities related to livelihood based on accumulated experience, achievement of personally established goals, values and formation of the image of the outside world) and "parental competence" (objective indicators of opportunities, skills and knowledge of parents of a disabled child necessary in the process of raising a child).

"Parenting" is understood in scientific literature as the process of purposeful and systematic impact on a person, on his/her physical and spiritual development in order to prepare him for adaptation in society, for the implementation of different types of life.

Parenting is a system of upbringing and education developed in the conditions or values of a family by parents and relatives. In today's environment, this implies a certain level of parental competence.

In addition, the concept of "infrastructure of family values and education" should be introduced, which includes the possibility of seeking assistance from social teachers and social workers, speech pathologist/therapist and other specialists. The infrastructure of family values and education also includes contacts with teachers in schools where children with disabilities are enrolled. A focus on family education infrastructure is necessary to address the problem chosen for the study. The subjectivity of parents implies self-evaluation of their ability to perform the role of the parent of a special child in cooperation with all specialists whose assistance is necessary for the child.

The purpose of the article was to assess the model of parental behaviour in the upbringing of children with disabilities, based on the assessment of the subjectivity of the parent. By the model of behaviour in the process of upbringing, authors mean a structured set of types of actions of parents, based on understanding of their abilities, goals and expected results of the upbringing of children with disabilities. The model of education can be formed both consciously and spontaneously, under the influence of different circumstances.

STUDYING THE BASIC PROBLEMS OF PARENTS RAISING DISABLED CHILDREN IN MODERN LITERATURE

The problems of families raising children with disabilities are very diverse. Of course, some of these problems are country-specific, they depend on state resources, the peculiarities of the socio-economic status of families as well as family specific challenge. But there are also striking similarities in approaches to solving family problems and supporting technologies. In this regard, the conclusion of Katherine Bird (2016) is interesting. The author writes: *"However, in presenting the Troubled Families Programme in the UK and Sozialpädagogische Familienhilfe in Germany the article aims to highlight the extensive similarities in social work practice. In the same way as theories and practice of social work are increasingly crossing borders, changes in the composition of families are also a growing challenge to social work in many countries"* (Bird, 2016:79).

The authors consider each of the identified problems in both Russian and foreign literature.

The problems of parents' awareness of their issues in raising children with disabilities have been studied with varying degrees of intensity since the late 20th century. In European and American literature, interest peaked in the 1980s and 2000s. Researchers noted the stress states and anxiety of parents at the birth of a child with disabilities (Minnes, 1988; Emerson 2003), the negative impact of the stress situation in the family (Simmerman, Blacher, Baker, 2001; Hastings, Brown, 2002). In the last decade, according to the authors, interest has been somewhat diminished (Dervishaliaj, 2013). A possible reason is the growing mistrust in family education and the growing preference of professional participation in the education process (Polivanova et al., 2015).

A family with a disabled child has a special psychological burden. This is a problem of mutual understanding and psychological comfort in the family. The parental like-mindedness is never

absolute. But the basic views of the parents in raising a disabled child in the family must be agreed upon. Interaction in the family has been the subject of study in the scientific works of Ryan and Stiller (1991); Bradsha, Hoelscher, Richardson (2007); Kulik (2013); Fedoseeva (2013b); Dautova and Dikhanbaeva (2018).

One of the special problems of the family with disabled children is parents' awareness of the nature of their child's disability; how exactly a certain type of developmental disabilities, feature of disability is manifested not only medically, but also socially and psychologically, in particulars of the child's attention, memory, speech, communications and methods of interpersonal interaction. Ignorance of these foundations greatly impedes the functioning of the family and the education of the child. It is equally important to know what the child's rehabilitation potential is for various types of developmental disabilities: what can be changed, improved with the proper help of specialists and parental support.

The problems faced by parents in each family with disabled children are vastly different. One level of problems is financial. Bradsha, Hoelscher and Richardson (2007) examined the situation of children and youth relative to families' financial situation. It was noted that such statistics were not available, therefore, identifying the neediest families to provide them with effective help is exceedingly difficult. The plight of children with disabilities in financially disadvantaged families and the consequences of this situation are also noted by Cousins (2013). Russian researchers also emphasized that the financial difficulties in families with children with disabilities is worse than the regional average (Romanov, Yarskaya-Smirnova, 2006; Butrina, 2014).

The limited budget in a family with a disabled child is often related to the fact that mothers, who bear the brunt of raising a "special child", cannot work in their profession and earn enough funds for treatment and rehabilitation of the child, not to mention for the support of the family. According to statistics and practical experience of Russian families, fathers are much more likely to leave a family with a disabled child than in a 'normal' situation. The family becomes incomplete, in this case and more likely to completely dependend on the available resources provided by the state. Russian families with children with disabilities are extremely vulnerable: about 70% are single-parent maternal families (Baimasheva, 2009:3–4). The practice of social work and social assistance will then be a system of material and financial assistance.

Another problem in the Russian literature is the social inequality of people with disabilities and its implication at different levels of social interactions. This problem is analysed by Korzhuk (2016); Dombrovskaya (2011); Duncan, Brooks-Gunn (2000).

There are a special range of problems for parents and specialists of social rehabilitation and social pedagogy. Interaction accompanying such families is studied quite extensively in the literature (Savelyeva, Zhimaeva, Bobodjonova, 2015; Divoká, 2017; Jarkiewicz, 2017). The interactions of parents and teachers at school are analysed by Ryan and Stiller (1991), where they are attracted to the problem of the context of teaching and upbringing. A study by Jarkiewicz (2017) focuses on inclusion and exclusion in the educational process. Although this latter study does not deal directly with children with disabilities, this problem is extremely significant for them.

One of the most important aspects of raising a child with a disability is understanding the prospects for her/his development (Ryan, Stiller, 1991; Kulik, 2013).

In this regard, only a well-trained professional can help the family. Problems of professional training for working with the disabled child family are studied by Divoká (2017); Kozlovskaya, Sizikova, Anikeeva, et al. (2018); Sizikova, Anikeeva, Shimanovsakaya (2018); Jarkiewcz (2019); Zhimaeva (2013).

A general overview of the problems of the family raising a disabled child is given in the works of Fedoseeva (2013a; 2013b). The author claims that only 22% of mental disabilities appear at an early age as a result of a birth defect, the remaining 78% result from unfavourable conditions of family education (Fedoseyeva, 2013a:346). This marks the importance of an adequate educational atmosphere in the family.

The willingness of parents to fulfil their responsibilities in family education plays a decisive role. Various aspects of this problem are analysed by Dombrovskaya (2011), Zhimaeva (2013).

Very great interest in Russian literature is also shown in the practical experience of social rehabilitation of children with disabilities in foreign countries (Chaldayeva, Nigmatyanova, 2010). However, there is little scientific research into the subjectivity of parents, the strategies and tactics of families raising a disabled child. And without analysis of this problem, the technologies used in professional social work for the social rehabilitation of a disabled child cannot be sufficiently effective. And without analysing this problem, it is difficult to develop and implement effective technologies that are used in professional social work with a disabled child and his/her family.

METHODS AND METHODOLOGY

The researchers methodologically relied on the concept of social construction by Peter Berger and Thomas Luckman (1966). According to this concept, the reality surrounding us is reproduced by people in the process of life and reproduction of knowledge about this reality, the formulation and awareness of its values and structural elements. This knowledge, transformed into one or another model of everyday life behaviour, is passed from generation to generation. Thus, to understand the processes of socialization of a child in a family, one should study the personal processes of meaning, knowledge and experience of their parents in a social context.

Very close to this interpretation of the reproduction of cultural and social life is the concept of social representations of Moscovici (1973; 2000). Social representations, this author writes, are *"a system of values, ideas and practices with a dual function, firstly, to establish an order that would allow individuals to navigate and subordinate to the social and material world; secondly, to make communication possible among group members, providing them with a code for social exchange and a code in order to name and classify in a certain way various aspects of their world, their individual and group history"* (Moscovici, 1973:xiii).

The third basic concept is the concept of personality subjectivity, which was formulated by the Russian scientist Leontiev (1975). He believed that the activity position of the person is based on the desire and ability of the person to transform reality, overcome its negative traits and create new, necessary and useful strategies for human life. Subjectivity implies awareness of oneself as a person, their role in the upcoming transformation, conscious goal setting, and forming wilful behaviour in achieving the goals.

These concepts were developed mainly in the second half of the 20th century but have not lost their relevance. Combining the various aspects of parental subjectivity together will help the concept of social construction based on social notions (Lahlou, 2015).

The article was prepared based on a preliminary pilot study. Methods of applied research are dictated by the object of study (the subjectivity of parents raising a disabled child, their self-awareness and self-esteem and abilities for such activities) and the subject of research (models of parental behaviour and the choice of approaches to raising a child). They used an in-depth semi-structured interview, an expert survey, as well as developed a line of questions.

The main one was the traditional method of questionnaire. Questionnaires are a recognized method of scientific investigation of behaviour and its motivation. The survey covered 56 respondents, including 49 women and 7 men living in a metropolitan area, in Moscow and the Moscow district. Questionnaires were filled out by respondents themselves during their reception from specialists. Considering the nature of the study, as well as the peculiarities of the said group, the authors included 25 closed questions in the questionnaire. Additional method was in depth   semi-standardized interviews of 12 families from the survey respondents to clarify self-assessments and justify the choice of motivation of behaviour in the process of raising a disabled child.

The structured part of the questions concerned a general assessment of the willingness to help a child and the degree of parents' participation in social rehabilitation, in assessing the assistance

of specialists and their level of knowledge in the field of social rehabilitation. Informal questions concerned the degree of mutual understanding with the child, the nature of relations in the family, with relatives and friends, the degree of involvement of the brothers and sisters of the child in the process of social rehabilitation (if any), as well as his friends of the disabled child (if any).

The third method of the study is an expert survey of specialists who provided social support to families with disabled children and worked with parents who took the questionnaire. The expert survey was attended by specialists in social work, speech pathologist/therapist, speech professor, head of the structural division "Lecoteca" and teachers of the Rehabilitology Centres. The age of specialists is from 25 to 65 years, experience of professional work in the social sphere is from 3 to 35 years, and education level high. All specialists are from among those who work with interviewed families.

The Moscow region, including the city itself and the Moscow district, was elected as a pilot to study the problem, because it is provided, from the point of view of social work, with such families, both in material and technical, and in socio-technological terms. The most qualified specialists are concentrated here and there are great opportunities to attract specialists of various profiles to work. The role of the disabled child's parent assistance is even more significant.

RESULTS

The appearance of a child with a disability in the family, whenever it happens: from the moment of birth, after a serious illness or due to a serious injury, is always a deep shock and a difficult test for all family members.

Psychologists study the primary state of parents first, and foremost this is shock, a feeling of guilt, but sometimes anger, shame, often a sense of hopelessness. There are frequent cases when, faced with such a disaster, the parents of the new-born abandon the child.

The next stage begins when parents try to understand the situation and somehow decide. Some of them courageously accept this battle for life, health and future of their child. Others simply put up with the situation and try to somehow just survive in the circumstances. Still others may even hate a child who brings so much suffering to parents and others. The fourth are rushing between painful pity and the desire to blame everyone for the trouble that has fallen on their heads. The positions are different and contradictory; most of these positions make these families unhappy. And it turns out that the child, instead of receiving effective help, ends up in an extremely unfavourable psychological situation, as s/he grows up, realises that s/he is only a burden for others and even for his/her parents. And this is a tragedy, first, for a disabled child, but also for the whole family.

The survey conducted concerned parents of different age groups: at the age of 23–30 years (young parents) there were 16.1% of respondents; 30-40 years old – 51.8%; 40-50 years old – 19.4%; from 50 to 62 years old – 12.5%. The peculiarity of the capital region is that most parents had vocational education: 39.2% – higher education, 48.2% – secondary vocational education, and only 12.5% had complete secondary education (graduated from high school). Children brought up in the studied families (there were 57 of them: in one family there were 2 disabled children) belonged to the age groups of 2–7 years (49.1%), 7-14 years old – 43.9%; 14-18 years old – 7%. Among the survey respondents, the majority were in a full family – 80.4%, single-parent families – 19.6%. This ratio is not typical for other regions of our country, as indicated above most Russian families with children with disabilities are single parent families.

One of the main questions of the questionnaire was the following: "What problems has/had your child encountered during his development?" In the answers, the parents noted no more than the 3 biggest difficulties, from their point of view. Most parents put speech development problems first (64.3%). In second place were motor dysfunctions (51.2%), in third general condition ("poor appetite, general weakness, constant exacerbation of chronic diseases" – 42.8%).

Table 1: What problems has your child encountered during his development?

Problems	%
Poor speech, lag in speech development	64.3
Movement disorders	51.2
Poor appetite, general weakness, persistent exacerbations of chronic diseases	42.8
Disorders in the emotional-volitional sphere (irritability, moods, tantrums, tearfulness, slowness, lack of assembly)	39.3
Difficulties in communication (isolation, shyness, resentment, low self-esteem, egocentrism, unwillingness to interact in a team)	37.5
Mental retardation	37.5
Excessive mobility, impatience, restlessness	32.1
Character traits (laziness, stubbornness, disobedience, aggressive behaviour)	32.1
Other	7.1

In an open question about other problems of a behavioural nature, parents noted apathy, as well as timidity of the child, the desire to hide when strangers appear.

The greatest difficulties in communication between parents and a child arise in the learning process (51.2%) and in the education process (21.4%). The same number of parents face conflicts in the family (21.4%). An in-depth interview conducted subsequently showed that the scope of conflicts is different: from small disputes related to situational contradictions in the performance of domestic duties, to major protracted conflicts, some of which are in a "protracted stage" (constantly conflicts about raising a child, requirements for him/her or assessment of child behaviour).

It is important to note, that some parents experience medical and social problems (28.6%). These are issues such as the combination of medical and therapeutic treatment and social and pedagogical practice, ignorance or lack of knowledge of certain medical and social issues, etc.

16.1% of parents experience difficulties in understanding of specialists (for various reasons). At the same time, the majority of respondents highly value the importance of qualified assistance of specialists (82.1%), but some parents are inclined to see as insufficient efforts of specialists to help their child, or blame specialists for lack of professionalism, or vice versa, for excessive requirements for their child.

To the question what kind of specialists a family with a disabled child needs, answers: highly qualified doctors, defectologists (a specific Russian term in relation to   learning disabilities and abnormal psychology), psychologists, speech therapists. Lawyers and babysitters are also in demand. Several respondents expressed interest in the work of a studio teacher (a social teacher who conducts specialized classes in studios, for example, art or vocals for children with various types of developmental disabilities (DD).

The largest issue for families with children with disabilities is in lack of quality of medical care at the place of residence. The Moscow region has better resources with high-quality medical care: there are diagnostic centres, specialized medical institutes, many of which are world famous. However, they work all over the country, parents with children from all over Russia turn to them and getting to these clinics is not easy. In addition, parents with children with disabilities need not only high-quality diagnostics and periodic courses of treatment in prestigious clinics. They need every day help near the house. A lack of such assistance was reported by 67.8% of parents.

As noted above, many families with disabled children are classified as low-income families. The survey confirmed this conclusion: 57.1% of respondents believe that they need material assistance. 33.9% of parents surveyed are hoping for state assistance in improving housing conditions. It should be noted that parents have a good idea of why they need financial assistance: 57.1% believe

that financial assistance is necessary to organize medical care for the child, for effective treatment and rehabilitation; 23.2% for the successful education of a disabled child. But 21.4% of parents said that help is needed to support the life of the family, for everyday needs.

More than a third of parents believe that they lack knowledge on: how to heal and develop their child (32.1%), how to regulate their own emotional state (35.7%), and how to protect their rights (41.1%). With a lack of knowledge, parents most often turn to specialists whose child is undergoing rehabilitation (66.1%) or receive information from rehabilitation centres where the child is undergoing treatment. In second place among the sources of missing information is the Internet (an independent search for information). 21.4% of parents turn to social services, and 17.8% look for missing information in specialized literature. At the same time, satisfaction with accessing these sources of information is experienced only by 42.8%. Not surprisingly, more than half of the respondents said that they receive a significant proportion of the diverse information from acquaintances and friends, as well as from relatives.

One of the central questions of the questionnaire was the question of what exactly do parents consider the most important in the rehabilitation of their child? The answer was in the first place: to reveal the child's abilities and develop them. Next, level existing differentiations and bring the child's position, as close as possible to normal. In third place: creating a favourable environment, including a comfortable living environment, the selection of toys, and if possible pets, next to which the child would be comfortable. Some parents consider it important to teach the child to survive in any conditions. In fifth place was the answer: to teach the child to build relationships with people.

All these positions should be reflected in a special long-term individual rehabilitation and habilitation programme, which every person with a disability should have in Russia, including a disabled child. However, among the respondents there were 16.1% of those who do not know about such a programme, and 39.3% are not satisfied with its content.

Given this result, the answer to the final question of the questionnaire becomes clear:

Table 2: Do you have a clear understanding what needs to be done for the recovery and development of the child?

soon	%
I cannot imagine	8.9
I can vaguely imagine	12.5
I can clearly imagine	76.8
in a year	
I cannot imagine	14.3
I can vaguely imagine	30.4
I can clearly imagine	51.8
in 3 years	
I cannot imagine	33.9
I can vaguely imagine	23.2
I can clearly imagine	41.1

As can be seen from the table, for the short term (here and now) most parents have an idea of what they will need to do. However, less than half of parents expect their strengths to be relatively clear in three years. Even after a year, many find it difficult to answer what will be necessary and important to do for their child. This means that the family lives without looking into the future,

not being able to plan its development and formation, and also not seeing the prospects for the development of its disabled child.

It is important that the questionnaire conducted by the authors of the article shows a rather low interest in leisure activities of a family with a disabled child (from 10.7% to 19.6% of respondents). As for the personal interests of parents, most responses were negative. Moreover, some parents expressed perplexity - is it possible in their situation?

In general, the revealed picture is quite typical for families that just survive.

An in-depth interview was conducted with the parents of 12 families who were selected from the survey respondents. The principle of selecting families for further research took account of the use of model answers for families in relation to responsible behaviour in the process of upbringing, inconsistent, problematic, passive. The questions from the standardized part related to the targets in the content of the parents' activities, their behaviour towards the child, as well as the attitude towards interaction with specialists accompanying the family with a disabled child. Some of the questions are aimed at assessing the level of readiness to help their child and at the participation of parents in social rehabilitation, in assessing the level of assistance of specialists and the level of their own knowledge in the field of social rehabilitation. These questions performed the functions of clarifying and verifying questionnaire answers.

Non-standardized questioning revealed the level of mutual understanding between parents and children, the nature of interpersonal relations, as well as the level of conflict in families with disabled children: reasons, orientation, ways to overcome. Responses to these questions have shown that the extent of conflicts varies, ranging from small quarrels involving situational contradictions in the performance of household duties to major conflicts, some of which are in a "protracted stage" (persistent conflicts over the child 's upbringing, demands or assessment of his or her behaviour).

As in the questionnaire, conflicts over the education of children came first. Some parents note that they try to get the child to study successfully and insist on it, despite the resistance of the children. Others believe that school success is not at all mandatory for their child. The attitude of parents in this problem does not correlate with the severity of the child's situation.

Most parents speak of the low level of awareness of the child 's educational opportunities and how to interact with him or her in the educational process.

Another identified problem is in interaction with specialists of the general education organization (schoolteachers and social teachers). To the credit of specialists of social institutions, their competence was appreciated highly - more than 2/3 of the parents surveyed appreciated their assistance highly or very highly. However, it must be recognized that these results need to be clarified and verified, as the sample of 12 families is very small. In this case, it was only possible to clarify the problems for further study. In addition, the limited sample was also affected by the fact that parents already interacting with specialists were examined. Such a pattern of parental behaviour as 'aggressive denial' was not revealed during the questionnaire and in-depth interview process. It was identified only by an expert survey.

The expert survey included social work specialists, a pathologist, defectologist, the head of the "Lekoteka" structural unit, and educators from Rehabilitation Centres. The age of specialists is from 25 to 65 years, the length of professional work in the social sphere is from 3 to 35 years, and those with higher education. All specialists were from among those who work with interviewed families.

75% of specialists said that they constantly work with parents of children with disabilities. This includes counselling, joint discussion of proposed actions and clarification of upcoming steps, and discussion of joint actions. However, many experts spoke about the sporadic frequency of contacts, long breaks, and also that it is far from always possible to find a common language with parents of children with disabilities.

Assessing the difficulties in working with parents, the experts put in first place the inconsistency of parents in implementing the recommendations of specialists (47.7%), the lack of parents'

knowledge necessary for the development and upbringing of a child (33.3%), passivity or indifference of parents (33.3%), the lack of contact between the parent and the child (25%) and the conflict between the parents themselves (25%). The experts considered the signs of successful integration of the work of specialists and the activities of parents to be the overcoming or substantial compensation of the illness of a disabled child or its consequences, increased social and domestic adaptation, and success in obtaining a general secondary education. 75% of experts report that their parents constantly turn to them for help, and 25% believe that some of their parents rarely do, or only occasionally.

Moreover, experts consider active 17.9% of parents, moderately active 46.4%, active in some situations – 23.2%, passive 12.5%.

To the question of what parents most need from the point of view of specialists, the first answer was "support for close people", the second place was the support of the state, then high-quality medical care, additional information about the disease and development of the child, and also the availability of quality education.

The study allowed us to create a model of behaviour for parents of children with disabilities, based on their awareness of their parental responsibilities and their subjectivity.

To clarify the motivation of behaviour, the results of the interviewing highlighted the following:

1. The first reaction of many parents is a sense of guilt. It seems to them that the misfortune that happened to the child occurred through their fault. Even after doctors have explained that there may not be a direct correlation of the child's health with the health of the parents, that the trauma or illness that caused the child's disability could have occurred through no fault of the parents, this feeling still persists. It is no secret that parents have such ambivalent feelings for such a child: love for him/her is replaced by irritation or bitterness. If the child is successful, there may come a period of inspiration or euphoria, which can quickly be replaced by despair and loss of strength if success has ceased.

2. Shame. This feeling appears because the parents imagine that others blame them for the trials that have befallen the child or may consider the parents themselves to be 'defective'. They are ashamed that they have such a child, they try to hide and isolate her/him from family and others.

3. Anger and aggression. It seems to some parents that a disabled child is such a punishment and test for them that they did not deserve. They tend to blame everyone around them – from relatives, to doctors and social services specialists, for their tests, they require special attention, help and assistance.

4. A sense of responsibility. It is not formed immediately. But understanding the problem, understanding the possibilities of solving it leads to focused activities for the benefit of the child.

Models of parental behaviour are formed on one of the basic motivations of behaviour. However, it is impossible to make a direct relationship, because to one degree or another, each of the parents has to experience all the emotions. The behaviour model is based on the dominant long-term motivation. The most optimal model should be called 'responsible behaviour'. It does not appear immediately. In its formation, not only the attitude of the parents themselves is involved, who have felt and understood the responsibility for the life and fate of their child. The professional help of specialists is very important. Responsible behaviour of parents is an understanding of the meaning and content of the upcoming activity, its goals and stages.

However, based on this model, hyper-responsible behaviour may also develop. It is characterized by increased suspiciousness and anxiety, increased demands on both itself and the specialists accompanying the family, but also the child. Like any exaggeration, hyper-responsive behaviour has serious disadvantages.

One of them may be such a behaviour model as hyper-custody. This pattern of behaviour is for the most part based on guilt and falsely understood compassion for the child. Parents understand

that the possibilities of a disabled child are limited, that much is for him very difficult, and for this reason they are ready to carry out all the actions for him/her. They do not require the child to master any actions and skills, manifestations of independence. In fact, taking increased care, parents with this model of behaviour contribute to the growth of disability of the child, causing her/him her/him to have dependent behaviour in their later adult state.

The third model of behaviour is very close to the hyper-custody model in essence but differs in the forms of behaviour – it is an acquiescent model. Aware of the difficulties of the child, parents allow the child to behave in a spontaneous manner: s/he does not follow the rules of behaviour, even when the child is able to do this- eat with his hands, etc. The result is negative once again – the child is not socially adapted.

The fourth model is passive. Parents believe that changing their position is not in their power, and therefore "go with the flow." They do not work with children, justifying this with high employment, lack of funds, inability to get the desired result, the need to deal with other children, etc. The child feels that he is an outcast in her/his own family, acquires isolationism syndrome. The result is not only the lack of social adaptation, but also a whole range of fears and psychological barriers. They do not allow even the opportunities that the child had in terms of objective indicators to be realized.

The fifth model is aggressive denial; the most dangerous model of parental behaviour towards a disabled child. Parents are aggressive towards the child. They believe that they did not deserve such torment and behave according to the principle "the worse, the better", sometimes they are completely indifferent to threats to the life of the child.

It should be noted that among the interviewed respondents there were no representatives of the latest behaviour model. However, surveys of experts - specialists working with interviewed families- helped to create this model.

The analysis of all the results allowed us to develop the following table, which reflects the essential features of each model of parental behaviour.

Table 3: Parent behaviour patterns, substantial characteristic

Behaviour Model	Parent Activity	Parents Behaviour in Relation to a Disabled Child	Interaction with Specialists Accompanying a Disabled Child Family
Responsible	• study and understanding of the various types of DD of a child's disability • active and focused participation in the development of programmes to help the child and in their implementation • interaction with specialists in the process of raising a child	• constant focused work on the formation of skills and activities available to the child • love and attention to the child, patience and support • a deliberate reward system for the success of a disabled child	• high level of trust in specialists and interaction with the • all activities of parents are built in consultation with specialists
Hyper-responsive	• increased suspiciousness and anxiety • increased activity, overloaded actions in the upbringing of the child, which overload and overexert her/him • often neglect of objective indicators of the possibilities and results of ongoing professional assistance	• increased demands on child performance • inconsistency in the upbringing and formation of certain skills due to the search for new increasingly effective technologies for social rehabilitation and adaptation	• increased demands on specialists accompanying the family, the requirements to work more actively with the child and get better results • the desire to find specialists or a "better" social support centre, new miraculous doctors or non-traditional specialists

Hyper-custody	• activity in relation to a disabled child is active, but unproductive • they believe that they "dedicated themselves to the child", not particularly understanding that they were depriving him/her of the future	• over-caring attitude to the child, the desire to perform all actions for the child (instead of her/him) • the desire to protect the child from possible dangers and difficulties, including (often), and from professional assistance • at the same time petty regulation of family lifestyle in dependence on the well-being of the child, • restriction of social contacts of the child in an effort to "protect" from possible negative emotions	• interaction with specialists is not active • it is often believed that specialists "torture the child", force them to do something on their own
Permissible	• activity is moderately active, mainly consumer services • low level of participation in the formation of a child's new skills and mastery of new activities • psychologically, the mood of negative fatalism ("nothing depends on us", "we cannot change anything", "all our efforts are in vain")	• low demands on the child • denial or neglect of the requirements of specialists aimed at raising a disabled child • allow the child to behave „how it goes"	• interaction with specialists is inconsistent, situational • periodically "disappear" from the view of specialists
Passive	• the conviction that working with a disabled child is not worth so much effort and cost that there are other more important matters in the family • inaction is justified by a lack of funds, the inability to get the desired result, the need to deal with other children, etc.	• there is no focused work with the child • often squeezing a disabled child to the periphery of family life • the child feels that s/he is an outcast in his/her own family, acquires isolationism syndrome • objectively destroy the potential of the child	• interaction with specialists is extremely low and inconsistent • often avoiding contacts, unwillingness to cooperate
Aggressive Denial	• inaction or even worsening of the child's situation (failure to comply with the requirements for medical treatment and medical procedures) • failure to comply with the recommendations of specialists (social educators and psychologists, defectologists and speech therapists)	• desire to ward off the child, not to consider his/her needs • denial of his/her abilities or (vice versa) desire to demand him/her the same as from healthy children	• denial of work with specialists, distrust of their recommendations • unwillingness to comply with the recommendations of specialists

Identified indicators in the formed models of behaviour require clarification. This should be the subject of further research. But already in this form, the identified models can become the basis for the correction of the interaction of specialists accompanying the activities of the family raising a disabled child.

DISCUSSION

Awareness of a child's disability is a long process. Assessing it, researchers distinguish three phases. The first phase – confusion, fear, anxiety and a feeling of powerlessness; the second is the search for alternative diagnoses, clarification of information, an attempt to comprehend the situation; the third is the acceptance of reality, the development of one's own position and style of behaviour as a parent of a disabled child, the formation of parental subjectivity. (Simmerman, Blacher, Baker, 2001; Emerson, 2003; Dautova, Dikhanbaeva, 2018:382).

Researchers note that the formation of parental subjectivity is often accompanied by self-denial of self-rejection of one's profession and professional activity, self-development and even one's own leisure. It is characteristic that the questionnaire conducted by the authors of the article shows a rather low interest in leisure activities of a family with a disabled child (from 10.7% to 19.6% of respondents). As for the personal interests of the parents, most of the answers were negative. Moreover, some parents expressed bewilderment - is this possible in their situation?

Answers to these questions are also waiting for their researchers, although the first applied work has already appeared. So, the work of the young scientist Zhimaeva (2013) gave practical recommendations to parents on the formation of the simplest, but at the same time the most demanded skills of disabled children – social and day to day. Similar work is necessary in the formation of other competencies of children with disabilities. This will help parents more accurately determine their own self-identity and subjectivity, choose the right strategy for raising their own child. Family life should be full and diverse. Only in this case is it possible to form a full-fledged personality of a disabled child.

Professional assistance is needed to overcome these negative trends (Thompson, Flood, Goodvin, 2006; Kozlovskaya, Sizikova, Anikeeva et al., 2018). However, interactions with specialists are not always perceived positively by parents. There is a lack of close contact and consistent interactions with social teachers and teachers of general education.

The first attempts at a typology of the behaviour of families with children with disabilities were made in several works (Fedoseeva, 2013a; 2013b; Korzhuk, 2016). The risks of unsuccessful parenting are formulated as follows: *"a model of indifferent upbringing which leads to a child's feelings of uselessness, rejection, feelings of loneliness"*; the child becomes "*timid, unusually shy, loses trust and sincerity inherent in children in relations with parents. Children are taught the ability to adapt to the environment, an indifferent, hostile attitude towards relatives, adults and other children*" (Korzhuk, 2016:143). These are very serious personal losses that distort all subsequent results of the socialization of a disabled child.

Deficiencies in the awareness of the temporal perspective of families raising children with disabilities are especially noted (Kulik, 2013). The author writes that most families with children with disabilities are characterized by negative fatalism and a lack of accurate ideas about what will happen to the child in a few years, during the period of graduation from high school or during vocational education or the beginning of professional activity. The disadvantages of this kind were identified by the authors in the survey and interviews. When asked about their expectations in the future, parents most often answered: "we don't look that far …".

The effectiveness of the educational process most directly depends on the involvement of parents in this process (Ryan, Stiller, 1991; Savelyeva, Zhimaeva, Bobodjonova, 2015; Bird, 2016; Anikeeva, Zhimaeva, 2019). Success in raising young children with disabilities and adolescents becomes the key to their successful fate, obtaining professional education and employment (Kozlovskaya, Sizikova, Anikeeva et al., 2018).

Thus, a study of the problems of families with children with disabilities, the choice of a parenting strategy and family behaviour models in the educational process, based on parents' awareness of their subjectivity, attracts the attention of many researchers. These studies cover the diverse aspects of the life of such a family and consider them in the context of many social problems

(education, healthcare, family leisure activities, employment) They examine the self-esteem of families and persons with disabilities, their well-being, assess the success of parents, teachers, social specialists pedagogy and education, speech therapists and defectologists, other specialists in the social adaptation of a disabled child, in helping the family raising such a "special" child.

CONCLUSION

The subjectivity of the parents of a child with a disability implies their awareness of the fact that the child was born and will live in their family, that they, as parents, must determine their attitude to this fact and develop rules for life. In the best-case scenario, a responsible behaviour model is developed that is based on the inclusion of a disabled child in the inner world of the family. In this model, parents determine their ability to change the situation for the better. Subjectivity just assumes that an adult knows her/his abilities to transform the situation in which a disabled child finds himself, that he assumes responsibility for the results of the educational process and the socialization of a disabled child.

However, practice shows that precisely in these circumstances a rather contradictory environment is emerging. On the one hand, the role of the family in raising a disabled child is increasing. Assistance to the family can be provided by specialists. Modern science and social practice have gained extensive experience in the successful implementation of methods and technologies to assist children with disabilities. These are medical, socio-psychological, and sociocultural methods and technologies. And yet the role of the family remains essential – it is the family of the disabled child that provides the main social and psychological social protection. Parents form a child's personality. Parents are responsible for receiving the necessary professional assistance.

On the other hand, the emergence of a child with disabilities in the family is a great stress for all family members. Research shows that all families, without exception, are going through a period of crisis. It takes some time for parents to choose their positions and their subjectivity towards their new duties. Of course, there may be different circumstances in different countries that may exacerbate or mitigate this situation. In Russia, the situation of families with disabled children is exacerbated by a rather low standard of living and great difficulties in obtaining adequate medical care. Many children with disabilities are born in families with low social status. But also, in this case, the decisive role will remain with the family, which is ready to take on the full extent of care for the child.

Applied research on the positions of parents conducted by the authors of this article made it possible to form a series of behaviours that predetermine both their own parenting activities, issues of relationship with the child, and interaction with specialists accompanying the family.

Both positive and negative models (aggressive denial, passive model or permissive) are highlighted. The authors note that the problem requires further study. In particular, the identification of indicators of the formation of a model and the formalization of their measurements, and the identification of technologies for the positive socialization of children with disabilities are required. Recently, in Russian scientific literature emphasis was made on the study of negative experiences, risks of barriers, and deficiencies in the activities of parents. Practical recommendations are required for positive experience, the experience of maintaining the social identity of the family, and the possibility of self-development and self-realization of all family members. Only positive and confident personalities of parents can become a guarantee of favourable socialization and social adaptation of a disabled child as s/he grows up.

Parents who have assumed responsibility for raising a disabled child are met with great difficulties and problems, they overcome contradictions, and rejoice in small and great achievements. They need very serious professional assistance and psychological support. Research into the subjectivity of parents and the readiness to help a child can help to better shape social programmes to help and support such families.

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Selected Socio-Cultural Aspects of Disability in the Arab World – Sociological Approach

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Abstract

OBJECTIVES: The authors undertake a thorough analysis of approaches towards disability in the Arab region, its socio-cultural aspects. THEORETICAL BASE: To that end, firstly, they explore the logic of disability notions and its perceptions in the leading research in the Arab region. METHODS: The paper presents the results obtained from a quantitative research strategy, which used statistical indicators of relevant institutions with subsequent comparison.
Subsequently, the authors examine the issues related to different types and causes of disability, employment issues, education and social protection of persons with disabilities in the region while focusing on the most accessible, rigorous and complete data. OUTCOMES: The research showed differences in approach to this clientele, pointing to the lack of social interventions. The methodological key to effective intervention is an ethical analysis of value approaches. SOCIAL WORK IMPLICATIONS: The authors deal with issues that are closely related to disability, such as social diversity and social stigmatization, which most threaten the clientele. The role of social work lies in exploring the issue of disability in the Arab world, whereas this phenomenon is actually latent in society. Issues of social policy and specific welfare state interventions remain only on a declarative level, without their practical application.

Keywords

disability, persons with disabilities, social stigmatization, Arab region, social integration, marginalization

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INTRODUCTION

The cultural optics of the western world to the eastern world feature an priori character. Certain pre-understanding (a hermeneutic concept) of this optics creates space for a comparison of two diverse worlds. The European world, characterized by the significant existence of welfare state practices, faces the Arab world with its specifics, which marginalize an individual and particularly a disabled person. The value orientation of the Arab countries has remained unchanged even after the ratification of the World Disability Action Programme adopted by the UN General Assembly at its 37th Session in 1982. In practice, aid and assistance remain only on the shoulders of predominantly international charities.

This specific approach to persons with disabilities in the Arab world is associated not only with their stigmatization and marginalization, but also with the fact that the number of disabled people reported in official statistics is low. With regard to the aforementioned, the question therefore arises whether the latency of this phenomenon stems from cultural patterns or whether the deliberate obfuscation of facts is linked to the caste way of life. Nevertheless, numerous studies presented in this study confirm the fact that disability concerns human rights issues of stigmatization.

Worldwide, the perception of a disabled person has been linked with the process of stigmatization and marginalization (Bokszański, 1989:154–156). The disabled person is believed to have different social roles compared to these performed by healthy subjects (Niklas, 1976:155–156). The disabled person is at times implicitly understood by the majority of society members as biologically weaker, easy to be dominated or manipulated, however at the same time the same majority does not take into account a vast probability that its members would, at some point of their life, become disabled. Stigmatization, marginalization, and mistakenly perceived social roles of the disabled persons as a group brought about by biological and socio-psychological desire of healthy members of societies to control and marginalize this weaker group, i.e. the disabled group makes difficult her politico-social, economic and socio-cultural progression in societies. Moreover, cultural and psychological adversity towards persons with disabilities and their groups undermine their inclusion and integration into societies, as well as hindering the creation of adequate socio-educational curricula for them and about them (Bokszański, 1989:68–70).

Disability is theoretically seen as an intrinsic aspect of the human condition. Worldwide, it is estimated that one billion people, i.e. 15% of the world population are disabled. Contrastingly, merely 0.4–0.9 % are reported to be living with disability in the Arab countries[3]. This data has been recognized as an evidence of widespread difficulties and differences encountered in the course of research analysis and data collection (ESCWA, League of Arab States, 2014:3). All 22 countries of the Arab region have much in common - language, culture and religion. However, subtle differences and multiple diversities exist stemming from socio-economic, socio-political and geographic settings of each country. These issues constitute both advantages and disadvantages to effectively address the disability problem in the region (Al-Thani, 2007:4–9).

With regard to international social policy activities, the Arab world social policy featured similar social issues, yet it did not implement common coordinated procedures for dealing with the situation of persons with disabilities.

Generally, disability in the Arab world was viewed with misunderstanding, confusion, and its notions were marked with elements of emotional despair for reasons of disability were not explored

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[3] Arab Countries: Algeria, Bahrain, Comoros, Djibouti, Egypt, Iraq, Jordan, Kuwait, Lebanon, Libya, Mauretania, Morocco, Oman, the state of Palestine, Qatar, Saudi Arabia, Somalia, Sudan, Syria, Tunisia, the United Arab Emirates and Yemen. In April 2019, the Arab region was populated by 423 million people. All countries are members of the Arab League which was founded in March 1945 before the end of the Second World War (Arab League in Washington, D.C., 2019). The idea of the Arab League was mooted by the British Government which aimed at igniting Arab rules against the Axis powers (Gomma, 1977:25–30).

and there was a certain inability to handle disability psychologically and socially. However, societies knew and realized that the disabled required a special type of care depending on their physical or/ and mental disabilities (Mourad, Walid, 2007, in Eissa Saad Mourad, Borowska-Beszta, 2019:31). Similarly, as in western cultures, Arab societies stigmatized the disabled; persons with disabilities felt inferior to the remaining parts of society, experienced oppression, contempt and neglect (Mourad, Walid, 2007, in Eissa Saad Mourad, Borowska-Beszta, 2019:31).

As of 1965, the Arab region commenced to progressively change its social attitudes towards disability due to several significant assumptions: 1) a need to conduct a comprehensive overview of social factors and circumstances causing disability which should eventually lead to rehabilitation of the disabled; 2) a need to integrate the disabled into the society with a safeguard of equal justice providing them equal opportunities; 3) a failure to care for the disabled lead them to anxiety and frustration, which in turn has had a negative effect on societies; 4) the era of information and technology has contributed to a change in social attitudes towards the disabled through new methods and techniques used in medicine, psychology and education; 5) disability has been seen as qualified for human development (Eissa Saad Mourad, Borowska-Beszta, 2019:31). Perceived as "bad omens", symbols of sins committed by families, sources of disasters - the disabled in the Arab region largely lived in the sense of prejudice till the late 1960s.

Gradually but with many difficulties, the situation has been changing. In 1965, the disability problem gained attention of the Arab Labor Organization[4] which issued the Convention number 17. Subsequently, in 1990s and in 2000s, theoretical and legal advances on the situation of the disabled persons were made, including through the work of the League of the Arab States, the United Nations Economic and Social Commission of Western Asia (UN ESCWA[5]) as well as worldwide, regional and national non-governmental organizations. Nonetheless in practice, major work still remains to be done to change social perceptions about the disabled, their stigmatization and marginalization and formulate a nexus of orientations: human – social – equality of opportunities – human development within the Arab understanding of the disability concept (Eissa Saad Mourad, Borowska-Beszta, 2019:32).

Within the Arab region, the phenomenon of disability has been commonly called "physical and /or mental social otherness" and is present in the Islamic tradition. The Arabic and Western literature themes on disability in the Arab region significantly commenced to be reviewed and debated since 2002, in the western world in particular – with the publications of M. Miles – "Disability in the Middle East" which listed 1060 literature items issued on disability between Arab antiquity and 2002, as well as in the Arab region – predominantly with the works of Mohammed Ghaly which started to be released as of 2006, for example – "Disability in the Islamic tradition" (Ghaly, 2010:5–10). It has been contentious whether the pre-modern Islamic tradition had a considerably different approach to disability than these elaborated in the post-industrialization Islamic era (Ghaly, 2008:149–162).

Discussions on disability related issues were to appear for the first time ever in *ilahiyaat* (Islamic speculative theology) which is the part of *aqaid* (religious beliefs) of Muslims embraced by the Islamic sciences *ilm al-kalam, al fikh al-akbar, ilm usul al-din, ilm al-aqaid* to name a few – to a certain extent counterparts of Western theology (Ghaly, 2010:10–15). The *ilahiyaat* speaks about *al-qadaa wa al-qadar* (fate and predestination) where attributes and actions of God are discussed. The texts underline man's freedom to act and God's predestination as well as afflictions

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[4] The Arab Labour Organization was founded in 1965 and is affiliated with the League of Arab States. The organization has 21 member states, the same members as of the League except the Comoros (Arab Labor Organization, 2019).

[5] The UN ECSWA comprises 18 countries: Bahrain, Egypt, Iraq, Jordan, Kuwait, Lebanon, Libya, Mauretania, Morocco, Oman, the State of Palestine, Qatar, Saudi Arabia, Sudan, Syria, Tunisia, United Arab Emirates and Yemen. The Organization was founded in 1973. Its mission provides for harmonization of sectoral social and economic policies and practices in member states (UN ESCWA, 2019).

and misfortunes which befall upon creatures/humans as an essential part of God's predetermined plan for each creature/human. It has been researched that hardly any theological Islamic text refers to disability *per se* except the chapter concerning questions on torture of infants by Abuu al-Hasan Al-Ashariis in his book *Al- Ibaana* (Illumination). Al-Ashariis mentioned therein leprous children whose feet and hands were cut off. In other texts, the term disability was associated with *musiiba* (calamity or affliction), and *shart* (evil) (Ghaly, 2010:16–17).

Over the last twenty years, there have been very few in-depth and exhaustive publications which focused on the rights of the disabled in the Arab region. Mohammed Ghaly researched the issue of financial rights of people with disabilities in "The Financial Rights of People with Disabilities: The Perspectives of Islamic Shariia and the case of Muslims in the Netherlands" in 2002. The rights of people with disabilities were classified while taking into account the social status of families in which a disabled person was born and raised and the state in which he or she resided permanently. Another scholar, Mustafaa ibn Hamza is the author of "Huquuq al-muawwaqiin fii al-islaam" (The Rights of the Disabled in Islam), issued in 1993. For the first time, the disabled were considered from two perspectives: 1) financial and non-financial rights; 2) mental or physical disabilities. The author's analysis displayed that at the time of Prophet, the rights of equality and integration into the community was applied in social life and that *zakat* (Islamic financial duty of Muslims) with its moral esteem had played a key role in the social care which was granted to people with disability.

Furthermore, the researcher Mustafa al-Quudat performed a comparative study between Islamic laws and positive laws in "Huquuq al-muawwaqin bayn al-shariia wa islamiya wa al-qanuun" (the Rights of the Disabled in Islamic law and in the Law). The author focused on blind people, and he proposed to divide the disabled rights into basic rights such as the right of having a name and lineage, the right to live, the right of secrecy to correspondence and private affairs, the right to learn and work; and civil/political/social rights which embraced the right of inheritance, marriage, ownership, the rights to health care, having nationality and homeland, rights of having access to transportation and sportive games (Ghaly, 2010:12–13).

Through extensive research, the notion of disability has been recently defined in the Arab region as "a state in which the individual is unable to or has a difficulty in performing one or more types of physical or intellectual activities for ordinary individuals who are equal in age, gender or social role and are essential to daily life such as movement, sports activity, economic and intellectual work. Thus, this state of disability impairs the performance of the role imposed on him/her by age and gender, social and culture considerations in his community" (Eissa Saad Mourad, Borowska-Beszta, 2019:32). Thereby disability is considered a mental or physical injury that caused harm to human development physically and mentally and may affect his/her psychological, educational and training state, one person may have one or several disabilities, a person might be affected by disability straight from birth or as a result of accident or a disease (Farrag, 2003, in Eissa Saad Mourad, Borowska-Beszta, 2019:32–33).

Various specific instruments for the protection of the disabled persons' human rights have been adopted at international level. These instruments include declarations, resolutions and normative guidelines adopted by the UN General Assembly, however they are not legally binding. Thus, the situation on the practical level of the Arab world remains without institutional support.

SELECTED SOCIO-CULTURAL ASPECTS OF DISABILITY IN THE ARAB REGION – DISABILITY TYPES AND ITS CAUSES, EMPLOYMENT, EDUCATION AND SOCIAL PROTECTION OF PERSONS WITH DISABILITIES

As of 2006, all ECSWA signed the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD) and the progress reports have been prepared ever since. The ECSWA has been working to ensure that data used in reports, in particular "the Disability in the Arab region 2018" report have met qualifying criteria to be gathered and verified by the ECSWA and the United Nations, as in the previous years the data were not thorough and some were of poor

quality. The report has been considered the most recent and complete source of the disability situation in the Arab region. It includes disability prevalence rates and demographic profiles; socio-economic situation: verification of Sustainable Development Goals and the UN CRPD i.e. education, employment, early childhood nutrition, health care, access to water and electricity; and microdata analysis (ESCWA, 2018:7–8). In addition, disability related questions were probed in national surveys and censuses which are shown in the table below.

Therein domains of physical/mental difficulty were explored, the word "disability" occurred solely in questions probed in Oman, Mauretania and Syria. Due to better socio-cultural understanding of precise words such as "deaf"/ "blind"/ "mute"/ "without legs/arms", the questions without the word "disability" were chosen. On most occasions, domains of difficulty were structured using the Washington Group Short Set (WGSS) (see Table 1)[6].

Table 1: Data collection sources

Country	Survey/Census and Year	Use of screening question*	Questions asks about normal functioning	Question uses the word disability	Levels of difficulty***	Domains of difficulty (WGSS domains or other)
Bahrein	Census 2010	√	√		Yes/No	WGSS domains, excluding 'self-care' addidng 'multiple' and 'other'
Egypt	Labour Force Survey (LFS) 2016	√	√		WGSS	WGSS
Iraq	Poverty and Maternal Mortality Survey (I-PMM) 2013				WGSS	WGSS domains excluding 'self-care'
Jordan	Census 2015				WGSS	WGSS
Mauretania	Census 2013			√	Yes/no	Not WGSS, including 'movement', 'deaf/mute', 'vision', 'mental', 'multiple' and, 'other'
Morocco	Census 2014				WGSS	WGSS
Oman	Census 2010	√		√	WGSS	WGSS, adding 'upper body movement'
Palestine	Census 2007				WGSS	WGSS domains, excluding 'self-care'
Qatar	Census 2010				WGSS	WGSS domains, adding 'talking' and 'other'

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[6] Washington Short Set Group (WGSS) – a short set of themes used to formulate questions about difficulties in normal functioning, developed by scholars of the Washington Group for the United Nations Statistical Commission in October 2017 to capture worldwide data on disability associated with social exclusion: seeing, hearing, mobility, cognition, self-care, communicating (WGSS, 2017).

Country	Survey/ Census and Year	Use of screening question*	Questions asks about normal functioning	Question uses the word disability	Levels of difficulty***	Domains of difficulty (WGSS domains or other)
Saudi Arabia	Demographic and Health Survey (DHS) 2016	√			WGSS	WGSS domains, adding 'other'
Sudan	Census 2008				Yes/No	Not WGSS, including 'limited use/loss of leg(s)', 'limited use/loss of arm(s)', 'difficulty in hearing/deaf', 'difficulty in seeing/ blind', 'difficulty in speaking/mute', 'mental disability'
Syrian Arab Republic	Budget Survey 2007			√	Yes/No	WGSS domains, excluding 'self-care', adding 'multiple'
Tunisia	Census 2014	√			WGSS	WGSS
Yemen	Household Budget Survey (HBS) 2014				WGSS	WGSS

Source: ESCWA, 2018:16

The disability prevalence rates indicated that the lowest is in Qatar – 0.2, and the highest in 5.1 in Morocco. In general, the rates in the Arab region are recounted to be very low compared to other world regions. The report authors argued that such a situation had been brought about by continuing persistent methodological difficulties in data gathering, armed conflicts in some countries and socio-cultural perceptions of disability. In all countries the prevalence rate continues to reach 3% for disabled persons aged 25–44 and is under 5% for persons in the age of 45–64, in turn the rate increases substantially for those aged 64 and more (ESCWA, 2018:14–17).

There have been dissimilarities in terms of disability types in the Arab region, that stem from different means of data collection and classification rather than in fact dissimilarities between disabilities. Ten of eleven countries' data indicate the following disability types: seeing difficulty, hearing difficulty, mobility difficulty, cognition mobility, poly-handicapped, and communication mobility. Disabilities associated with mobility are most prevalent in Egypt – 43.3% of all disabilities, while in Qatar are the lowest – 21.6%. Hearing disabilities constitutes 10–15.9% of all disabilities in all Arab countries, cognitive disability is the lowest in Egypt – 5.7% whereas in Qatar – 14,5%. Iraq, Jordan, Sudan, Mauretania, Morocco, the state of Palestine and Yemen admitted having persons with multiple disabilities per person (ESCWA, 2018:21).

Furthermore, there is an uneven picture of disabled women and men in all age groups due to the disability stigma which touches more frequently young women and girls, which, in turn leads to underreporting and/or misreporting correct numbers among this group. Similarly, persons with disabilities residing in institutions are neither reported in censuses or surveys. In all countries, the higher number of older women with disabilities compared to men with disabilities was noted

(ESCWA, 2018:18). Illness is reported to be the major reason for disability, except in Oman; ageing has been the second frequent cause of disability among men whereas disability of women was more frequently provoked by accidents.

Congenital causes of disability are most frequent in Yemen, Saudi Arabia, Oman, whereas they mostly occur due to birth-related difficulties in Bahrain. Terrorism related disability has been noted at very low levels, the highest in Iraq – 3.8%. Significantly higher percentages of so-called "other causes" of disability, create incomplete setting of disability background in the region (see Table 2). As a result of the higher average age of disabled persons, the number of married, divorced or widowed persons with disabilities is higher than those married, divorced or widowed without disabilities (ESCWA, 2018:7–8).

Table 2: Causes of disabilities in the Arab region

	Bahrein	Iraq	Mauretania	Oman	Palestine	Saudi Arabia	Yemen
Congenital	9.2	23.6	29.5	32.8	23.4	34.7	25.6
Illness	35.2	29.4	41.8	26.4	34.0	36.9	31.9
Ageing		23.5		31.8	21.2		28.0
Birth related	30.0	10.4			5.9	13.8	
Physical and psychological abuse		0.9			1.0		
Accident	9.6		11.6				
Work accident		1.1		1.4	1.9		3.8
Car accident		6.1		4.9	1.7	6.0	4.3
Other accident					4.4	5.0	
War/terrorism		3.8	0.8		0.2		1.8
Israeli measures					3.6		
Other	16.1	1.2	16.3	2.7	2.8	3.6	3.9
Not stated							0.7

Source: ESCWA, 2018:24

The rate of persons employed with disabilities continues to be very low, the lowest for women throughout the region as they are predestined socio-culturally not to likely work. For instance, in Morocco 6.7% disabled women work compared to 15.7 women without disability; in Iraq 32.8 men are employed compared to 63% without disabilities; in Egypt 90.5% women with disabilities are unemployed versus 75.8% without disabilities (ESCWA, 2018:7–8). In nine out of ten countries where data was delivered, 14% women with disabilities and 34% men with disabilities are employed. Bahrain has the highest employment rate for women – 26.7% and 78.3% for disabled men versus 43.8% women and 88.1% men without disabilities – which makes this country a unique leader in terms of employment, in particular in female employment in the region as generally it continues to be relatively low – on average – 4%. Employment of men with disabilities is far higher than expected – on average 30%. Yemen is the second best in employment of women with disabilities – 13.4% and men with disabilities – 27.4% versus 19.3% for women with disabilities and 64.3% for men with disabilities (see Table 3), whereas Saudi Arabia has the lowest unemployment rate for women with disabilities – 75.3% versus unemployment rate for women without disabilities – 32.8% (ESCWA, 2018:40–41).

The aforementioned World Action Programme (1982) is a comprehensive global strategy that uses 'equal opportunities' as a guiding principle for achieving full participation of persons with disabilities on an equality basis in all spheres of social economic life and development. However, it is not yet possible to determine how this action plan has transformed the issue of sanctions from

the social security question to the issue of disabled persons' human rights integration in all areas of the development process.

EMPLOYMENT OF PERSONS WITH DISABILITIES VERSUS PERSONS WITHOUT DISABILITIES AGED 15–64 IN THE ARAB REGION

Table 3: Employment of persons with disabilities versus persons without disabilities in the age of 15–64 in the Arab region[7]

	Persons with disabilities	Persons without disabilities
Bahrein	F 26.7	F 43.8
	M 78.3	M 88.1
Egypt	F 7.4	F 18.5
	M 33.7	M 66.6
Iraq	F 3.7	F 8.5
	M 32.8	M 63.0
Jordan	F 5.2	F 13.5
	M 32.8	M 61.4
Mauretania	F 10.4	F 13.9
	M 30.6	M 54.0
Morocco	F 6.7	F 15.9
	M 25.3	M 71.8
Oman	F 3.5	F 16.5
	M 16.3	M 57.6
Palestine	F 4.7	F 9.4
	M 29.3	M 55.2
Saudi Arabia	F 2.7	F 13.1
	M 25.7	M 59.4
Yemen	F 13.4	F 19.3
	M 27.4	M 64.3

Source: ESCWA, 2018:41

For example, women with disabilities in the state of Palestine and Yemen have the lowest levels of employment; they equally have the lowest levels of economic inactivity. In the state of Palestine, the unemployment rate is three times higher in urban areas – 29% rather than in villages for women with disabilities. Similarly, in Morocco, the unemployment rate is higher in urban areas – 22% rather than in urban areas – 12%. The overall low rate of unemployment among women with disabilities in the report has seriously encumbered the conduct of any evaluation of impact of disability on employment prospects both men and women (ESCWA, 2018:40–41).

The economic activity rates are strikingly high for both women with and without disabilities as well as men with disabilities aged 15–64. Such a situation is once more deeply rooted in a socio-cultural habit/norm of women commonly not working in the region and a habitual division of labour between genders; in Egypt – 90.5% versus 57.4% men with disabilities, in Iraq – 95.4% versus 55.8% men with disabilities, in Jordan 91.1% versus 53.3% men with disabilities; in Oman 94.1% versus 76.1% men with disabilities (ESCWA, 2018:42).

The literacy rate of persons with disabilities in the Arab region is significantly lower compared to

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[7] F = Female, M = Male.

those without disabilities. The widest, threefold literacy gap has been reported in Oman – 31.2% persons with disabilities versus 87% without disabilities. The educational aspects' data concerning persons with disabilities were made available by eight countries and differentiated by gender and location – urban/rural. Accordingly, women with disabilities in rural areas had the lowest literacy rates – 6.7% for Yemen, 7.1% for Morocco, 15.9% for Oman, 18.8% – for Egypt, 18.5% for Iraq, 28% for Mauretania; 28.4% for the state of Palestine and 28.5% for Jordan.

The literacy rates in urban areas for women with disabilities were much higher – 21.6% for Oman 27.3% for Morocco, 29.3% for Yemen, 35.8% for Iraq, 39.4% for the state of Palestine, 48% for Jordan and 52% for Mauretania. The percentage of literate male population is in the reported countries as twice as much higher than the female percentage of literate population both in urban and rural areas. The smallest gap has been registered in Mauretania with men with disabilities in rural areas at the level of 37.6% and women with disabilities - 67.5% (ESCWA, 2018:35-39).

The school attendance data available from eight out of eleven countries depict a slightly more constructive setting for the overall situation of persons with disabilities. For instance, in Oman, the gap – between persons aged 5–14 attending schools with disabilities – 92.7% and without disabilities – 40.3% – has been decreasing, whereas persons with disabilities continue to be underrepresented among students in all reported countries. This indicates a high drop-out rate and lower levels of educational attainment (see Table 4). For example, in Yemen solely 1.8% women aged 15–24 with disability attend school. At schools, children with disabilities have been stigmatized and isolated by their inmates without disabilities who remain insensitive to disability. In turn, teachers have lacked adequate training to address disabled children and persons' vulnerabilities and to desensitize those without disabilities. Furthermore, schools lack funding for persons with disabilities and due to lack of specialized support, children and persons with disabilities quit schools (ESCWA, 2018:35–39). The report considered a positive development the establishment of educational services for persons with disabilities by private sector companies with a growing involvement of respective governments.

Table 4: School attendance in the Arab Region[8]

	Persons with disabilities		Persons without disabilities	
Bahrein	**Ch** 5-14 years old	78.2	**Ch** 5-14 years old	97.0
	P 15-24 years old	31.3	**P** 15-24 years old	56.0
Egypt	**Ch** 6-14 years old	45.2	**Ch** 6-14 years old	94.2
	P 15-24 years old	13.6	**P** 15-24 years old	53.9
Iraq	**Ch** 6-14 years old	44.4	**Ch** 6-14 years old	89.3
	P 15-24 years old	16.0	**P** 15-24 years old	40.1
Mauretania	**Ch** 5-14 years old	37.1	**Ch** 5-14 years old	64.6
	P 15-24 years old	13.7	**P** 15-24 years old	27.2
Morocco	**Ch** 5-14 years old	57.9	**Ch** 5-14 years old	85.5
	P 15-24 years old	18.1	P 15-24 years old	44.6
Oman	**Ch** 5-14 years old	40.3	**Ch** 5-14 years old	92.7
	P 15-24 years old	17.8	**P** 15-24 years old	51.4
Palestine	**Ch** 5-14 years old	60.2	**Ch** 5-14 years old	90.5
	P 15-24 years old	27.8	**P** 15-24 years old	55.9
Yemen	**Ch** 5-14 years old	36.1	**Ch** 5-14 years old	66.8
	P 15-24 years old	18.2	**P** 15-24 years old	36.3

Source: ESCWA, 2018:38

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[8] Ch – children, P – persons.

The second report of the ECSWA "Strengthening Social Protection for Persons with Disabilities in the Arab region" might be read as complementary to its Disability report. A special focus on data collection on social protection related issues makes this report a constructive methodological work and gives background for further attempts to harmonize data collection in the region. The data on such a difficult to address matter are largely lacking and when are accessible, they are hard to interpret. Given that persons with disabilities are underrepresented among the whole population, which is covered by contributory health and social insurance, data concerning how and to what extent they are covered have displayed a wide range of inconsistent results. The targeting for social programmes and non-contributory heath programmes has been done through proxy means testing (PMT), however it turns out to be problematic in the cases when disability costs were not included once the poverty household level were calculated (ESCWA, 2017:25–28).

The social protection eligibility in the region depends on disability status and means of its determination. Usually, in the institutional domain of disability, it is defined in the region as working inability, which in fact discourages persons with disabilities to take up employment. In the reported countries of the Arab region, social protection is difficult to be applied for due to contradictory and confusing procedures and widespread barriers in the social and physical environment. Generally, social protection benefits are far too low to survive. Social insurance pillars are old-age insurance given once a person reaches a legal retirement age and disability pensions which are granted to those workers for whom disability incurs. For example in Egypt, workers must have at least three consecutive months or six months of contributions and their disability must commence during working period or a year after the employment is completed, and ten years of contributions is required if their disability started more than a year after the completion of the working contract (ESCWA, 2017:25–28).

Disability benefits in the region are calculated using the formula which entails the beneficiary contribution length and his or her level of salary. There is a minimum threshold of disability benefits to name available examples. The disability benefit in the United Arab Emirates is never lower than 10,000 dirhams (appx. $2,700) per month. In Morocco – disability scheme does not exceed 60% of the beneficiary's salary. In Yemen – a person enrolled in private sector has the right to work related disability – 100% of his highest monthly salary valid for his/her last employment, however a non-work related disability is granted to employee at the level of 50% of the average monthly wages.

In Mauretania, there is a constant attendance allowance which corresponds to 50% of the pension. In Algeria, full disability benefits are offered at the level of 80% of the insured person's wages and partial disability rights are available at the level of 60% of the pension. In Jordan old-age pensioners with disabilities are entitled for a dependent's supplement which amounts to 12% of the pension. In Saudi Arabia, the survivor pension for orphans, widows and widowers is inherited by sons of the insured person younger than 21–26 years old if they study, however if they are unable to work the pension is paid without age limit. In Tunisia, the disability benefits are paid for children up to 16–21 years old depending if they pursue studies (ESCWA, 2017:25–28).

For social insurance coverage in the region is limited, social assistance programmes attempt to fill this missing gap of social support. The social assistance is usually provided by governments or delivered directly to selected disabled groups on the grounds of members' contributions. At times, they are cash transfers (CT) or so-called in-kind support. The funding is provided through social assistance schemes. For instance, in Egypt a CT programme called *Karama* and *Takaful* was established in 2017, in Tunisia – National d'Aide aux Familles Nécessiteuses in 2011, in Sudan – Social Initiatives Programme, in Mauretania – Tekavoul and in the State of Palestine – the Palestinian National Cash Transfer Programme. Some CTs programmes require certain conditions be met, for example in Morocco children should continue mandatory education. In Algeria, la Pension Handicapée offers to persons with disabilities 4,000 dinars per month (appx.36$). In Jordan, the payment of disability care cash is exclusively for mentally ill members of the family.

Similar programmes, however, for children with multiple disabilities are reported in Mauretania in Iraq. In Morocco, apart from financial support, food aid is provided to persons with disabilities, while in Mauretania disabled persons have the right to be given land lots for housing. In Egypt and Algeria, disabled persons might use public transport at cheaper rates or free of charge.

Health care for persons with disability is another issue that brings into play another level of complications for disabled and their families. In general, certain forms of care are offered free of charge in terms of the right to charity which is granted to all citizens. Out of pocket spending is another type of access to health care. The provision of social health insurance is limited to formal sector workers and their dependents. In the region, usually persons with disabilities are entitled to free of charge health care; nonetheless this right has various ways of its realization. In Lebanon, it is sufficient to present the disability card to obtain free of charge health care. In Algeria, Jordan and Egypt children with disabilities must be enrolled for free social health schemes. In Sudan and in the state of Palestine, social protection schemes are available for all possible beneficiaries with disabilities. In addition, non-contributory health insurance might be also granted through separate schemes funded by general revenue as it is the case in Algeria and Morocco or Tunisia (ESCWA, 2017:25–28).

The productive age group between 15 and 64 is an important demographic population group contributing to the increase in each country's productivity coefficient. Therefore, the UN Commission for Social Development has strengthened the protection and monitoring of the human rights of persons with disabilities since 2000.

Stigmatization of persons with disabilities

Women and girls with disabilities continue to have much worse situations rather than boys and men with disabilities vis-à-vis cultural norms and habits throughout the region. They face an increased discrimination in marriage. A man is allowed to accept a girl who is mildly disabled; however, a woman should not accept a disabled man. In most instances, girls with disabilities are denied the right to love and their sexuality is not recognized by the society as they are not considered a full person – women (Nagata, 2003:10–17). Mentally ill girls continue to be a particularly stigmatized group in the Arab societies. The stigma hinders any attempt to access care and receive treatment. Despite the importance that the region had in the provision of care to mentally ill, the current human resources and attention remains insufficient. The Governmental support to the mentally ill is poor in most countries. Only three regional countries provide regular estimates on mental health expenditures, the state of Palestine, Qatar and Egypt. The psychiatrist versus population ratio is seen as another indication of metal health services – the highest proportion of specialist are reported in Bahrain, Qatar, Kuwait whereas in Iraq, Libya, Morocco, Sudan, Syria and Yemen persons with disabilities have less than 0.5 specialized doctor per 100,000 persons (Sewilam, Watson, Kassem et al., 2015:111–120).

A social otherness of disability in the Arab world leads to its stigmatization, similarly as in the Western culture. This phenomenon has been read in the region through the same lens of Goffman's publications, i.e. that the stigmatization is a serious societal problem. In the stigmatization, an individual has an attribute which is deeply discredited by the society of this individual; therefore this individual is rejected by society while stigma remains "a special kind of relationship between attribute and stereotype" (Goffman, 1963:2–4). The stigma in Western culture has been measured by various scales[9]. The so-called Stigma Devaluation Scale (SDS)

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[9] Social Distance Measure, Social Distance Scale, the Semantic Differential Scale, Mental Illness Scale, the Perceived Devaluation of Discrimination, Self-Stigma of Mental Illness Scale, Internalized Stigma of Mental Illness, Stigma Subscale of the Consumer Experiences of Stigma Questionnaire, Rejection Experiences Scale, Self-Reported Rejection Experiences Scale, Stigma Scale, Experiences of Discrimination Scale (Brohan, Slade, Clement et al., 2010:2–11).

has been translated into Arabic and adapted to the Arab region's socio-cultural background. Estimation of its consistency was used to assess its reliability and its construct validity was verified by confirmatory factor analysis. The first Arabic SDS was evaluated in samples by 164 family caregivers in Jordan (Dalky, 2012:72–82, in Sewilam, Watson, Kassem et al., 2015:113).

There are few accessible solid studies concerning stigmatization, particularly of mentally ill in the Arab societies. Eapen and Ghubash interviewed families, i.e. 325 parents in the United Arab Emirates whose children/child were/was mentally ill. It appeared that the parents were reluctant to admit their child suffered from being mentally ill, only 38% said that they would seek help from mental health specialists. Parents identified stigma as a key factor which hindered them from seeking professional help outside (Eapen, Ghubash, 2004:663–667).

Another study from Egypt by Coker equally stressed issues of rejection and stigmatization by the society of the mentally will; persons without disabilities referred to the disabled as "crazy", "mad", however respondents pointed at social support as primary source of treatment. The study said that 56.6% surveyed out of all 208 respondents admitted that they would not accept a mentally ill person as his or her family member (Coker, 2005:920–930). In turn, in Oman, Al-Adawi et al. explored whether social factors influence attitudes of non-disabled persons towards the mentally ill. The majority of respondents – members of community and medical students- preferred that facilities for psychiatric care should be located outside the communities (Al-Adawi, Dorvlo, Ismaily et al., 2002:305–317).

Stigma reduction and prevention activities have been performed in the Arab region, however, still there is a considerable lack of governmental programmes which would attempt to frame awareness about persons with disabilities. Although the Quran declares that "there is no blame on the blind, nor is there blame on the lame, nor is the blame on the sick (Al-Fath 48:17), still vast prejudices and stigmatization persist in the region. Some Islamic views suggest that some disabilities are related to unbalanced lifestyle or spiritual activities. Others are of opinion that Arab regional cultures do not accept disabilities, mental illness in particular and that an admission of a family member to a psychiatric hospital is a stigma for the whole family. Education of families to support their members affected by disease is still virtually non-existent. Traditional healers to which families turn at the earliest point, do not cooperate with professional specialized doctors and keep the treatment exclusively for themselves without suggesting any external or professional help. Social media, however, has commenced to be used more frequently and has become a harbinger for a change in awareness building to stop demonizing attributes of persons with disabilities and treat them as fully valued skilful humans (Dalky, 2012:114–117, in Sewilam, Watson, Kassem et al., 2015:113).

UN activities in Mexico in 2001 resulted in the adoption of a comprehensive and integral international convention on the protection and promotion of the rights and dignity of persons with disabilities, primarily to eliminate the consequences of stigmatization in order to strengthen the rights and dignity of persons with disabilities.

CONCLUSION

Social work participates in developing various paradigms, while performing various activities primarily at the reform, counselling, therapeutic, and educational levels. With regard to the social support of the disabled person in the Arab world, the reform paradigm may be observed. Under this paradigm, the Arab world can join European policy with its actions aimed at specific socio-political areas, which create space for the development of equal opportunities for people with disabilities, making this human rights dimension more important not only on a declarative but also on a practical level.

The phenomenon of disability in the Arab region, as elsewhere, remains a cross-sectoral issue. Its analysis requires the use of enhanced methodological approaches to data gathering and analysis

to effectively address the issue of disability and its vulnerabilities which should mostly include the following aspects: regional nuances of disability perceptions; types of disability; causes of disability; employment and economic activity of persons with disabilities; education of persons with disabilities; social protection and health care of persons with disabilities; and levels of stigmatizations of persons with disabilities. Such an approach should form a firm basis to devise trends and prospects for disability in the Arab region.

The work conducted by the ECSWA and its two reports issued in 2017 and 2018 have been of great value to the academic world, and both give the basis for further statistical and methodological work to harmonize the approaches towards analysis of the disability prospects in the Arab region. Both reports are unique, as for the first time they provide an objective and cautious overview of the disability situation in most countries of the region. They display relatively tangible data which have been obtained in the process of methodological analysis resorting to modern statistical tools, while taking into account socio-cultural nuances of the region, which at times were stumbling blocks for obtaining the desired and precise data for a thorough analysis.

An increased amount of academic research through the use of social media and its measurements should be further encouraged to enrich the state of analysis of the situation of persons with disabilities and positively attract attention to their daily problems and difficulties that they encounter in the Arab world. The measurements, in turn, should be attached to analysis concerning trends and prospects of disability in the Arab region.

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Preparing Young People for Leaving Children's Homes[1]

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Abstract
The OBJECTIVE is to understand and describe social work interventions in the situation of young people preparing to leave children's homes. THEORETICAL BASE: the article is based on participatory social work. METHODS: the methods used include a situational analysis of the data, explicitly presenting ontological and epistemological foundations, and providing tools to examine reality (Clarke, 2005). OUTCOMES: young people are being prepared to leave the children's homes throughout their stay in the institution. Another finding is the limitation of direct social work in the institution. SOCIAL WORK IMPLICATIONS: we believe that in order to adequately support young people in preparation for leaving the institution, it is necessary to involve social workers more in the work in children's homes, not only indirectly but also directly, while preparing young people for leaving. The participation of young people themselves should also be a source of support during their preparation for leaving.

Keywords
social work, social workers, pedagogical workers, children's homes, vulnerable children, transition

INTRODUCTION

Systemic shortcomings in the preparation of vulnerable young people and children in institutional care are reflected in various expert articles (see e.g. Běhounková, 2012; Frimpong-Manso, 2014; Terziev, Arabia, 2016; Huseynli, 2017). In the Czech Republic, transformation changes currently take place in care for vulnerable children and young people and their families. Preventing complications in the post-transition period and promoting successful adaptation to the natural social environment also seem problematic in expert articles (see e.g. Gottwaldová, 2006; Mendes, Moslehuddin, 2006; Schiff, 2006; Mendes, 2009; Courtney et al., 2011; Everson-Hock et al., 2011; Craine et al., 2014; Murray, Goddard, 2014; Bengtsson, Sjöblom, Öberg, 2018; Häggman-Laitila, Salokekkilä, Karki, 2018). There is a lack of systematic preparation for independence, which

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reflects the limits of institutional care (Běhounková, 2012). The aim of this study is to understand and describe social work interventions for young people preparing for leaving the children's homes (hereinafter referred to as CH).

## PARTICIPATIVE SOCIAL WORK WITH CHILDREN AND YOUNG PEOPLE

The idea of empowerment linked to organizations dealing with the rights of parents and children arose in the 1980s (Adams, 2008). The concept of empowerment only reached its peak in social work with the help of English-speaking authors in the 1990s (Gojová, 2016). According to Hart's (1992) Order of Participation, joint decision-making with children and youth is ranked in (the highest and best) 8th place, compared to where a child is manipulated, in 1st place, within which adults only pursue their own interests. Thompson's model (1998) examines the role of social workers in personal empowerment. The environment is the starting point for participation in social work and therefore it can respond flexibly to the needs of participants. Participation in proposing solutions leads to commitment and willingness to take responsibility for implementation (Tolman, Brydon-Miller, 2001). Establishing the trust between the client and the social worker (the participants) is the result of their cooperation (Schuman, Abramson, 2000). Participative methods include focus groups, which is an inexpensive, non-time-consuming and flexible technique, allowing investigation of the opinions on the history of such work and thought about the topic (Slocum, 2003). It is used for data triangulation and pre-research (Krueger, Casey, 2009). In our opinion, the barriers to the use of participation in social work include the unwillingness of social workers due to their concerns about job loss and status, focus on the speed of resolution, discrimination against clients, and structural imbalance of power between social workers and clients (Adams, 2008). Ngunjiri (1998) mentions destructive participation that goes against empowerment.

CHILDREN'S HOME AND INSTITUTIONAL CARE OF CHILDREN AND YOUNG PEOPLE

Children's homes are educational institutions under the Ministry of Education, Youth and Sports (hereinafter referred to as MEYS), which provide care of children and young people between the ages of 3 and 18 (in the case of extended institutional or protective education it may be until 19 years of age). When young people continuously prepare for their future careers, it is possible for them to stay in an institution up to the age of 26, and an extension contract must be drawn up between the institution and them. The CH family type takes care of a maximum of 8 children in one family group, which is the maximum number of educational groups (flats) in one CH pursuant to Act 109/2002 Coll., on the Performance of Institutional Care or Protective Care in School Facilities and on Preventive Educational Care in School Facilities and on Amendments to other Acts (hereinafter referred to as the Act). In the past 14 years, there has been a tendency to reduce such childcare in CH. The number of children in CH is still over four thousand children per school year – see Graphs 1 and 2.

Graph 1: Trend in the number of children living in children's homes since school year of 2005/6

Development of the number of children living CH
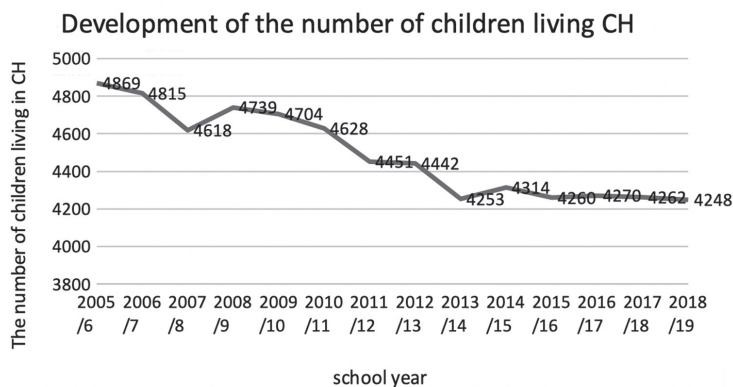
Source: MEYS, 2019, adapted by author

Graph 2: The number of CH in the Czech Republic since the school year 2005/6

The number of CH in the Czech Republic
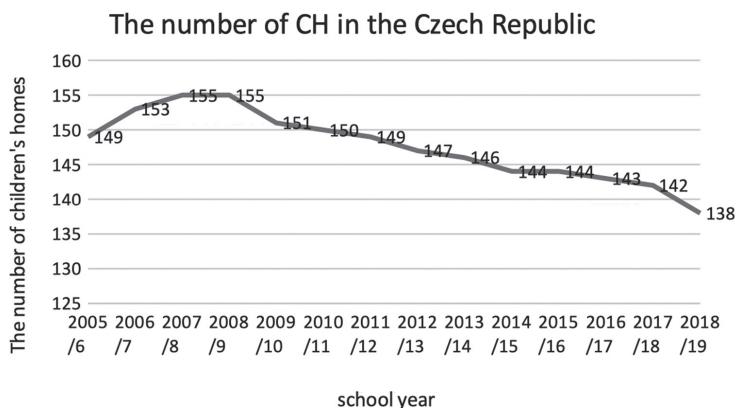
Source: MEYS, 2019, adapted by author

Children are mainly taken care of by pedagogical and social workers. In the CH family type, there are children and young people with different age groups, and they are mostly treated by permanent carers. CH performs social and educational functions.

Institutional care in the Czech Republic is part of care provided by a certain type of residential facilities, i.e. CH (Vávrova, Vaculíková, Kalenda, 2016). CH in the Czech Republic is mostly governed by MEYS. Institutional care can be imposed before or after the imposition of protective education (Vávrová, Vaculíková, Kalenda, 2016). More generally, the purpose of institutional care is not to protect society (as opposed to the protection care pursuant to Act No. 359/1999 Coll., on Social and Legal Protection of Children). Grounds for imposing institutional care of the child include such serious threats to or disturbances of his/her upbringing and care that they endanger the interests of the child, or reasons for which parents cannot or do not want to take care of their child and ensure his/her rights and care (Section 971 (1), Act No. 89/2012 Coll., 2015). The court deciding on placing children or young people in institutional care primarily considers their interests and the possibility of their placing in alternative family care or family-like

care. The court takes into account the physical, mental and health abilities of the child and his/her intellect and maturity (Vávrová, Vaculíková, Kalenda, 2016). The fundamental rights of all children and young people, including the right to education, must be secured in CH institutional schools. In addition to boarding, accommodation and clothing, the school institutional facilities pay for children the necessary costs of education, transport to school, teaching supplies and aids, leisure-time activities, pocket money, while also providing personal gifts. They provide health care, leisure, recreation, and transportation to persons responsible for the education and material assistance of the minors when leaving the institution. The needs of a person of the given age and his/her harmonious development must be taken into account. Children from socially dysfunctional families do not provide enough opportunities to develop the competencies that would make their functioning in social interactions easier, and therefore they are referred to as an at -risk/endangered group (Opravilová, Vojtová, 2009). The stay of children or young people in CH can be terminated due to their achieving the legal age, by a court decision, or by moving to another institution (Procházková, 2004). In the Czech Republic, there is the Act No. 359/1999 Coll., on Social and Legal Protection of Children, which governs the social and legal protection of children and minors (CHSLP) in the spirit of international conventions of the Declaration of the Rights of the Child (UN, 1959) and the Convention on the Rights of the Child (1989), and in accordance with the legislation in force.

Pursuant to Act No. 359/1999 Coll., a new paradigm appears. Pursuant to Act No. 359, Section 1 (1), 1999 Coll., social and legal protection of children shall be understood to include, among others, efforts aimed at (c) *reviving deteriorated functions of a family* and (d) *providing a substitute family environment to a child who cannot be brought up in his or her own family permanently or temporarily*. Since 1 January 2013, social work in the CSLPA system has a new objective – children returning to their biological parents. If the child is placed in institutional care (pursuant to Act No. 359/1999 Coll.), within the framework of social and legal protection of children, the child's interest and well-being is of primary importance, as well as the protection of parenthood and family and the mutual rights of parents and children to parental upbringing and care. Therefore, the Municipal Authority of the Municipality with Extended Powers pursuant to Act No. 359, Section 12 (2), 1999 Coll. has an obligation to provide assistance to parents, especially in cooperation with social security authorities, regional branches of the Labour Office and other state and other authorities organizing support for family relationships, addressing life and social situations, including the material means of the family, so as to allow the child to return to the family. For this purpose, the Municipal Authority of the Municipality with Extended Powers provides the parents with expert counseling assistance.

An individual plan of child protection (created pursuant to Act No. 359/1999 Coll., on Social and Legal Protection of Children, which governs the CHSLP system in the Czech Republic) is compiled by a social curator. Support and intervention of social work is provided to children and young people by two institutions – the Child Social-Legal Protection Authority (hereinafter referred to as CSLPA) and CH. Before placing children or young people in CH, CSLPA works with their families. It gives basic information about children or young people to a social worker in CH. CSLPA workers are obliged to visit /contact children and young people in CH at least every three months (Act No. 359/1999 Coll., on Social and Legal Protection of Children). Social work with vulnerable children and young people in CH consists primarily of protecting the interests and rights of the children and young person and is specific in that it deals with the performance of indirect activities – counselling, administration and social assistance (Kasanová, 2008). Another activity of social workers in CH is cooperation with CSLPA workers (Act No. 359/1999 Coll., on Social and Legal Protection of Children). Act No. 108/2006 Coll., on Social Services, regulates the requirements for the performance of the profession of social worker in CH institutions. The social worker must be professionally and physically fit to perform the profession, without criminal record, and must have full legal capacity. According to the Act, the head of the CH

is obliged to inform the relevant municipal authority of the municipality with extended powers at least 6 months before the event and to enable these young people's meetings with the social curator.

TRANSITION FROM SUBSTITUTE INSTITUTIONAL CARE TO THE NATURAL SOCIAL ENVIRONMENT

Transition from an institution can be divided into internal and external activities. As far as possible, depending on age and maturity, the children themselves actively participate in ensuring the operation of CH, thus starting their preparation as a continuous and all-day process (Gottwaldová, 2006). Preparing young people to leave because of age includes strengthening social competences, skills and abilities that help young people cope with the demands of society (Belz, Siegrist, 2001). Categorization and core skills are determined by key competences that are primarily reflected in two educational documents of the Czech Republic: a) Strategy of the Czech Republic's Educational Policy until 2020, and b) Framework Educational Programmes (hereinafter referred to as FEPs). FEPs were implemented by Act no. 561/2004 Coll., on Pre-School, Primary, Secondary, Tertiary Professional and Other Education (NIE, 2019), and define the key competencies as universal competencies. Young people, once they have reached the age of majority, have an option of requesting the abolition of institutional care. Upon termination of the stay for the above reasons, the young person, in accordance with his/her real needs and in accordance with the criteria laid down in the institution's internal rules, shall be provided with in-kind assistance, a lump sum or, in cooperation with CSLPA, counselling in obtaining employment and housing. In difficult life situations, even after leaving the institution, young people can be provided with counselling.

Act No. 359/1999 Coll., Section 10, on Social and Legal Protection of Children, pays attention to defining areas for assessing the situation of the child and the family, organizing case conferences and individual planning. The basic method of social work is the creation of the so-called IPOD, i.e. Individual Plan of Child Protection, which municipal offices with extended authority have been obliged to create since January 2013. It is made during the first month when a child is registered in the municipal office with extended authority. The purpose of the IPOD is to adopt measures that allow the child to remain in the family. It focuses on the causes of threats to the child, sets out measures to ensure child protection, a timetable for implementing measures in cooperation with the parents or other persons responsible for upbringing, with the child and professionals involved in solving the problem, and provides assistance to the family. It is regularly updated and revised if institutional care is imposed or in similar situations. Pursuant to Section 1 (4), school facilities work with social-legal child protection authorities in accordance with an individual child protection plan.

PROBLEMS OF YOUNG PEOPLE PREPARING TO LEAVE THE INSTITUTION AND PROBLEMS RELATING TO TRANSITION

According to Matoušek (1999), problems and difficulties in institutional care of children and young people include the following: relationships between the carer and the client, loss of privacy, bullying, insufficiently individualized approach, constant adaptation to the regime of the institution, constant adaptation to others, relationship and existential vacuum after leaving CH, sporadic exploration of the world outside the institution, learned patterns, behaviour applicable only within the institution, an institution like a world in itself, and life being more structured, predictable and simpler than in a natural social environment. Helus (2004) includes their life/environment being stereotyped, 'submarine disease', decreased tolerance, increased mental vulnerability, and risk and behavioural impulsiveness. Langmeier, Krejčířová (2006) mention emotional flatness and lability, undifferentiated feelings, behavioural disorders, difficulties in establishing relationships, etc. Sekera (2008) mentions an institutional syndrome,

Langmeier, Matějček (2011) a deprivation syndrome, whereas Langmeier, Matějček (1968), Langmeier, Krejčířová (2006), Gottwaldová et al. (2006), Kovařík (2008), and Běhounková (2012) mention a psychic (institutional) deprivation, artificial conditions, lack of support for education and leisure activities outside institutional facilities. These can cause a low level of social integration of the child into the community outside the facility, and feelings of danger due to lack of orientation in social networks and external world relations as the child is accustomed to his/her usual ways of living inside the facility and their opportunities to explore the world independently outside that environment are sporadic, and their learned patterns of behaviour are often not applicable beyond the institutional walls. Žufníček et al. (2012) mentions the absent male role in boys, and Vávrová et al. (2015) talks about institutionalization of individuals. Transition complications may arise in connection with parting with carers and friends, accommodation and returning to family (Schiff, 2006). Research shows the risks of people leaving institutional care (Bengtsson, Sjöblom, Öberg, 2018). Transition problems include crime, depression and suicide of young people (Hjern, Vinnerljung, Lindblad, 2004; Mendes, Moslehuddin, 2006; Berlin et al., 2011; Lumos, 2017; Häggman-Laitila, Salokekkilä, Karki, 2018), risk of pregnancy in adolescence (Mendes, Moslehuddin, 2006; Mendes, 2009; Everson-Hock et al., 2011; Craine et al., 2014; Murray, Goddard, 2014; Häggman-Laitila, Salokekkilä, Karki, 2018), inability to find permanent employment or unemployment (Courtney, Dworsky, 2006; Gottwaldová, 2006), increased risk of becoming involved in crime (Vinnerljung, Sallnäs, 2008), security, housing quality and instability (Courtney et al., 2011), homelessness and financial difficulties, which means that ultimately the state must help (Gottwaldová, 2006; Wade, Dixon, 2006; Courtney et al., 2011). Young people growing up in CH have problems with communication and relationships with people from the natural social environment and in contact with authorities. They often, in addition, have few financial skills. This deficit of social and material security is often solved by young people by means of taking disadvantageous loans and credits. They get into debt traps and often try to deal with them by committing economic crime (Gottwaldová, 2006). Young people leaving institutional care are at risk of prostitution, drug addiction, problems in the area of social integration, family formation and maintaining partnership, or lack of education (Hjern, Vinnerljung, Lindblad, 2004; Lumos, 2017; Bengtsson, Sjöblom, Öberg, 2018). They have problems at school (Berlin, Vinnerljung, Hjern, 2011), high early school leaving rates (Okpych, 2012) and in general lack the basic knowledge in many areas of life (Zeira, Benbenishty, 2011).

In 2017, only 66 young people (less than 2%) from CH were studying at university (Myšková et al., 2015; Kuchař, 2016; Statistical Yearbook of Education, 2017; Vlach, 2017). Research findings by Vlach (2017) show that timely placement helps create a relationship with a carer, that the biological family can have a negative effect on school success and relationship with the carer, that the potential of freedom as an educational tool is insufficiently used by carers, and that there is no purposeful motivation of the clients.

According to Myšková et al. (2015), the following characteristics appear in the school preparation of children and young people from institutional care: learning is based on the independence of children and young people, the carer is available if necessary, children or young people must be self-initiating, children prepare for school in large groups, and most often they are immediately coming from school without a rest.

On the other hand, young people are afraid of the transition, while at the same time they are looking forward to it. They are concerned about problems in finance, housing, loss of ties and the availability of social support (Bengtsson, Sjöblom, Öberg, 2018). They view their leaving the institutional care as a positive thing, stating experience of maturity, liberation, and independence. Young people perceive the departure phase of the transition in a dichotomy - (difficult and complicated versus positive and advantageous (Anghel, 2011).

RESEARCH METHODOLOGY

The aim of the research was to understand and describe social work interventions in the preparation of young people from CH to leave the institutions for the 'natural' social environment outside the institution. The main research question was: How does social work intervention function in the preparation for the departure of young people from CH institutions into the natural social environment? (From the perspective of social workers.) A partial research question was: How do CH workers view their interventions in the transition period? Regarding the research objective and the research question, we have chosen a qualitative research strategy**.** Individual interviews and focus group interviews with key CH workers were used in the research. We used some elements (cartographic procedures) of situational analysis according to Adel Clarke (2005) in our research and data analysis. Situation analysis is, according to Adele Clarke (2005:23), a package of theory and method.

Research group selection, researcher's entry into the field and contact with informants
The chosen technique of the informant selection was **a** deliberate, purposive selection through CH institutions. The selection criteria were: being a CH worker (social worker, carer, and working as key CH workers) for 3 years or more, having experience in the last 3 years with a young person preparing to leave the CH institution, having worked with at least 3 young people who left this institution due to achieving the age of majority, and consent to being included in the research.
The research was focused on CH in the Zlín Region, which we will not specify because of the anonymity of the participants. It should guarantee the credibility and authenticity of the data obtained, while following the ethical rules of research. We managed to involve two different CHs in the focus group, and two other informants with whom individual interviews were conducted – see Table 1 for details.

Table 1: Socio-demographic characteristics of informants

CH	Sex	Age	Education	Occupation (occupation/years)	Position of carer/ social worker (number of years)	Number of years in a key position	Number of children that have left CH/children prepared for transition		
							Total thus far	In past 3 years	Currently
1.	Woman	53	University	nurse/1 carer/13 head/18	31	X	12	X	X
	Woman	59	Special education	kindergarten teacher/20 carer in CH/20	20	20	approx. 5	1	X
	Woman	48	University – Bachelor's degree – Special pedagogy	nurse carer in CH/16	16	16	5	3	X
	Woman	38	University – Social pedagogy	shop assistant/5 carer – night/2 – day/13	13	13	5	3	X
	Woman	50	Grammar school Pedagogy – 2 years Special pedagogy – 1 year Social pedagogy – 6 semesters at University – Bachelor's degree	CH /cca 13	cca 30	13	3	0	X
2.	Woman	52	University	elementary school/1+13 CH/12 kindergarten/1 CH/4	32	19	25	5	15
	Man	55	Secondary school	CH/35	35	18	24	3	3
	Woman	36	University – social pedagogy	special elementary school/6 CH/10	10	10	approx. 30	15	5
	Woman	29	University – Bachelor's degree	CH – carer/1	1	1	X	X	4
	Woman	51	Secondary school	shop assistant/8 CH/18	15	15	approx. 30	approx. 18	approx. 8
	Woman	37	University	social worker in CH/4 assistant for social services /2	4	4	approx. 10	cca 4	cca 8
	Woman	59	University	group leader /8 carer in CH/8 deputy-head of CH/4 head of CH/19	8	31	42	5	8
3.	Woman	30	University	carer in CH – SW/7 CSLPA – SW/9 months	8/8	2	approx. 15	0	0
4.	Man	39	University	carer/8 prison warden/2 clerk/2 manager/6	8	10	7	5	3

Source: Author's own design

The first focus group included five informants, the second one seven. The third and fourth individual interviews were based on the recommendation of another informant. In our work we focused on the situation of young people preparing to leave CH, and on what the transition from an institution into the natural social environment includes and what determines it. We collected data from informants who gave their consent to interviews. The participants and their human dignity were respected, and the informants were treated humanely, considerately, without manipulation and abuse, while taking into account the role of the researcher (Guillemin, Gillam, 2004). From Silverman's (2013) principles of ethics the following ones were used in the research: a) informed consent, b) confidentiality, and c) trust. The informants were given an opportunity to terminate the interview at any time without giving any reason. The basic ethical principles of qualitative research were followed during the research (Guillemin, Gillam, 2004; Silverman, 2013).

DATA PROCESSING AND ANALYSIS

Overall, the research material had 60 A4 pages (two focus groups of 5 and 7 informants and 2 individual interviews), which we then analysed using situational analysis procedures. The research included 14 informants, when all focus groups and one individual interview were conducted face-to-face, and the last individual interview was conducted by telephone. All interviews were recorded with a Dictaphone. In the case of the focus group, interviews were also recorded by a video camera. These audio/video recordings were then converted verbatim into a written form. We broke the transcribed text into meaning units (sentence, word sequence) and assigned codes to them. During the analytical work we repeatedly returned to the individual codes, comparing their accuracy in relation to the relevant meaning unit. Based on the work with the research material we identified all the key elements related to the preparation of young people for leaving CH. Using these elements, we created a so-called 'messy map'. A situational analysis consists of three main methodological (cartographical) tools, which are: (1) situational maps, (2) social world and arena maps, and (3) position maps. The messy map is a tool which presents all the key elements present in a particular situation. Its purpose as one of the situational maps is to a) provide a graphical output of the analysis, b) holistically capture the elements present in the situation and their relationships, c) help focus further research or monitor progress in research, and d) help make the situation and its complexity always visible and clear. Messy maps are created by transferring the key elements created by open coding to the map (Kalenda, 2016).

Subsequently, we sorted the 147 elements of the messy map into 14 key categories. We followed the recommendations of Clarke (2005) and performed an analysis in several interrelated steps. We did the following with the verbatim transcribed material:

- Material transcription and extensive open coding.
- Identification of key components (called elements) related to the situation of young people leaving CH for the natural social environment.
- Creating a messy map of the situation of transition, all elements included in preparation for the departure of young people from CH, as stated by the staff of these institutions.
- Categorizing the components of the map into key categories, creating a structured map, highlighting areas of our increased research interest.
- Interpretation and discussion of results.

ANALYSIS INTERPRETATION

It is not within the scope of the text to present a complete data analysis. Therefore, we present a partial, the most important of our findings.

Agenda of social worker in CH / social work and agenda of social worker in CH
Elements: (1) social worker = silent officer, (2) multi-service assistance (from the institution), (3) CSLPA – it works with family in order to improve the situation and to return the child to the family, (4) documentation, (5) feedback system.
Direct quotes (number of element): N: *Yeah, yeah. That, or simply asking how they are, they want to have a chat* [leaving young people] [491]. (5)
Analysis and findings: As we conclude on the basis of individual elements, the data identified a social worker as a Social Pedagogue who does not interfere with the operation and events and is engaged in the area of administration. They maintain a feedback system where young people always know that they can address CH workers and CH workers always learn from other children what is wrong. There is a feedback between CH workers and project workers and between young people and project workers when they correct the results of young people's work on projects (they go through various forms and together correct mistakes). CH staff maintain communication with young people's employers so that they can redress something if necessary. They maintain contacts even if the CH worker is no longer an employee or the child has already left the CH. Multi-services mean that social workers help young people arrange for disability payments before leaving CH if they have educational or mental health problems. Social workers also hand over young people to a court-appointed guardian, work with them, arrange for the administration, monitor the contact with their parents, arrange for vacations when the family wants to take the child with them, and send applications to CSLPA. CSLPA keeps applications and provides results, manages the money the young persons have saved during their stay in CH (this can also be done by the CH head), informs young people about the amount of funds and reports the fact of leaving CH to the labour office, the parents, the court, the social workers, the curators and the school. CSLPA also looks for housing. Social workers from the authorities for social and legal protection of children are in charge of work with the family trying to improve the situation so that the children can return to their families.

Role of young people
Elements: (1) young people's attitudes, (2) simple (formal) actions, (3) versatile mature personality, (4) how CH workers view the young people leaving CH, (5) passive or active approach to preparation, (6) narrow relationship to a key worker /most important for young people is their key worker.
Analysis and findings: The category of role of young people underpins that the children's homes workers see the importance of the approach of young people, on which the process of successful transition depends. A positive change may be achieved through a "positive"/right/open approach of young people. During the preparation process this involves simple (formal) tasks as well as the behaviour during the preparation for the transition (passive or active approach to preparation). An important role is played by the child's relationship to the key worker closest to him/her. Young people should leave CH as mature people.

Intervening conditions: obstacles (during the preparation)
Elements: (1) foster care and temporary foster care; for profit: returning children to institutional care/education, (2) failure of young people, (3) continuous process of transition, (4) financial deficiency dealt with by legal and illegal ways, (5) family taking money from the child, (6) adoration/idealization of biological parents, (7) late placement, (8) dysfunctional family, (9) for leaving CH: lack of powers, (10) uncontrollable, (11) unpaid, (12) missing help system, (13) school not-/cooperating and non-/cooperation with school, (14) limited financial budget, (15) lack of professional assistance, (16) poor media image, (17) young people's focus on freedom, (18) absence of the duty to have a curator, (19) pathological influence of friends, (20) insufficient internal influence, (21) adopting dysfunctional family models, (22) only duties, (23) high demands, (24) malfunctioning communication between CH and CSLPA, (25) system fragmentation.

Direct quotes (number of element): N: *And those parents, of course: they picked up my kid….it is not my fault. I can find a job … he/she won't find a job* [321]. (8)

I [323]: *It is difficult to fight with windmills, ministries for everything, CSLPAs, parents. Everywhere I look we have to fight constantly for the best interests of the child, but we have no proper tools, we have only obligations and duties, and no rights. The parent has, all the rights so e.g. when [the child] needs to have his/her tooth pulled out, the parent must sign it. If we arrange for it without the parents' signature, they will complain and we will be pestered, controlled, bullied for "how we dared to do it without the parents' consent". Such a parent often lies, drinks, and such a situation could last for a week, and we would then be held responsible, which is another aspect of our work. Such a parent grabs the phone, or even goes to a charity; nowadays there are such services. They have phones and can be calling for an hour, or they complain to the Czech School Inspectorate that their "aunt"-carer- raised her voice and they didn't like it, and we have 4 inspectors being here for 5 days. It's very unpleasant.* (9)

F: *For example, I* [355] *have some experience with CH that employs a psychologist and it was a great help to carers because they communicated with one another, dealt with the kids individually, solved individual problems, and it was priceless. But the region authorities do not listen to us because the money comes from the MEYS. So, let there be general financing for all CH. For example, in the XY region, a councilor pushed it, got it within the project finance and it is really something amazing.* (14)

N: *And again, we are seen as the worst ones, as someone who walks in the street catching kids or something – that's terrible, the institution, that's terrible* [321]. (16)

F: *You are a professional, and you should not be moved by emotions, but they are … yeah, and everyone copes with it on their own* [439]. *You will come here with great euphoria and enthusiasm, but the children will twist you in such a way that you want to slam the door. But you cannot do it because you know that if you leave, it won't help them and so you keep helping them* [440]. *But again, as my colleague says, even the sun peeks through the clouds finally, it is such an unsure success. Once we are up, once down (hmm)* [441]. *The job is very mentally exhausting, when someone new comes to us and wants to work here, so I promise them no holidays, twelve-hour shifts, etc.* [442] *They must have the same education as primary or secondary school teachers and do not have the same salary. They have to obtain and pay for a certificate of mental fitness, which teachers do not need* [443]. *But the teachers are often with the children longer. On the other hand, the night carer does not need the certificate because the night carers are not considered to be carers, which is also interesting* [444]. (23)

N: *(…) there is no order in that because we have several ministries, and it fails, whether it is the Ministry of Labour and Social Affairs, the Ministry of Education, or the Ministry of Health* [296]. (25)

Analysis and findings: The category includes a wide range of factors that influence the preparation of young people for departure and work, as they have nowhere to return. The family taking money from children, the persisting adoration and idealization of biological parents who may have been promising – even for a long time – redress and return to family life to the children who trust them. Children can be easily influenced, and young people fail after leaving CH and have no one to rely on or where to return. They solve financial problems in illegal ways. They focus on freedom. There are cases of foster parents and temporary care providers who take children without preparation and then they return them to institutional care – the **fragmentation of the system**.

CHs lack responsibilities and have many obligations; children are placed there late, and it cannot be redressed anymore. There is a lack of system assistance, limited financial budget, missing/dysfunctional family remediation, shorter review periods, a lack of obligation to have a probation officer while staying in CH. CH workers are constrained and cannot intervene. They know neither the day nor the hour when children/young people arrive or leave, or for how long they will be in CH, when young people decide to leave, how they will study, etc. Nevertheless, in this situation the future of young people must be decided upon and choices must be made – it is like fighting windmills, where CH workers are constantly supervised by external institutions (CSLPA, CSI), more than schools, but they do not feel that dysfunctional families have a high level of supervision or that there would be such a pressure on them to remedy. CH workers have no rights, only

obligations, lack of professional assistance, their efforts are diverging, school/non-cooperating and non-cooperation with school, dysfunctional between CH and CSLPA, pathological influence of friends, high demands of occupation, factors that cannot be influenced, poor media image, and re-adoption of non-functional family models.

Children's homes workers' role
Elements: (1) motivation, (2) socialization, (3) saving, money, (4) managing, (5) interconnecting, (6) planning, (7) leading, encouraging, supervising, providing an opportunity to move forward (level), supervising, (8) trying to help every child, (9) looking for/arranging housing, (10) social capital of CH workers, (11) driving/accompanying children, (12) accompanying professions, small tasks, (13) help, (14) preparation differentiated by age, (15) preparation is (not) different, (16) individual + mental, physical abilities, health, (17) child's attitude, (18) preparation is comprehensive, (19) action and control, (20) starting at a very young age, (21) continuity and automation, (22) education and training, (23) acclimatization, (24) regime, duties, system.
Direct quotes (number of element): C: *(…) or if we see in the child a need for independence, [38] otherwise he/she will have it worse, then we have to motivate first. Then we have to motivate in the first place, because the child does not want to leave the group* [39]. (1)
Analysis and findings: CH workers intervene into the researched situation by their actions and behaviour.
They save money for children and young people, make sure they can get a mortgage, learn how to manage, plan, try to help all children indiscriminately, look for and secure housing. They invest their social capital, drive children to schools and clubs, and accompany them. They help and take care of complex preparation. They teach children and young people to get used to a regime, duties, system, and help them acclimatize. They help with school preparation and education, with the continuity and incorporation of the things that young people need to learn. Boys may be inclined to follow male role models in CH, while girls discuss more things with CH female workers. Workers approach each child according to their mental, physical abilities and health. The preparation is differentiated by age and individual peculiarities (physical, mental, and health ones). Young people can move from CH to a separate apartment within the process of becoming independent. If the CH workers have the opportunity, they start to prepare children at a very young age (its early stages begin with the arrival at CH). The decisive factor is the attitude of young people and their own experience. The CH workers are among the accompanying professions, where the CH social worker provides the child with a card with the most important telephone numbers, basic contacts, as well as contacts to organizations, institutions, labour offices, charities, lawyers, free assistance of social workers and curators, which forms a kind of *map of supporting resources*. The role of CH staff consists in minor but important tasks (informing, paying rent in advance, etc.).

Discursive construction of individuals and collective human participants
Elements: (1) key carers/workers, (2) other educators, (3) heads, (4) social workers, (5) curators, (6) school/class teachers, (7) CSLPAs, (8) other pedagogical workers, (9) individuality, (10) young people themselves, (11) other individuals.
Direct quotes (number of element): L: *(…) I would like to say that it isn't just the pedagogical staff of the CH, it's all of the staff, because the child has to learn to communicate with everyone. (…) The carer is there to monitor and correct the behaviour* [362]. (4)
Analysis and findings: The category of discursive construction of individuals and collective human participants includes as well other individuals who co-create the researched situation despite not being pedagogical or social workers of CH. These are economists/accountants, cooks, and any other CH workers who influence children and with whom they form relationships, other professionals who influence children with their powers or professional qualifications: specialist

doctors, psychologists, drug prevention workers or organizations, or people who have had the same experience: partners and friends and their families from the natural social environment, CH leavers, or, at the government level, the ombudsman, town council people, and prosecutors.

Assistance
Elements: (1) own experience, (2) psychologists, (3) functional family, (4) the third party aid, (5) self-support.
Analysis and findings: In the institutional environment of CH the assistance may be provided by both psychologists and the family, if it is functional and if the child can return there after leaving CH, and by a third party. This includes assistance with the property management, allocation of a bedsitter through the city authorities, or help from a psychologist.

Vocational training
Elements: (1) practical training, temporary jobs, earning money, (2) getting a job, work habits for work experience, (3) to finish at least elementary school/vocational training, (4) behaviour, (5) leisure/free time activities.
Direct quotes (number of element): G: *So, we always try to make them finish some school, vocational training, secondary school, to make them get on well as long as possible* [163]. (3)
Analysis and findings: The category includes how the participants view the importance of education (they want young people to complete at least elementary school) and vocational training (emphasis on work experience, temporary jobs, earning money, getting a job, work habits, behaviour, leisure activities) for the future life of young people preparing to leave CH. They try to convey the value of education, explaining that this is their basic expectation.

Accommodation
Elements: (1) shelter, (2) "half-way" houses, (3) staying with friends, (4) dormitory, (5) council flat, (6) one's own flat, (7) staying with family/relatives, (8) staying with partners and their families, (9) extended stay in CH, (10) standalone/preparatory flat, a starter flat (apartment), (11) minor mothers with children can have their own room, (12) boys – choose to live independently, (13) somewhere else.
Direct quotes (number of elements): J: *There are more offers in this country, e.g. "halfway houses"* [400a], *but they are under a certain regime there again. Still, they can live in hostels, last year one guy managed to get an apartment in XXX. When they ask for it in time, it is possible* [400b]. (2)
Analysis and findings: Young people can also be offered an employment with accommodation… other options are e.g. living in subleases, in someone else's apartment. Girls are more likely to go to a partner – or to a partner and his family. Boys often choose to live independently. CH prefer different types of accommodation, or the second chance (the girl living with her partner and his family), to a greater threat of returning to a dysfunctional family. CH workers do not view temporary types of accommodation as suitable, because young people there are still under supervision, control and shared responsibility of professional workers (i.e. institutions). They mention asylum houses, "halfway" houses, starting apartments, and independent housing in CH.

Preparation
Elements: (1) financial literacy, (2) specific partner competencies, (3) job search competencies, (4) prevention, (5) CH = a safety net for the children, (6) we strive for a family environment, (7) contact, (8) individual wishes of the CH workers, (9) functionality.
Direct quotes (number of element): L: *I see CH as a safety net for the children* [275]. (5)
Analysis and findings: According to CH workers, CH is a "safety net" for children to learn to be functional. It is an institution that takes care of young people. Young people are always looked after by one person to whom the child is accustomed and turns to. The worker is appointed

before the child's arrival. It is a place capable to prepare a minor mother and her child to enter the nursery school, and the education includes sex information. CH staff ensure that young people are educated in finances, which is a very problematic area. CH staff prepare a budget for them, how much they should invest and where, and they prepare them repeatedly. CH staff believe that it is important to be able to manage money for being successful. The wishes of CH workers are that young people should be responsible when they leave, that they should become ordinary citizens and start functional families. They make it possible for them to move forward and develop positively, while teaching them responsibilities in contrast to the time when the young people were growing on their own. They believe in individual work with young people: attitude, preparation, cooperation, problems – work habits and their own will to leave.

Legislation and documents
Elements: (1) overload of workers with documents, (2) the need to amend legislation, (3) establishing procedures for preparation for transition in CH.
Direct quotes (number of element): M: [700] *(…) Indeed, in this case less means more. It gives more freedom to adjust the preparation for leaving that home individually.* (1)
Analysis and findings: CH staff point out legislation and documents – overload of workers with documents, the need to amend legislation, establishing procedures for preparation for transition in CH.

FINAL DISCUSSION AND RECOMMENDATIONS

The results of the research have shown that the preparation of young people for leaving children's homes takes place throughout their stay in the institution, and the impact of direct social work in the institution is limited to administrative tasks, so the preparation begins with placement in the institution and has consequences even after their leaving. The act of leaving was often mentioned in connection with young people who decide to do so immediately, which seems problematic in situations where they have not yet finished their school attendance. In the period of preparation, the CH workers emphasized mainly studies and vocational training, projects preparing young people to leave, independent or preparatory flats in CH, financial literacy, accommodation after leaving, independence, self-sufficiency of young people, and support and assistance of CH workers in these areas. CH workers try to dissuade young people from those forms of housing which they believe unfit for developing independence. CH workers therefore often impose on young people a far greater degree of responsibility than their peers have in normal families. CH workers consider certain forms of accommodation (shelters, "half-way" houses, etc.) unfit for developing independence, as in such institutions their staff interfere with the life of young people, and thus the factor of releasing oneself from rules and obligations is missing there. Concerns have also been expressed about the return of young people to dysfunctional families (adopting dysfunctional behaviour patterns and absent emotional ties; in this and some other research findings – the benefits of early placement in CH, the negative impact of biological families on life, young people's independence and relationships with carers – our research findings match those of Vlach (2017)). In addition to vocational training, the topic for CH staff is financial literacy, which is also dealt with in projects. According to CH workers, young people have great difficulties in this area. In activities requiring dexterity around the house such as repairs, clothing maintenance, etc. young people from CH have an advantage over children from normal families. The projects are viewed by workers as useful experience for children, but young people do not learn the necessary knowledge/skills from the projects, or they cannot apply them. Workers agree that young people's own approach is essential for a successful transition. The most problematic seems to be the influence of dysfunctional families, the adoption of dysfunctional models by young people, easily influenced by their families and peers, late placement in CH, dysfunctional family

remediation, and lack of obligation for young people to have a curator throughout their stay in CH. A wide range of pedagogical and non-pedagogical staff, including all persons working in CH, is involved in preparing young people for leaving CH; see Picture 1 – the arena of preparation of young people for leaving CH with an emphasis on discursive constructions of individuals and collective human participants.

Figure 1: The arena of preparation of young people for leaving CH
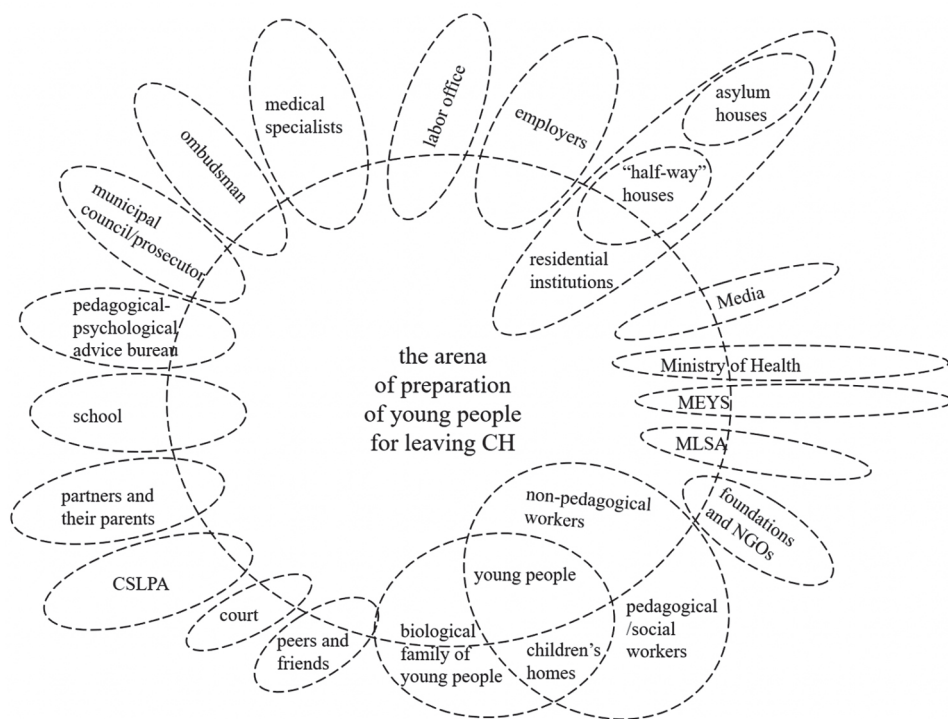
Source: Author's own design

The role of young people themselves is crucial, especially their approach, which influences the success of the transition. Positive changes can be achieved with that. The role of CH workers and the agenda of social workers in CH were also discussed in the interpretation of the analysis. As a rule, social work is mainly limited to indirect administrative activities.

The aim of this paper was to understand and describe the situation of young people preparing for leaving CH, and how social work interventions function in the preparation of young people for leaving CH to the natural social environment. After leaving CH, young people often fail despite the efforts of CH and CSLPA workers. There is not enough research into this (see Běhounková, 2012). We believe that the successful transition of young people and facilitating the transition of young people into the natural social environment would help to provide more scope for social work in the CH institution, which is today mostly limited to administrative activities. A reinforced area of social work in CH could provide specialized and affordable support and assistance to vulnerable and socially disadvantaged young people in transition. At the same time, we are convinced that a higher level of participation by young people in preparing for their departure could be a positive thing during the pre-transition period and could facilitate transition and improve the outcome of the transition (i.e. to contribute to the elimination of the adverse effects experienced by young

people after leaving CH). Young people growing up in CH have a difficult start in life, which is why we believe that social work interventions have the potential to assist in eliminating the differences between the institutional and the normal social environments. We can say that support and assistance in its current form is still insufficient as evidenced by various research findings.

As for how to address the issue of young people returning to dysfunctional families, we have the following suggestions:

Primary prevention: This entails empowering young people and their parents and preventing them from social exclusion. It should be centred on two main key activities, namely:

a) **Research** on young people returning to dysfunctional families to establish the baseline and context for the whole country and on young people and their families cooperating with probation officers for young adult people,

b) Obligatory **cooperation with probation officers for** young **adult people** while preparing to leave CH, especially in the period of staying in CH on a voluntary basis. The social work with probation officers for young adult people can then continue after the young people leave the institutional environment with the benefit of establishing a relationship with the "new" probation officer in the young adult person's life.

Secondary prevention: This entails identification of those at risk of social exclusion and supporting them to get out of the situation and facilitate their reintegration into society and minimise chances of social exclusion. It is crucial that as part of empowerment each young adult who has left the institutional care and is without support from a functional family should start with available resources at the community level and with any support that can help the empowerment process. We need to ensure social housing to those young people who leave institutional care.

Tertiary interventions: This entails offering services as well as a long-term support aimed at young people returning to the natural social environment.

Last but not least, a practical recommendation is **continued social research** in the field of social work interventions in the situation of preparation of young people from CH to leave the institutional environment for the natural social environment and/or young people returning to dysfunctional families.

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Emerging Models of Social Work Accompanying Housing, or How Czech Social Workers Treat Homelessness in Families with Children, while Having No Legal Support[1]

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Abstract
OBJECTIVES: The aim of the article is to describe emerging social work models accompanying housing that are implemented in work with endangered children and families, among others. THEORETICAL BASE: Czech social work which supports housing makes use of two approaches to reintegrate people without a shelter. These are Housing Ready and Housing First. METHODS: Clarke's situational analysis was used as a research method and a way of data analysis; it surveyed the whole and non-reduced situation. Qualitative data were gained from interviews with 29 social workers and analysed by way of chosen steps. OUTCOMES: 5 dominant social work models that accompany housing were identified. Following the criterion of *Relation to housing stock*, these were (1) the protective model, (2) the model promoting autonomy, and (3) the model based on the extent to which the social worker accepts the demands of the client and the environment. Following the criterion of *Understanding housing as a right or readiness assessment*, these were (4) the model specialised in the competence in housing and (5) the comprehensive model. SOCIAL WORK IMPLICATIONS: Getting to know Czech social work models accompanying housing can help us when formulating (the lack of) legal norms, mainly with regard to the endangered target group of families with children.

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Keywords
social work models, homeless families with children, social housing

INTRODUCTION

Although the Czech Republic (hereinafter CZE) is not among the poorest countries (Prokop, 2020), it is one of the countries where the poverty of a family afflicts children most. According to Prokop, unstable and inadequate housing causing frequent school changing affects a child's school success, which is a crucial determinant of his/her future status. Moreover, the absence of home affects ontological certainty that is vital for every child (see Vávrová, Gojová, Glumbíková, 2019). It is therefore clear that children living in non-standard/unstable forms of housing are disadvantaged at the very beginning of their life journey due to the low standard of housing and the related capital (Bourdieu, 1998). The absence of legislative support makes the situation even worse. In CZE, (1) there is currently no law on social housing; (2) municipal housing is missing or is unavailable; (3) common housing is unavailable due to high amounts of caution money. The situation is difficult both for families in housing need and for social workers who have only limited tools and scope of activity. Despite the above-mentioned structural problems, social workers make time to support families with children in housing need, where they implement available social work approaches and methods in compliance with legislation. In relation to the above-mentioned, a gradual increase in the involvement of social workers in citizens' initiatives[4] and projects[5] aimed at promoting social work in social housing has been noticed since 2015.

The aim of the submitted study is to present and describe the existing (from 2016 to 2019) models of social work with families in housing need that are based on data from the accounts of social workers. The resulting models reflect day-to-day interventions made against the backdrop of two philosophical streams (see below) and applied social work methods and techniques.

In order to understand the submitted models, it is necessary to explain that models are a reduced reflection of social reality, which they structure and simplify in an attempt to illustrate and explain its functioning in a broader sociocultural context. According to Slavík et al. (2013), models have a heuristic function and help us see social reality in a new way. Understanding reality is always a kind of interpretation and it is models, tools of redescription that help us find new reinterpretation of reality. The construction of models helps us view social work practice implemented within "social housing". We capture the current state of social reality by systemization/classification of social work approaches in a given situation on which programmes, approaches and changes in law can be based.

HOMELESSNESS: REFLECTION OF THE SITUATION IN THE CZE

According to the Platform for Social Housing, there were 83 thousand people, of which 20 thousand were children in housing need in the CZE in 2018. They live in shelters, asylum homes or flats without basic equipment (Klusáček, 2019). A Median research (2017) states that altogether 37% of children live in households with housing problems in our country.

The increasing number of homeless people is problematic not only in our country but worldwide; e.g., The U. S. Conference of Mayors' Report on Hunger and Homelessness (2016) states that families make 35.5% of all homeless people. Both Czech (e.g. Median, 2017; Vávrová, Gojová, Glumbíková, 2019) and foreign (e.g. Hinton, Cassel, 2013; Chow, Mistry, Melchor, 2015) studies and research prove the negative influence of homelessness on children. Two strategic documents

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[4] See for instance: https://socialnibydleni.org/

[5] See: http://www.socialnibydleni.mpsv.cz/cs/

treat homelessness and housing shortage in the CZE: The Concept of Preventing and Tackling Homelessness Issues in the CZE until 2020 (MLSA, 2013) and Social Housing Concept of the CZE 2015–2025 (MLSA, 2015).

The Concept of Preventing and Tackling Homelessness Issues (hereinafter the Concept) promotes a "comprehensive model of work with homeless people" that includes: a) prevention of housing loss and inclusion of homeless people in standard housing, b) complementing the services (including housing that is supported by social work), c) enlarging current social work forms (model Housing Ready) and promoting the concept of Housing First. The core of the Concept (MLSA, 2013:14) is supported housing that is based on "the client's regular contact with a social worker" – the support must be flexible enough in terms of intensity, duration, form and level of cooperation and control. The worker visits the client in greater and greater intervals that finally cease. The aim of the support is to teach the client to live on her/his own.

In compliance with the Social Housing Concept (MLSA, 2015:79), social work "has a crucial role in social housing"; the document then makes a list of relevant tools.

Social work with families in housing need has only a limited set of tools due to the existence of no act on social housing. The situation of families with children is so serious that practical social work develops programmes and concepts (even without a legal background) that offer supported housing and are mostly implemented by municipalities or social service providers by way of field programmes, social activation services, and social rehabilitation (MLSA, 2015). The programmes are called housing with an accompanying social programme, housing training, or – frequently – "social housing".[6]

DOMINANT APPROACHES IN SOCIAL WORK WITH HOMELESS FAMILIES WITH CHILDREN IN THE CZE

There are currently two approaches in social work with homeless people. An approach that is relatively well-established in work with various target groups – Housing Ready and an emerging approach – Housing First.

(1) **Housing Ready** is a model of reintegrating homeless people into housing that is sometimes called merged. It supposes that clients have to achieve or strengthen their competence in housing. The two-way permeability (rise, descent) is supposed to motivate clients. (Lux, Mikeszová, Sunega, 2010; Mikesz, Lux, 2013)

The evaluation of the Housing Ready model was undertaken by Kocman and Klepal (2016). They found out that the model helps a rather small group of people to counterbalance their disadvantage in the housing market. Success in housing thus cannot be ascribed to the clients' motivation or competence. They also pointed out that although the model aims at preparing clients for independent living, people with higher needs stay at lower levels of housing, missing relevant support. In their previous articles, Kocman and Klepal (2014a) stated that the Housing Ready model was effective in clients who had never lost competence in housing but who had lost a flat for other reasons. They (2014b:72) considered the clients' stay in the merged model to be "waiting for a suitable flat", not preparation for independent living. The latest findings of the Supreme Audit Office that paid attention to the implementation of the merged housing in Litvínov show that the model is actually not merged in this town but keeps clients in housing need in segregated housing (SAO, 2018).

(2) **Housing First** states that housing is first, and only afterwards is it possible to solve other problems. Housing is understood as a right. Emphasis is put on clients, their needs and the process of their recovery (Tsemberis, 2010). Busch-Geertsema (2013), who assessed the success rate of

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[6] For the purposes of this article, we call them "social housing" although we are aware of the fact that not all of the described activities fulfill its definition.

the model, concluded that 87.9% of the programme users were able to sustain long-term rental housing if they were given adequate support. Social work is voluntary in this model; allocation of an apartment is not conditional upon it; support is offered actively. Work with clients aims at their recovery and their social situation and its actors are considered. Variability of support, community relations and individual responsibility for one's own life (not for a problem) are – according to Lindovská (2016) – typical of this social work model. Housing First thus "opens a structural perspective of understanding homelessness and exclusion and offers individualized support aimed at the tenants' strengths", according to Lindovská (2016:156).

Ripka, Černá, Kubala et al. (2018) made an impact assessment of the Rapid Re-Housing project in CZE that was based on the Housing First model. The study made use of a randomized controlled trial. The main result of the project was that 96% of the randomly selected families in housing need were able – with adequate support – to maintain a town rental flat for one year, and the intervention improved their quality of life in several areas. Their research proved that there is no need of selection at the point of joining the programme because the selection does not influence the end of homelessness in families.

RESEARCH METHODOLOGY

The aim of the research was (1) to *survey approaches, ways and methods of social work with the target group of families excluded from stable housing* and (2) to *compile and describe models of social work accompanying housing*. We tried to answer the main research question within the *qualitative research*: *What social work models are effective in the current situation of social housing in the CZE with regard to families with children?* The choice of informants was deliberate and was made through institutional social service providers working with families at risk of social exclusion due to the loss of housing (namely social activation services for families with children, providers of social rehabilitation and field programs who, in addition to the social services, provide their clients with housing or arrange it). There were two selection criteria: (1) more than a year of experience with families in housing need, (2) consent to participate in the research.

The data were gained by means of using *interview techniques in (focus) groups* and *expert interviews*. The main data collection technique were four focus groups aimed at content, and one group interview (undertaken in 2017)[7], each taking from 56 to 112 minutes. The results were subsequently reflected in 3 expert interviews (completed from 2017 to 2019). The analysis included data from altogether 26 social workers (16 women, 10 men) and 3 experts (social workers from a NGO, a government organization and public administration) treating families in housing need.

With regard to the goals and the qualitative strategy, we can state that the submitted research has an exploratory character and, in accordance with Švaříček (2007), that it aims at bringing as many pieces of information about the models of social work accompanying housing as possible. Its core is to uncover how people understand, experience, interpret and construct social reality (see e.g. Hendl, 2016). This approach is based on inductive and/or abductive thinking and on the fact that data acquisition, processing, analysis and interpretation are not separate processes/research phases. Considering the fact that the interview was semi-structured, its format, consisting of seven topics, was pre-prepared: (1) grounds of the "social housing" service; (2) "social housing" flats; (3) service users; (4) user support; (5) termination of cooperation with users; (6) service

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[7] Nowadays, there is a pilot social housing system within the MLSA project "Social Housing – Methodological and Informational Support for Social Agenda" in 16 municipalities of the CZE. Its authors were not included in the research sample with regard to the research date. The analyzed data were partly collected within the project Rozvoj služeb pro osoby bez domova pod střechou (Development of Services for Homeless People under a Roof), reg. No. CZ.03.2.63/0.0/99_041/0002242, financed from OPZ: 2 Sociální začleňování a boj s chudobou (OPE 2: Social Inclusion and Fighting Poverty).

evaluation; and (7) technical and administrative support. The issues were based on a preliminary model of situational social work in the field of social housing in the CZE. Categories 3–6 played a crucial role in mapping the very social work models accompanying housing. However, to capture the whole situation in which the models work, it is vital to consider also material and technical conditions (points 2 and 7) and prevailing discourses (point 1) in accordance with the situational analysis procedures. Fixed data[8] from the interviews were transcribed verbatim as authenticity was essential – the participants' statements were not reformulated. The research material consisted of 176 A4 sheets of paper. We analysed it by means of selected *situational analysis* techniques; the situational analysis is – thanks to its innovative analytical character – considered to belong to the second generation of the Grounded theory (Morse et al., 2009).

In accordance with the situational theory, we think that it is impossible to survey only isolated behaviour, but it is crucial to analyse the whole non-reduced situation that contributes to such behaviour (Clarke, 2003; Kalenda, 2016a; Kalenda, 2016b). This means that the situation per se becomes a fundamental unit of analysis (Clarke, 2014). Thus, in our research, we do not focus solely on the models of social work accompanying housing but also on the determining factors, on the context of the social reality under survey. In accordance with Clarke (2005), we made the analysis in interwoven steps: (1) we performed open coding in the material transcribed verbatim, on the basis of which we identified all key elements related to social work accompanying housing; (2) on the basis of these elements, we created so-called messy maps of the situation of social work accompanying housing; (3) we arranged the 80 elements into 15 folders of ordered maps.

RESEARCH RESULTS

We present partial research results in the following text, treating only selected components that are of fundamental importance for making models of social work accompanying housing. First, we introduce the "social housing" types that we encountered in practice. Second, we describe the follow-up models of social work accompanying housing. On the grounds of theoretical data saturation, we considered relevant elements of the (1) material and (2) discourse component when making the types of "social housing" – these were taken into account when setting the two criteria (see Table 1).

Table 1: "Social housing" types

CRITERION	"SOCIAL HOUSING" TYPE	
Relation to the housing stock (material component)	Merged type	Separate type
	Internally separate type	
Housing as a right or readiness assessment (discourse component)	Housing Ready	Housing First

It should be noted that the types do not appear in their pure form in real life. Their boundaries are vague and do overlap.

The research results clearly show that the social work models correspond with the "social housing" types while relevant, or consequent, approaches based on social work methods and techniques are implemented.

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[8] There was a video recording from the focus groups and an audio recording from the group interview; both were deleted after the transcription and follow-up analysis in compliance with the ethical principles.

Models of social work accompanying housing, with regard to the criterion *Relation to the housing stock*

With regard to the housing stock, there were two basic types of "social housing":

> **1. The merged type of "social housing"** – the social service provider, or the social work provider, is the lessor or the owner of housing stock where "social housing" is implemented.
>
> **2. The separate type of "social housing"** – social service provision, or social work provision, is independent on "social housing" (the social service provider is neither the owner, nor the lessor of housing stock where "social housing" is implemented).

An internally separate type of "social housing" is somewhere between the two types. The social service provider is the owner or the lessor of the housing stock but the flat management agenda is separated from social work by means of internal distribution of powers.

Decisive factors in the merged type of "social housing"

The social service provider is the lessor or the owner of the housing stock; the social worker can (unwittingly) take responsibility for some duties related to the management of the stock.

Under this external pressure, the worker tends to control the client's life situation; this can be motivated by an effort to keep the client in the flat, to fulfil the obligations or to minimize the risks related to the property of the organization or to the entrusted. Such an approach may result from offloading the responsibility for the housing costs from the client on to the lessor; the uncovered housing expenses threaten the organization itself or even the individual worker.

"The properties are ours or we rent them, so we are responsible for them…" (FG1/11)[9].

"… people from outside come and say: well, you just go there and check if he paid the rent because simply he pays the rent to you, so it's clear that you want him to pay…" (FG1/8).

"The organization is responsible for paying the rent for the housing stock, for keeping the house… and for doing the social work at the same time … so it's a sort of conflict… I think this is wrong..." (FG1/9). *"If five people don't pay... I will simply go home without money…"* (FG1/9).

To mitigate this risk, the social service providers can implement a greater extent of control over clients (explained below) or set not-entirely-up-to-standard housing conditions – artificially increase payments for "social housing" in order to make so-called reserve fund to cover losses. *"It is not that they* (the clients of social housing) *have a lower rent. They paradoxically have it a couple of crowns higher… the same door, the same flat… there is some fund that simply covers the losses…"* (FG2/3).

Such practice contradicts the principle of affordability of social housing. It should be noted, however, that it does not result from any commercial interests in the social service providers but from an effort to minimize the risks that both parties (the apartment users and the owners) put on them. The social service providers choose from a variety of strategies in response to this pressure – besides the aforementioned control, monitoring or supervision over the clients, there is the increase in payments, too. The pressure is typical of situations when a third – independent – party owns the flats and the social service providers rent them. Some organizations want to own the apartments in order to minimize the risks; the proprietorship enables them to set a pricing policy that would not bring the risk of debts. The conflict of roles and interests in this type is problematic to some social workers. *"We perceive it as a problem… that we are simply a) the supporter but also b) the one that just comes with 'hey, you don't pay, you go, you haven't done this… so now I have to give you a notice'… It is a sort of split for us…"* (FG1/8).

Besides the risks and conflicts of interest, the informants spoke of several benefits of the merged type for the implementation of social work. One of them is independence on conditions and rules

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[9] Authentic statements of the focus group participants (in italics) are followed by the number of the focus group and the participant (in brackets) – (FGx/x).

set by the owners, which is appreciated mainly in situations when the system of flats-for-social-housing provision is not regulated, and the rules and procedures that would protect the users, owners or providers are not set.

One of the advantages of the merged type is the possibility of a relatively quick reaction of workers to the client's problems, especially those related to the housing costs. *"It is a bit easier for us as the flats are ours, so when the accountant tells me 'He hasn't paid, go find out what happened', … the problem is noticed immediately…"* (FG1/8).

The merged type, according to the informants, may be suitable for clients in permanent need of housing support. *"Possibly modified in favour of people with a mental disease…"* (FG4/2).

The social service providers rent the housing stock mostly when they find no other way to solve their clients' situation. The owners' motivation is often related to their commercial interests; they take advantage of offloading the risks to the third parties.

"We actually take care of his property in a better way than he could do at the moment…" (FG4/2). *"A kind of a bumper…"* (FG4/1). *"If he doesn't pay the rent, we do not have it paid… he can destroy something, the client damages some part, so it goes after us…"* (FG4/2). *"We somehow try to deal the risk so that the system doesn't collapse, so that they don't tell us that they better offer the flat to another organization, not to us …"* (FG4/1).

Decisive factors in the separate type of "social housing"

The separate type of "social housing" seems to be more convenient in terms of the goals of social work. According to the informants, it brings neither a conflict of roles and interests in social workers, nor distortion of the clients' needs.

"We have it strictly separated... I can afford to be the good one, not the bad one... the supporting one, not the controlling one... I don't have to be the one who ruins the relationship, saying 'you don't pay again'... I don't have the role… that is a huge advantage for social work…" (FG4/2). *"Field programmes get to flats run by someone else and work with those people… it is much more free…"* (FG1/9). *"We do not substitute a real estate agency but support our clients…"* (FG4/2).

Social workers do not collect the clients' housing-related debts. Their collaboration is not conditioned by a stay in a certain apartment and vice versa, housing is not conditioned by social work.

"When we support a person who lives in rental housing and it's only about the support…, so at the moment that the person has an agreement with a third party, he doesn't want to cooperate with me, so I cancel the contract on social service provision and it is his responsibility to stay in the apartment – the client can continue when his contract is terminated…" (FG1/5).

We found out that for strict separation of social work and the real estate agenda, it is not necessary that the housing provider is an independent entity because these activities can be separated internally within the rules of an organization. This internally separate type combines positives of both approaches.

"We have these things separated, we have learned that services are something different and my colleagues definitely do not approve anything in the service… no payment schedules and things like that… they help them prepare them or give them recommendations ... We have internal rules… and then it makes sense…" (FG4/1).

Although the separate type seems to be more convenient in terms of the goals of social work, it brings risks that increase control over clients. Although the landlord is an independent entity and the client signs a contract with him, the social service provider may be asked for intervention by the landlord. The worker takes measures beyond the originally intended and agreed limits of mutual cooperation in order to maintain the housing for the client. The landlord can "make use" of social workers to promote his own interests. According to the experts, it is desirable that workers start to negotiate with the landlord/lessor only on the grounds of the client's commission. *"If the client wants that… if his order is simply "come and help me contact my landlord"… if we get involved without that, so we deny the whole principle of the service…"* (FG1/5).

Another risk related to the separate type of "social housing" is the low influence of the social service provider on the owner/lessor of the flat. In most cases, the social service providers accept conditions set by the owners/lessors and are content with them (due to the lack of a "social housing" system). Only rarely did we notice a different strategy – we speak of an attempt to negotiate the terms in order to satisfy all parties. This practice features a type that we explain later and that focuses not primarily on the client in housing need but on the whole context of his situation.

"We strive for some long-term cooperation…, not for leaving anyone in the lurch or for doing anything in the interest of the client and against anyone else, we don't have it set, we have collective, collaborative models; we think that if we think it up together with the landlord and the client, so simply together, then the owner earns what he needs because he had some expenses with that, the client has money enough to pay and he will not borrow it…" (FG4/1).

The abovementioned interpretation and analysis of factors influencing social work in the separate and merged type show that both types influence the extent of control over the client (see Figure 1).

Figure 1: Understanding the extent of control and monitoring by the social worker with regard to the relation of the social service provider and the housing stock
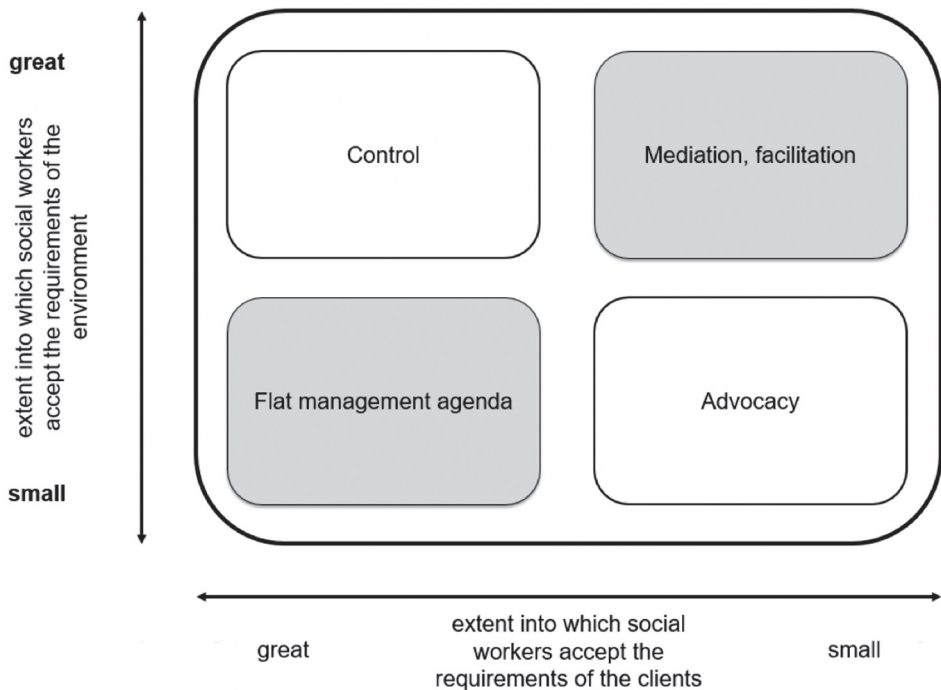
On the basis of the abovementioned analysis, the approaches of social work accompanying housing can be perceived as more **protective in the merged model** and more **promoting autonomy in the separate model**. The decisive factor is the social worker's understanding of the client's competence in housing and its influence on assessing the level of support. There are two basic approaches in workers, namely the approach reflecting the need of "stronger protection" of the client (for various reasons) and the approach promoting the client's autonomy.[10]

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[10] Autonomy is understood as a right of choice, making own life decisions (Hartl, Hartlová, 2000).

Protective model of social work accompanying housing

The choice of the protective approach is typical of social workers assuming responsibility for the clients' deeds; it evinces strong features of control and taking risks instead of the client. According to our research, it may result from three basic motives in workers that can strengthen or cross each other in real life. Although the models do not appear in their pure form in real life, we use this schematization for the purposes of this article. It is obvious that the motivation is related to the models of separate and merged "social housing", that is to outer conditions of social work.

(1) The social workers may apply a greater extent of control and unrequested or unjustified monitoring of the clients in an attempt to keep them in the flat *(both in the separate and the merged type)* because they know that due to the system of sanctions, the high threshold for social housing, the lack of rules for it, the shortage of convenient housing stock, and discrimination in a housing market (with regard to families or single parents with children, ethnic minorities, persons with mental disabilities, etc.), this may be their last chance to reach stable and affordable housing. Let us mention several illustrative examples from the research participants:

"If you work with them somewhere else, you know that the motivation is not strong enough to move on ... so you end the cooperation... I think you cannot do it here... we just keep bringing our topic... to maintain the housing… it should not be terminated..." (FG3/3). *"It comes off badly* (if people lose their flat – authors' note)*… it is difficult for the workers because they decide mostly not only about an individual but also about his children… so they try to postpone it as much as possible…"* (FG1/9).

The worker's belief that stable housing is a condictio sine qua non for success in other areas of the client's life, is strongly motivating.

(2) In the *merged type*, the worker is under severe pressure resulting from his employer's obligations towards the entrusted housing stock. *"The risks are ours to a great extent because we are responsible for the apartment at the moment... this is the most difficult situation because nobody actually covers the costs... we really run the risk, the client's risk…"* (FG4/2). *"We cannot afford this because we have to pay for it…"* (FG1/9).

It should be added that the so-called merged type is viewed as (a) a voluntary decision, (b) a "necessary" decision made by organizations. In the former case, ownership or lease are viewed as convenient in terms of setting rules with regard to the target group or the goals of the organization. The latter case is a response to the sphere of homelessness and to the lack of legal grounds of the "social housing" system and suggestion of potential solutions. *"The housing stock is sold up, what they could sell, they sold and they have no flats, let alone any social ones…"* (FG4/1).

(3) In the *separate type*, the extent of control and supervision over clients is exacted by the owner of the housing stock. The social service providers accept the situation because, according to their experience, this is the only way to solve the situation of people in housing need. Their steps are therefore exacted by the lack of legislation on housing policy and established practice in "social housing". The use of social services is considered rather involuntary and inevitable. Clients who refuse cooperation have to leave the flat. *"So the person leaves… also the flat… and that's the problem and that's the disadvantage… because at that moment he leaves the flat…"* (FG1/8).

In this context, some social service providers may have "normalization tendencies" and a paternalistic approach that lead to recurrent "client's failures" without consequences. *"When she was still with us, we watched her back every day… but now that we let her go, she just had a lot of visitors… when she was about to pay the postal orders, she had no money ... so now we put it right with her and she will go back to the service... she simply does not want to, she wants the so-called freedom that simply she cannot respect the house order we have, no goals of the support… she can no longer bear the consequences…"* (FG1/10).

It is typical of the described approach that although the cooperation with the social worker is terminated, the apartment user keeps in touch with the social service provider, that is with the so-called social housing administrator or caretaker. The manager of the housing stock is a person who can initiate the resumption of social work with the flat user.

"We found out such a fact that the apartment was not heated at all... we found that out and the lady with her kids without heating, so we had to solve it, which was already wrong ... she went as if into an

advanced level of housing, but we gave her a chance, but I feel, that she is still unable to be completely independent, so she will go back to service…" (FG1/10).

According to the abovementioned informant, the resumption of social work is started on the basis of assessing the client's competence in housing by the provider. This is what we consider a paternalistic tendency of making decisions on behalf of the user. Another control increasing factor appears due to an unhealthy and competitive climate in social service providers. It manifests itself by "factitious" intensive cooperation with the client and "keeping" him in the service longer than necessary. *"We notice rivals, non-profits that woo away the clients… we're sometimes simply pushed by this system to have clients… the organization needs hours…"* (FG1/3).

The risk that the participants discussed in relation to this model of work was the client's dependence on the service that resulted from assuming responsibility for the clients' behaviour by the social worker/organization. *"This is called dependence on service; I always get shocked when someone comes and: 'Imagine, the man told me that he feels great here'…"* (FG1/8). *"Maybe something more about the dependence on service… it's actually a wrong social work method that we still make the person unable, … we keep saying that he can't do it, he can't do it yet…"* (FG1/9).

A situation that can be perceived as dependency may sometimes result from services that are not intended for the particular clients, but the clients do not find any better service. People in permanent need due to their health state, who refuse medical inspection and services related to a certain type of diagnosis because they consider it stigmatizing, serve as a good example.

"And then there are people who depend on us in the respect that they should have a diagnosis but they don't have any because they don't want to see a doctor… and the person will never work without the service, so either we force him to go to sheltered housing and go for the expert assessment, and we totally destroy him…" (FG1/8).

Model of social work accompanying housing that promotes autonomy

The model of social work promoting autonomy is, according to the research participants, more convenient for the so-called ***separate model of social housing***. The model emphasizes the client's right to make decisions. Social work is individual and based on the client's strengths and requests.

"We know nothing more than the client himself in most cases... we don't take responsibility for the client or his housing…" (FG4/2). *"On the client's strengths, so we search for strengths…"* (FG4/2). *"Everyone has some chances and skills…"* (FG1/2). *"I think there's some chance, if the client wants… if his order is: 'Come and help me to contact the lessor'… but it's always about the client's contract…"* (FG1/5).

The informants emphasized the clients' needs, their autonomy in setting the goals of cooperation, and responsibility for their own deeds, while they allowed the clients to fail without being morally judged.

"Quality is what we care for… that it is based on continuous mapping the needs and sources, searching for topical goals, and we are not afraid of changing them, the goals, if they turn not to be up to date…" (FG4/2). *"Of course, the client has a right to make decisions and mistakes … he has a right to go his own way regardless of our opinion…"* (FG4/2). *"It is his business if he stays in the flat, if he pays or how he behaves…"* (FG1/5). *"We stay with him without any moral judgment…"* (FG4/2). *"I had to learn not to control… take the risk that clients just decide differently than I think they should… it's good to let people go their way, let them grow up and be more a helping partner when they slip away than someone who just puts them somewhere they don't want to be... it doesn't work anyway, you just get exhausted.... when we push the clients somewhere they don't want to be, it's both a huge effort and frustration that the clients run away at first opportunity… it is his responsibility, how he decides…"* (FG4/1).

A relationship based on mutual trust is a priority in the model of social work promoting autonomy. Free decisions about social work interventions prove to be more effective. It is clients who ask for a service, shape it and assume full responsibility for their own decisions. The social worker keeps the role of an accompanying person who does not judge but supports the client even in case of failure.

"The relationship is crucial for us… that we create something together… and if I have to check his apartment every week, it is not relevant for me in fact…" (FG4/2). *"I don't care how often the client tidies up… what's important is that it simply does not stink, that neighbours don't complain… some colleagues from other services need to bring their needs there…"* (FG4/1).

As already mentioned, the models do not appear in a pure form in real life. Even the protective and the promoting autonomy model blend, which is – inter alia – influenced by external factors (see the three motives). Such a mixture and mainly the circumstances of its origin are viewed as problematic by the research participants. *"We are two in one… a) a supporter, but also b) the one that simply comes with 'hey, you don't pay, you go'… It is a sort of split for us…'* (FG1/8). *"Two approaches clash there, that help and control…"* (FG1/5).

Model of social work accompanying housing in relation to the extent to which social workers accept the requirements of the client and the environment

Having analysed the data, we concluded that the distinction between the protective and the promoting autonomy model may be too simplistic. That is why we incorporated another aspect into the design of the social work models: **the extent to which social workers accept and incorporate the requirements of their clients and of the environment.**[11]

We created **four basic positions** that workers maintain in relation to the acceptance and incorporation of the requirements of the client and environment into social work. These are: (1) flat management agenda, (2) control, (3) advocacy, (4) mediation and facilitation.

Figure 2: Model of social work accompanying housing in relation to the extent to which social workers accept the requirements of the client and the environment

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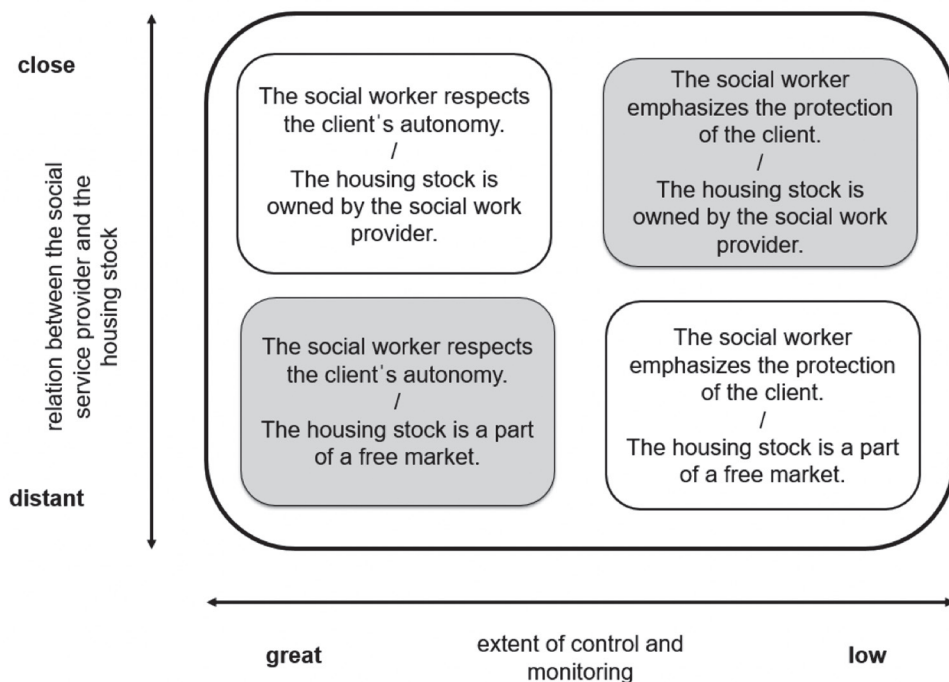
[11] Requirements of the environment are, for instance, requirements of the owners, municipalities and neighbours.

Let us comment on the positions:

(1) The flat management agenda is typical of the merged model; the agenda is often carried out by social workers who subsequently have only a limited space for social work with their clients. Administrative and organizational matters connected with housing are emphasised. This model often blends with the following approach but is less focused on the requirements of the environment.

(2) The control over/supervision of the client and monitoring how he fulfils his duties may be guided by various motives. The requirements of the environment (e.g., companies, owners of the housing stock) are the centre of attention and the client is "guided" to meet them. Social work approaches can be shaped for example by the market or interest groups instead of the clients' needs.

(3) Advocacy emphasizes the clients' requirements and needs. From the worker's perspective, their fulfilment is endangered by the environment (e.g. by the landlord). The environment is expected to change its practice, social policy or attitudes in the clients' favour.

"Social workers provide something like advocacy in relation to the landlord, especially when the landlord increases the rent and the client cannot make it with 'social benefits' intended for housing and has to pay the increased rent from his living… This is very complicated but sometimes we can keep the rent at a reasonable level…" (FG1/11).

(4) Mediation and facilitation consider requirements of both the client and the environment to be essential. The context of the client's life situation is in the centre of attention in the course of social work intervention. Let us mention the participants' statements:

"Supporting the network of neighbours … supporting the relation with the flat owner..." (FG4/1). *"There can be a tripartite meeting with the owner… when we explain the issue of a mental disease and at the same we offer support… the owner wants to have the flat occupied and wants to have a regular income… we bring that stabilizing element there… examples of good practice to show what we pulled off and those people often understand it..."* (FG4/2). *"When the contract passes to the client in the case of the merged system and he gets independent housing… so we still act there as guarantors on the basis of some tripartite agreement for some more time... guarantors for the client because we help him solve things and also guarantors for the owner that if something happens, we somehow figure it out…"* (FG4/1).

The relation between the social work provider and the housing stock shapes the social work provision. The **merged type** is characterized by the need to **manage the housing stock** (this agenda is often carried out by social workers and it can become a significant part of their work) and **increased control** over the tenants'/clients' obligations. On the other hand, the **separate type** allows workers to focus more on the clients' interests **(advocacy)** and his contact with the environment **(mediation and facilitation)**.

Models of social work accompanying housing, in relation to the criterion *Understanding housing as a right or readiness assessment*

Another criterion that establishes the diversity of attitudes of social workers is understanding housing as a right or a goal for which the client must prove readiness. Such a dichotomy corresponds with the currently implemented types of housing support (see above) – Housing Ready and Housing First. According to Kocman and Klepal (2014b), the Housing Ready type is typical of control, social counselling, and house management.

Our informants, especially those whose organizations apply the so-called merged model, reported on their work in a similar way. The house management or the real estate activities (the flat administration agenda) especially distracts them from social work.

"When social housing is provided from one company number, including the sub-tenancy, so the social workers… feel responsible for the people paying properly… they are dragged in the real estate problems… condition of the flat… and the less time they can actually devote to the problems in the family…" (FG2/3). *"Those workers collect rent, when I take it like this, and besides that they should do the social service…"* (FG2/1).

Housing First is based on the idea that it is crucial to solve the issue of housing and only then work on other topics. *"If they just don't have a place to live, so what do they have... they simply can't solve other things…"* (FG3/3).

Principles of the Housing First model were applied in practice. The following statements of the research participants can be considered as saturated in terms of information.

"We have housing as one… of the pillars for the whole system… the whole recovery… we think that supporting the client is based on housing support… combined with social work… and at the same time in employment... so that the job helps finance the stable housing, it helps maintain a stable social situation ... it makes no sense for us to solve housing without social work and without jobs for people or any other form of income…" (FG4/1). *"They have a home, so suddenly they start to think up what else they want… and some of them have further needs, such as that their children could go to better school and that they may also want a job... they change doctors, yeah, they just start to think of everything…"* (FG3/3). *'They didn't solve health problems before… so now they slowly start to solve them… now they have time for that, they are settled a bit, they live, they have some security and they can think how to move on… forward...'* (FG3/4). *"When they simply don't have a place to live, so what do they have... they simply can't solve other things…"* (FG3/3).

On the grounds of elements related to the discourse component, we identified two social work models: 1) a model focused on the flat management and achievement of the client's competence in housing, 2) a model that views housing as one of the components of the client's situation and provides the client with comprehensive support.

The model of social work accompanying housing that is focused on achievement of the client's competence in housing

Emphasis is put on the assessment of the client's competence in housing and on the consequent recommendation of the client to an advanced level.

"I get a bit angry, or I'm afraid, when the competence in housing is reduced to paying rent… housing is actually not just paying rent and fees but also interpersonal relations, autonomy, kids at school, housework, care of the flat… all these things are what the social worker must assess… he recommends for independent living, when the social worker, or a team of social workers say 'Look, he doesn't need us anymore'" (FG1/8).

Monitoring and evaluation of how the housing-related obligations are fulfilled (in the merged models also tasks related to the housing stock management) is an important part of this activity. *"Because he can have everything all right but if we don't reach him, it is not all right for us... because we need to be in touch with him…"* (FG2/4).

Housing is priority and social work is viewed as a means for it. *"Our common goal is to keep the housing… keeping the flat is our topic…"* (FG3/3).

Working on other topics (except for housing) is not primarily understood as a task for the supporting social worker. *"And then, when there are problems in terms of some other… they need to find a job and so on, so we refer them directly to social services…"* (FG2/1).

The comprehensive model of social work accompanying housing

The comprehensive model of social work emphasizes the overall understanding of the client's situation and its contextualization. To keep the housing is the common goal; however, it is mainly the client who shapes the content of mutual cooperation.

"The whole family is treated comprehensively… it depends very much on what the family wants to solve…" (FG3/4). *"We actually leave all the other topics simply up to the people… when they dawn on that, then we are here either to... help them, if we can, or refer them to someone who can…"* (FG3/3). *"We don't have the support aimed only at the very housing, but at the whole complex…"* (FG4/2).

Cooperation is supportive. Relationship, trust, patience in hard or delicate topics (no matter how essential they are for keeping the housing),and accepting the client's pace are vital. *"It takes some time till they start to speak about it…"* (FG3/3). *"We try not to be another burden… but rather… aid when necessary…"* (FG3/2).

Cooperation with the client is not restricted to the use of the flat. *"The social service keeps going, if the person shows interest, only that the rent or sub-tenancy are terminated..."* (FG1/9).

Attention is paid to the client's strengths and resources, the agreement on further steps results from negotiations between the worker and the client. *"There are many experts in the client's life, including he himself is simply an expert…"* (FG4/2).

Informants with elements of the comprehensive model were for the client's right to mistake and for a non-judgmental approach, which they perceived primarily as leaving space for further cooperation.

"We simply agreed on something and they just don't do it eight times and lie to us… someone would assess it that the motivation is not that…, but we can't do this…" (FG3/3). *"We informed her about our view, that we do not recommend that, that she should wait a bit longer, but she left… I said: 'Well, take it positively…, she proceeded to an advanced level of housing… to independence' … and let´s see if it is works or not…"* (FG4/1). *"It's easier for him to collaborate without being morally judged …"* (FG4/2). The workers view their active role in protecting the clients' interests and mediation with the environment. *"I liked how we won that, how we pushed the town that it had to be…"* (FG3/1).

CONCLUSION

It can be concluded that the authors have provided readers with a description of applied models of social work with families with children in housing need in the CZE during an era marked by lack of relevant legislation. Five dominant social work models accompanying housing were identified. Following the criterion of *Relation to housing stock*, these were (1) the protective model, (2) the model promoting autonomy, and (3) the model based on the extent to which social workers accept the demands of the client and the environment. Following the criterion of *Understanding housing as a right or readiness assessment*, these were (4) the model specialized in housing competence and (5) the comprehensive model. The key factor that, according to the research results, affects social work accompanying housing is the relation between the social service providers and the housing stock. According to the research participants, the separate type seems to be clearly more advantageous in terms of the goals of social work. It brings neither a conflict of roles and interests in social workers, nor distortion of the clients' needs. For strict separation of social work and the real estate agenda, it is not necessary that the housing provider is an independent entity, because these activities can be separated internally within the rules of an organization.

Although the separate type seems to be more advantageous in terms of the goals of social work, it can bring risks that increase the extent of control over the clients. Although the landlord is an independent entity and the client signs a contract with him, the social service provider may be asked for intervention by the landlord. The social worker takes measures beyond the originally intended and agreed limits of mutual cooperation in order to maintain the housing for the client. The landlord can "make use" of workers to promote his own interests.

Based on the extent of control, the approaches of social work accompanying housing can be perceived as more protective in the merged model and more promoting autonomy in the separate model. The model of social work promoting autonomy is easier to apply in the separate type. The choice of the protective approach is typical of workers assuming responsibility for the clients' deeds; it evinces strong features of control, unrequested or unjustified monitoring, and taking risks instead of the client. It results from three main motives in social workers that can strengthen or cross each other in real life: 1) to keep the client in the flat, 2) to meet the obligations of the worker's employer towards the entrusted housing stock, 3) to meet the landlord's conditions for the use of the flat.

In further analysis of the social work models, we concluded that the distinction between the protective and the model promoting autonomy may be too simplistic. That is why we incorporated another aspect into the design of the sought-after models: (1) the extent to which the worker accepts and incorporates the requirements of their clients, (2) the extent to which the worker accepts and incorporates the requirements of the environment. Having applied these criteria, we

created four basic positions that social workers observe in relation to this aspect. The merged model is typical of the need to manage the housing stock (the agenda is often carried out by workers and it can become a significant part of their work) and of the increased control over the tenants'/clients' obligations. On the other hand, the separate model of social housing allows workers to focus on protecting the clients' interests (advocacy) and mediating a contact with the environment (mediation and facilitation).

The separate model of "social housing" (with emphasis on early housing) develops the empowering and comprehensive social work models. Although it seems to be effective, it has some weaknesses because workers have to adapt to the options that are (in current legal, socio-political situation) available. The absence of a systemic establishment of social housing policy is one of the significant determinants and "deformers" of social work accompanying housing. Social workers, in pursuit of at least some solutions for people in housing need, implement solutions or practices that we do not perceive as optimum in terms of general demands on social work interventions. One of the problems is the tendency of some owners to use the social service providers to minimize their own risks in the housing market and to advance their commercial interests. Social work must sometimes "side-line" itself in favour of other activities (most frequently related to administrative, organizational, and technical matters connected with housing) that are not directly related to it. The social workers and social service providers respect these conditions due to the lack of legislation on "social housing" in order to mitigate the problem of "homelessness", mainly in families with children.

At this point, it is necessary to emphasize that in the Czech context, there has been research on negative impacts of the lack of stable housing on minors and on public attitudes towards social housing, but there has as yet been no research on social work practices used in the current situation. With regard to this fact, we assume that the submitted analysis could contribute to an optimal setting of the role of social work in social housing. The new Social Work Methodology in Social Housing (Mikulec, Šnejdrlová, 2019), which makes use of, among other, of our research, from the Ministry of Labour and Social Affairs of the CZE proves the topicality and necessity of our research. Our analysis clearly showed that the separate type of housing is viewed as more appropriate by social workers as it to a greater extent supports people's autonomy; this corresponds with the theory of empowerment and advocacy (see Payne, 2014). Moreover, this form, contrary to the merged one, allows social workers to focus more on the clients' interests and contact with the environment.

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Early Care in the Context of the Czech and Foreign Retrospective and its Current Situation: The Particular Statistics in the Pardubice Region

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Abstract
OBJECTIVES: The article attempts to answer the questions whether "early care as a social prevention service is effective and justifiable in the social service system" and "why it deserves major attention". THEORETICAL BASE: The theoretical background of the article is the early care with an insight into the process of transformation and consolidation of areas of endangered childcare in the Czech Republic. A brief retrospective account and description of current systems in the Czech Republic and abroad were used as further information input resources. METHODS: To obtain theoretical information, the authors analysed relevant literature and documents. A longitudinal research method was then used to collect the required statistical data. The data was obtained from the existing records at a specific early care provider. OUTCOMES: The longitudinal research enabled the authors to analyse the data and to evaluate legitimacy and effectiveness of the service provided to a very vulnerable target group: families with a young child with a limited opportunity to socialize as a consequence of a health impairment. SOCIAL WORK IMPLICATIONS: The conclusions have key implications in the context of a family-oriented social policy as early care strengthens the individual family´s capacities and significantly supports psychological, social and somatic development of children.

Keywords
transformation, endangered child, social prevention service, early care, Early Care Centre in Pardubice

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INTRODUCTION

For a long time, the Czech Republic was criticised by the UN Committee on the Rights of the Child for the high number of children in residential (institutional) care. According to the Committee, it was among countries with the most extensive system of residential educational institutions. Owing to that, the Committee recommended increased efforts to work with the child´s own family. In this respect, the *Proposal for measures in transformation and unification of the system of endangered children care: basic principles* was presented in accordance with the Programme Declaration of the government of the Czech Republic and the Cabinet Resolution no. 293, from March 26th, 2008.

This proposal for measures was the first inter-departmental declaration of intention towards the change. The transformation and unification of the system of 'endangered children' care is based on the assumption that due to their physical and mental immaturity, children have the right to specific care, assistance, and legal protection. Family as a natural environment for the growth and well-being of all its members, especially children, and as a basic unit of society is entitled to have the necessary protection and assistance so that it could wholly fulfil its role in society. In order to achieve his/her full and harmonic personality development, a child must grow up in a family environment, in an atmosphere of happiness, love, and understanding (United Nations, 1989).

The continuation of the approved analysis was provided by the National Action Plan for the transformation and unification of the public system of care for endangered children (NAP), which was submitted for the period 2009 to 2011. NAP defined the key activities needed for the quality improvement of the care of endangered children. As a whole, it was developed as an inter-departmental document.

The basic principles of NAP included the preference for childcare in a family environment (original family or foster family) as opposed to institutional care, and consequently the decrease in the number of children in the institutional residential care facilities. Besides, it comprised a call for a higher degree of prevention work with endangered families and the related decrease in the number of children removed from family care, an individual approach and the multidisciplinary fieldwork. The national strategy was based on the rights of the child and it determines the essential principles of the protection of the child´s rights and the care of endangered children (MPSV, 2009). In the Czech Republic, the transformation of the system of work with endangered children and families represents a long-term process with an expected time horizon of its completion within several decades (MPSV, 2009). Based on the support integrated into the whole system and the interconnection of its individual components and their collaboration, its inseparable part is represented by work with the family of an early age child who has limited possibilities of his/her socialisation as a consequence of his/her physical disability (hereinafter "target group"), by means of the so-called early care.

Retrospective and the current state of early care in the Czech Republic

This retrospective account attempts to reveal historical connections of activities and interventions within the field of early care demonstrates that their firm roots might be found already in the previous century. According to Matějček (2002), the Czech Republic was one of the first countries where these activities for the particular target group were carried out. The issues of therapeutic care started to come into existence inconspicuously in the early 1950s.

In the 1960s and 1970s, the tendency to take care of a child with special needs as early as possible matured in our society. In the 1970s, a state network of rehabilitation nursery schools for the children under the age of three was built under the responsibility of the Ministry of Health. Subsequently, the Ministry of Education took responsibility for special kindergartens or special classes within the regular kindergartens. Regular kindergartens provided the possibility of individual integration. These issues were also affected by the establishment of pedagogical and psychological counselling centres in 1975.

The year 1989 represented a breakthrough, the post-November situation opened a possibility for establishing both public organisations and non-governmental organisations dealing with early care. The oldest early care centre in our country was the Early Care Centre in Prague, o. p. s., together with the Early Care Centre in Brno. Their professional tradition has been in existence for more than twenty years, but the continual history could be found long before 1989 (Středisko pro ranou péči Praha, 2013; Středisko rané péče Brno, 2013).

After the year 2000, the services of early care for other target groups, i.e. families with early age children with hearing impairment, physical or mental disabilities, including autism and communication disorders, gradually started to be established within the framework of the civil society activities. For example, the Centre Tamtam was for the families with children with hearing impairment, as a part of the civic association Federation of parents and friends of the hearing-impaired. It is still the only provider of field social services of early care for the families with hearing impairment or combined disability under the age of seven in the Czech Republic. It was founded in 2000. Its main office is in Prague for the region of Bohemia, and in Olomouc for the region of Moravia and Silesia (Středisko rané péče Tamtam Praha, 2013).

With regard to the topic of the article, it should be pointed out that the aforementioned early care providers have always participated in the early care provision for the specific groups of families with children with sensory impairment, including in the Pardubice Region. The centres of early care for the families with children with physical and mental disabilities exist predominantly on a regional basis.

The oscillation of early care provision between the departments of health, social affairs and education was ended in 2006, by means of the adoption of Act No. 108/2006 Coll., on social services, with effect from January 1st, 2007. Since that date, early care has become one of the social prevention services based on legitimate registration and clear quality standards. By this law, early care was included into the social prevention services. In 2009, an amendment to the Act defined early care in § 54 as a *"field or possibly ambulatory service provided to a child and parents of a child of up to 7 years of age who is disabled or whose development is threatened due to an adverse social situation. The service is focused on support provided to the family and development of a child in view of his specific needs"* (Act No. 108/2006 Coll. on Social Services, § 54). The amendment of the Act No. 108/2006 Coll. on social services, which was realised in 2009, presented a clear declaration that early care is a field service and its ambulatory form is "only" complementary, , with the target group of families with children endangered in consequence of adverse social situation per se being removed.

Organisations focusing on "early care" provision thus experienced a long transformation, during which the interdisciplinary teams of special pedagogues, social workers, psychologists, therapists (physio-, ergo-, arte-, animo-, and others) who had previously specialized in professional child help provision were transformed into the current early care professionals. They accompany the family with a child in her/his natural environment, and they help them adapt and manage emergency situations, including the child´s specific development, to the extent the family asks for. The early care professionals are aware of the fact that the child´s parents, broader family and the closest community are the greatest experts with regard to the particular child, i.e. the ecological systems approach, which forms the basis of the current social prevention service approach.

Retrospective account of the European context and the current state of early care/intervention
Early care in the Czech Republic drew significantly on the European experience as well as on the system analyses in which it took an active part.
The European context of early care / intervention is analysed in two significant projects of the European Agency for Development in Special Needs Education[3]. These are the summary report of

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[3] European Agency for Development in Special Needs Education is an independent self-regulated organisation, supported by the member states of the Agency and the European institutions – Commission and Parliament.

the European agency for Development in Special Needs Education *Early Childhood Intervention: Analysis of the Situations in Europe. Key Aspects and Recommendations* (European Agency for Development in Special Needs Education, 2005) and *Early Childhood Intervention – Progress and Developments 2005–2010* (European Agency, 2010).

The first project was initiated by the member countries of the Agency in order to analyse the area of early care in the period 2003–2004. It provides an identification of various aspects related to the new concept of early care. Currently, this ecological systems approach is rather widespread, and it could be considered the framework of reference for early care / intervention (EI). This fact results from the qualitative change within the main aim of intervention, currently perceived as a process which cannot be limited – at the level of its impact – only to a child, but it also has to involve his/her close surroundings. This approach corresponds to a more general conceptual development of both the social services and the field of early care.

The aim of the second report was to update the analysis of the area of early care which had been previously carried out by the Agency. It brings an overview of the progress and changes in the European context in the field of early care (EC) since the year 2005. It concerns general changes related to five key aspects: availability, proximity, financial availability, interdisciplinarity, and variability. These aspects are regarded as essential in the model of early care, proposed within the study elaborated by the Agency in 2005. This summary report presents main conclusions of the project. It results from the information included in national reports which were created by all participating countries.

Early care represents an important service both at the professional and the political level. In a new European concept, early care comprises the findings from the field of medicine, pedagogy, social work and other disciplines of social science. There is a shift from a child-focused intervention towards a broader approach which includes also the child's family, community and the environment surrounding the child (Fayfer-Kruczek, Wrona, 2009; Malofejev, 2009; Šándorová, 2015; 2017; Slaná et al., 2017; Levická et al., 2018).

The main principles of early care are the right of every child and his/her family to the support and assistance. The aim of early care is to support and strengthen the child, his/her family and the necessary services, which ultimately helps to create inclusive and cohesive society that takes cognisance of the rights of children and their families (Early Childhood Intervention – Progress and Developments 2005–2010; European Agency, 2010:35).

The Czech Republic as an active co-creator of the projects wholly identifies itself with the conclusions and recommendations, setting out to respecting them fully in practice.

Currently, early care / support / intervention also represents an important practical and research topic not only in the aforementioned countries but also in other states, such as Slovakia, Poland, Armenia, and the Russian Federation.

In the Russian Federation, an important research and scientific institution is the Institute of Corrective Pedagogy of the Russian Educational Academy and its "Laboratory of the contents and methods of early age assistance to children with detected developmental disabilities". The institute also has other specifically focused laboratories[4]. More detailed information about the system of early assistance in the Russian Federation is currently being processed and will be submitted to the journal for consideration for further publishing later.

More detailed comparative analyses are available in the text written by Šándorová (2015; 2017).

Early care providers in the Pardubice Region

In the following section, attention will be paid to the provision of the service of early care in the Pardubice Region. First of all, the particular providers will be mentioned and then attention will be focused on the specific centre: The Early Care Centre in Pardubice. This will be done in the context of the longitudinal research of the selected data with the aim of justifying the importance

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[4] Information available from: http://xn-----8kcmadfbxacgagmbj3bgaqdcguqaw3aba5a1i.xn--p1ai

and effectiveness of the service provided for a very vulnerable target group – a family with an early age child with limited possibilities of socialisation in consequence of his/her disability (sensory impairment, or mental, communication or combined disability).

The particular registered centres in the Pardubice Region are:

- for the target group of families with the early age children with the diagnosis of autism: Association helping the people with autism – APLA Prague, Central Bohemia, o.s.;
- for the target group of families with early age children with hearing and combined impairment: Early Care Centre Tamtam Olomouc and Praha;
- for the target group of families with the early age children with physical disability: Early Care Centre Slaný;
- for the target group of families with the early age children with visual and combined impairment: Early Care EDA, o.p.s. Prague;
- for the target group of families with children with combined, mental, physical and visual impairment: Centre for supporting and accompanying the families with children with visual impairment – location Zlín;
- for the target group of families with children with combined, mental and physical disabilities: Early Care Centre in Pardubice, o.p.s.[5]

Early Care Centre in Pardubice

The Early Care Centre in Pardubice as a civic association of the parents and friends of children with a health disability was established and registered at the Ministry of the Interior of the Czech Republic on July 24th, 2002; the reference number VS/1-1/50848/02-R, the registration number (IČO): 266 00 285. Based on the decision of the Member Meeting held on June 19th, 2013, the Early Care Centre in Pardubice was legally transformed from a civic association into a public benefit society, which replaces its foundation document in accordance with the provisions of § 2, Subsection 2, Act 68/2013 Coll., on the transformation of the legal form of civic association to the public benefit society. Simultaneously, the official title was changed to Early Care Centre in Pardubice o.p.s.

With its original registration number 266 00 285, the Early Care Centre in Pardubice continues in its activities focused on support provision to the families with children with health disabilities (Středisko rané péče v Pardubicích, o. p. s., 2016). The Department of Social Affairs of the Pardubice Regional Authority decided that the early care service provided by the Early Care Centre in Pardubice would be registered under the reference number Krú 28852/2007. Its ID in the register of social service providers of the Ministry of Labour and Social Affairs is 1940945.

From January 1st, 2016, to December 31st, 2018, the Early Care Centre in Pardubice, o.p.s. was included into the Social Service Network of the Pardubice Region, and at the same time, it was given the responsibility for social service provision in terms of the services of general economic interest specified as early care to the extent of 110 families in the year 2016.

The mission of the early care service in the Early Care Centre in Pardubice, o.p.s. is to provide support to the family and to the particular child from the Pardubice Region by means of a complex range of activities. This support concerns the development of the early age child, i.e. from the birth until the age of 7, with the endangered development (complicated birth, low birth weight, premature child, hypoxia, etc.), irregular development, physical or mental disability, autism or combined disability.

Activities of the early care service:

- education and activation,
- mediation of contact with the social environment,

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[5] The register is accessible from: http://iregistr.mpsv.cz/socreg/hledani_sluzby.do?SUBSESSION_ ID=1402397429744_5&zak=Pardubick%C3%BD&zaok=&sd=ran%C3%A1+p%C3%A9%C4%8De

- social-therapeutic activities,
- assistance when claiming the rights and well-justified interests, and when arranging personal matters.

Offer of early care service is:
1. Providing family consultations.
2. Supporting the child´s psychomotor development.
3. Rental of stimulation, didactic and compensation aids and literature.
4. Supporting the child´s communicative skills.
5. Providing the basic social counselling and the assistance related to contact with the local authorities.
6. Helping with the choice and obtaining the rehabilitation and compensation aids.
7. Supplying the contacts to the experts in the field of educational system, health system and social services.
8. Help with the choice of the kindergarten or school.
9. Mediating the contacts of the families with the disabled children.
10. Providing psychological or other expert consultations.
11. Demonstrations of stimulation or didactic programmes (for PC, tablets, iPads).
12. Providing the information about an offer of cultural, educational, rehabilitation and sports activities with children.
13. Mediation of psycho-rehabilitation stays.

The Centre offers the specific activities: consultations with a family; support of the child´s psychomotor development; rental of didactic and stimulation toys and aids, including the specialised literature; psychological consultation in the family; group psychotherapy; communication support; socio-legal counselling; support in contact with the local authorities; mediation of the contacts with experts (e.g. social workers, psychologists, special pedagogues, doctors and other medical staff, physiotherapists); help with the choice of pre-school or school facility; help with obtaining the rehabilitation and compensation aids; organisation of meetings of disabled children; special seminars; the use of stimulation programmes on PC; mediation of cultural and sports events, including the those focused on rehabilitation for children (hippotherapy, swimming, etc.), and mediation of rehabilitation stays. Also, the offer in the area of methodology and broad concepts for this particular target group is rather specific, e.g. Vojta´s reflexive therapy, basal stimulation, orofacial regulation therapy, synergic reflexive therapy, programme Portage, VOKS, Teacch programme, therapy by playing games, etc.

In the reference period, the interventions in the Centre were carried out within an interdisciplinary collaboration among 8 internal employees (early care consultants). This group consisted of social workers, special pedagogues and a psychologist, collaborating with external consultants in the field of autism spectrum disorder, specific physiotherapies (Vojta´s reflexive therapy, synergic reflexive therapy, orofacial regulation therapy, basal stimulation, etc.), ergotherapy, speech therapy, communication, and food intake. On a continuous basis, there was a very close cooperation with medical specialists, especially with paediatricians and the general practitioners for the youth, neonatologists, neurologists, immunologists, ophthalmologists, otorhinolaryngologists, etc., according to the current needs. On average, each early care consultant was responsible for 20 families, the frequency of visits was mostly once per month in the initial stage and once in 2 to 3 months in the final stage of the care, depending on the family needs. This condition was in accordance with the service requirements.

In the context of interdisciplinary collaboration, it is also necessary to mention a very important institution – the family of a disabled child.

METHODS

The particular statistical indicators of one of the forms of care for an endangered child, i.e. early care as the particular type of the social prevention service carried out by the particular provider, are being analysed in a longitudinal research.

Aim of the research

The second aim of this paper, which is represented by the statistical part of the research, is built on original longitudinal research (longitudinal study). It is a method of empirical research which consists in an investigation of a certain phenomenon or a sample of population for the particular time period. It is very beneficial, especially for monitoring the developmental changes. It can be used both in a qualitative and the quantitative area of empirical research.

In our case, the longitudinal research of the social prevention service with the particular early care provider offers the possibility of analysing the selected data. Its aim is to justify the relevance and effectiveness of the service provided for a very vulnerable target group: a family with an early age child with limited possibilities of socialisation in consequence of his/her disability (sensory impairment, or mental, communication or combined disability).

Based on the analyses of the current state of the selected phenomena, we assume that until the present time, there has been no similar longitudinal research conducted in the Czech conditions.

Data collection

During the process of data collection within the longitudinal research, we focused on the quantitative statistical data. Their collection was carried out in the Early Care Centre in Pardubice during the time period February 2003 to June 2016. It was based on the register of clients which contained the client´s identification data (name and surname – identification for gender, date of birth), also the health diagnostic data, and time-related data (the date of the admission to care and the date of its termination). The data served as the basis for calculating the client´s age at the admission and termination of the care (in months), and the total number of months of the overall care. The accumulated data included 363 clients (not all the data are available for all clients and therefore the numbers of clients in the analyses presented below do not always provide the sum of 363).

Methodology

During the analysis of the collected data, the evaluation of the relationship between the numerical values was conducted by means of the correlation coefficient (Pearson correlation coefficient in case of data normality, otherwise Spearman correlation coefficient), the test of correlation and the regression analysis. The normality of data was verified by the Shapiro-Wilks test. In case of nominal values, the chi-square was used. Statistical analysis was conducted in the R environment (The R Project for Statistical Computing, https://www.r-project.org/), simple calculations and the graphical outputs were carried out in the MS Excel programme.

RESULTS

Based on the processed data about the individual clients, several significant phenomena are described in tables and graphs.
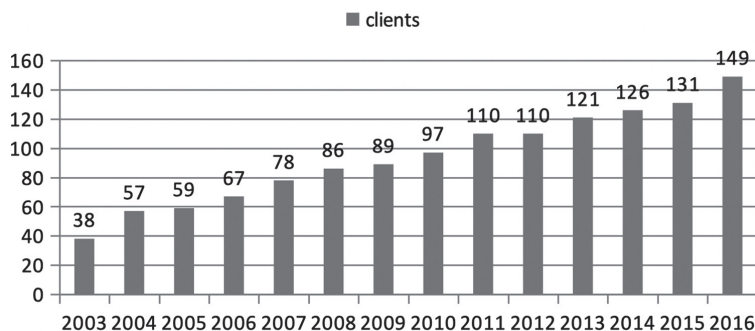
Overview of the number of client families in 2003–2016

The Graph 1 has been created on the basis of data from the 2016 annual report of the organisation where the research was carried out.

Graph 1: Overview of the client families throughout the years 2013–2016

In 2016, the service of early care was provided to 149 client families from the Pardubice region

■ clients

Source: According to the data from the Annual Report Early Care Centre in Pardubice 2016; Středisko rané péče v Pardubicích, o. p. s., 2016

Throughout the period 2003 to 2016, a significant though gradual growth in the number of client families is observable. The situation also reflects the provider´s potential capacity.

Gender
An important area of our thorough examination was gender. Our statistical analysis included the data on 218 boys (60.39%), 143 girls (39.61%). The gender of two children gender was not mentioned.
Conclusion: The number of boys is significantly higher than the number of girls (p < 0,0001). As a general fact, boys suffer from developmental disorders more than girls. The most frequently stated ratio for of all recorded examples of autism is three boys to one girl. For Asperger syndrome, the boys-girls ratio is even higher. However, there exists an assumption that the big discrepancy could be caused by an imperfect diagnostics of the syndrome in the group of girls (Thorová, 2006).

Number of cases over time
The organisation managed to record the annual number of cases, which is presented in terms of the half-year periods in the following graph.

Graph 2: Number of accepted cases over time
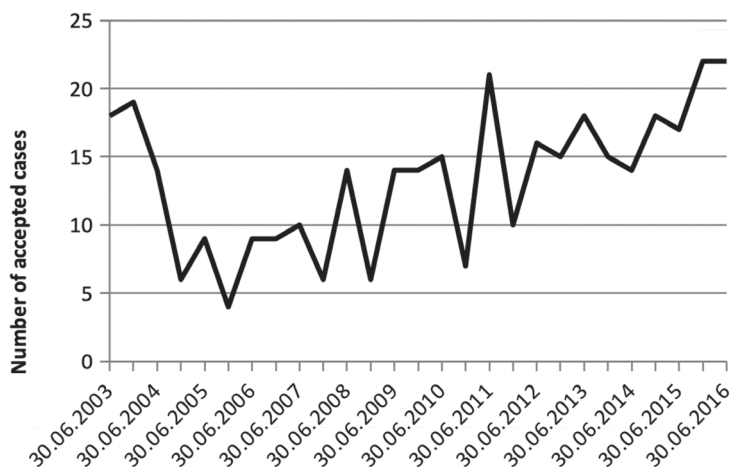
Conclusion: The growth in the number of cases over time is significant (r = 0.5055; p = 0.0072) – a full regression line in the graph. Since the Early Care Centre in Pardubice was partially formed in response to the requirements of parents, it is logical that more clients were accepted in the initial period. Therefore, our correlation and regression analysis was carried out also without the first three half-years of this "boom". In that case, the correlation is even stronger and the growth more significant (r = 0.8028; p < 0.0001) – the dotted regression line in the graph.

Diagnoses
A very important group of the data concerns the individual diagnoses. The following table represents an important overview of the occurring diagnoses with regard to gender; the graph 3 shows the number of cases in terms of half-year periods according to the diagnoses.

Table 1: Diagnoses with regard to the gender

	CP	DS	CD	ED	DD	ASD	other
Boys	22.48 %	5.05 %	25.23 %	17.43 %	3.21 %	13.30 %	13.30 %
Girls	28.67 %	7.69 %	25.17 %	22.38 %	2.80 %	2.80 %	10.49 %

The abbreviations used: CP = cerebral palsy; DS = Down syndrome; CD = combined disability; ED = endangered development; DD = developmental delay; ASD = autism spectrum disorder; owing to the low frequency of occurrences, the diagnoses of mental retardation and inborn developmental disorder were also placed into the category "other".
Conclusion: Boys have significantly different diagnoses than girls (p = 0,0250). The biggest difference is observable in case of autism spectrum disorder which appears much more frequently in the group of boys than in case of girls (29 boys and 4 girls).

Graph 3: Number of cases per year according to the diagnoses
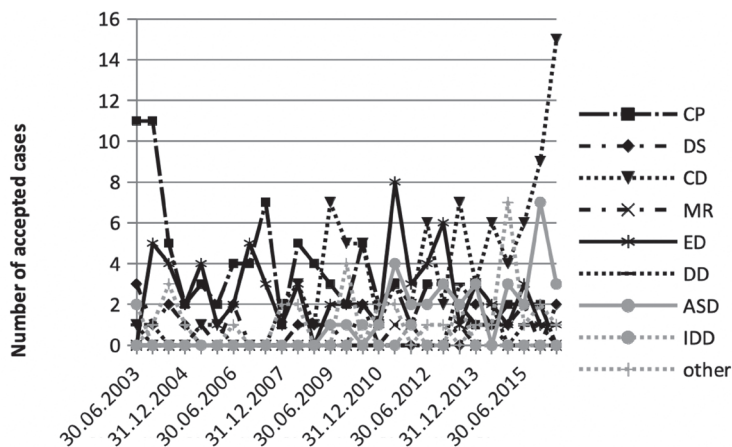
The abbreviations used: CP = cerebral palsy; DS = Down syndrome; CD = combined disability; MR = mental retardation; ED = endangered development; DD = developmental delay; ASD = autism spectrum disorder; IDD = inborn developmental disorder.

Conclusion: In the reference period, a significant drop of CP (r = −0.6360; p = 0.0004), and on the other hand, a significant growth of CD (r = 0.8126; p < 0.0001) and ASD (r = 0.8021; p < 0.0001) were observed.

The results can be explained in terms of the situation after the year 2009, when the diagnostics of ASD and CP, which had previously represented the diagnoses of combined disability (CD), was more precisely specified.

Admission of the client family to care and the child′s diagnosis
With regard to the desired phenomenon - represented by the earliest possible admission of family to care − the following graph shows the child′s age at the moment of being accepted to care in relation to his/her diagnosis.

Graph 4: Child′s age at the moment of the client family admission in relation to the diagnosis

The abbreviations used: CP = cerebral palsy; DS = Down syndrome; CD = combined disability; MR = mental retardation; ED = endangered development; DD = developmental delay; ASD = autism spectrum disorder; IDD = inborn developmental disorder.
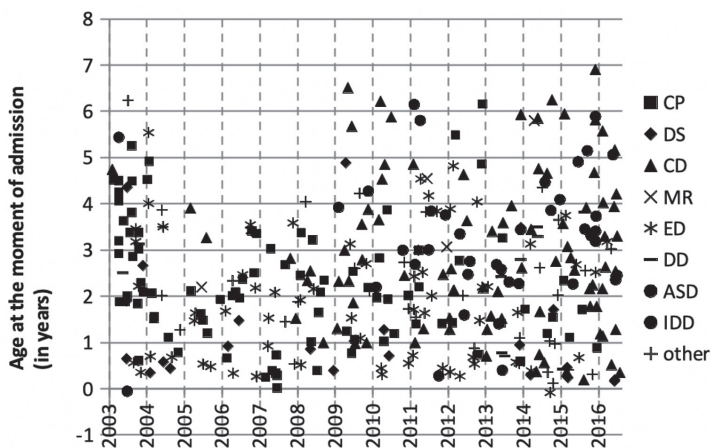
Conclusion: It is apparent from the graph that in 2003 and in January 2004,   the children over 4 years of age were also being accepted. Later, this particular group of children was not accepted until the year 2009, when the children over 4 years of age started to be accepted again. In the group of children with autism spectrum disorder, this phenomenon can be explained in terms of a more difficult diagnostics process with the highest possible degree of specifying its characteristics (see also Thorová, 2008; 2015).

Child´s age at the moment of admission
Another observed parameter is the child's age at the moments of admission to care.

Graph 5: Child´s age at the moment of admission

Child´s age at the moment of admission (year)
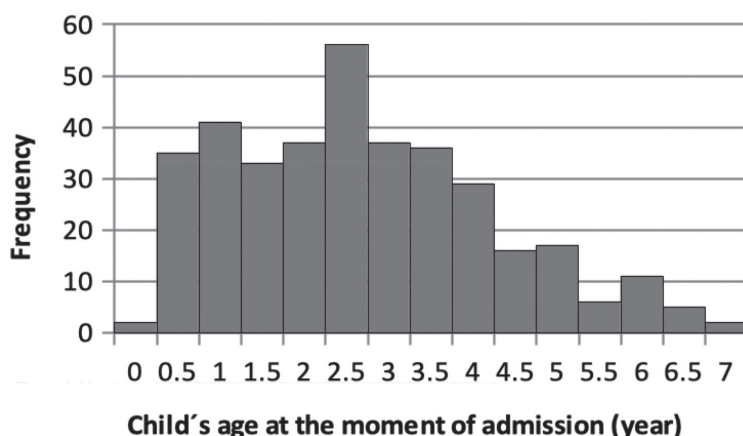
Conclusion: The most frequent age of the child´s admission to care is between two and two and half years (the frequency 56; 15.43%). From the age of six months up to the age of four, 83.75% of children were accepted (304 children), the children younger than six months represented 0.55% (2 children), the children over the age of four accounted for 6.61% (24 children). These figures are adequate to the aims of early care although the rule "the sooner the better" is still valid.

Child´s age at the termination of care
The termination of the service provision to the particular child has to be done by the age of 7, in accordance with the Act No. 108/2006 Coll., on social services, as amended. Nevertheless, the aim of early care is to stabilise the family and to shift it to the subsequent area of care within the network of collaborating centres in other sectors, especially the sector of education. The following graph implies this phenomenon, i.e. the child´s age at the termination of care.

Graph 6: Child´s age at the termination of care

Child´s age at the termination of care (year)
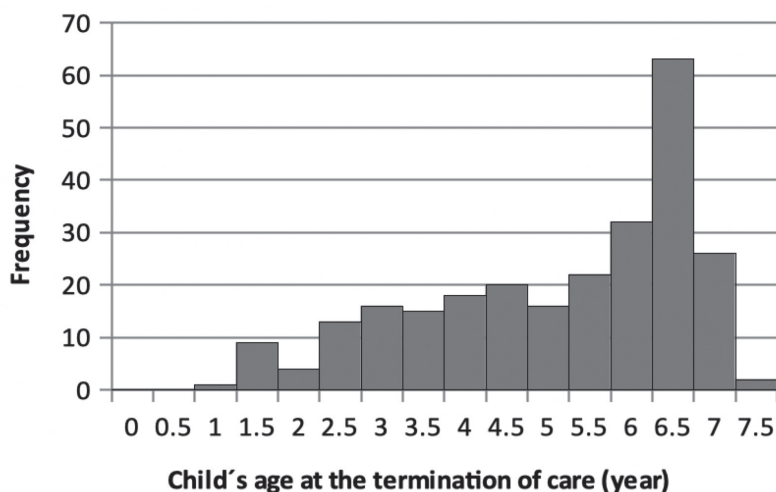
Conclusion: Logically, the most frequent child´s age at the termination of care is between 6.5 and 7 years (frequency 63; 24.51%). In 47.56% of all cases (123 children), early care is terminated after the sixth year of the child´s age. There occurred only two cases (0.78%) when the care was terminated after the seventh year of the child´s age. This situation is in agreement with the length of the care provided according to the Act No. 108/2006 Coll., on social services, as amended, where the maximum length of the service provided is stated in terms of 7 years of age. Unfortunately, in the Early Care Centre in Pardubice, the reasons for terminating the care are not being recorded so it can only be assumed that the majority of families uses the maximum amount of early care intervention, i.e. until the child´s age of 7.

Length of the care provided and terminated
Very important information is the length of the care, which is shown in the following graph.

Graph 7: Length of terminated care

Length of terminated care (year)
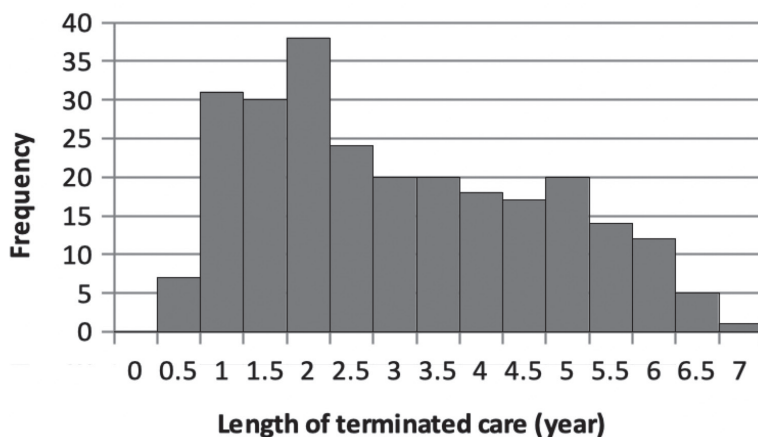
Conclusion: The most frequent length of the care is between 1.5 and 2 years (frequency 38; 14.79%). The numbers of children with a longer care are then gradually decreasing, which represents a desirable situation with regard to the characteristics of early care. In relation to the age limit for the service termination, i.e. 7 years of age, the length of care naturally manifests a negative correlation with the child´s age at the admission – the older the child is at the moment of admission, the shorter the length of early care is ($r = − 0.3489$; $p < 0.0001$).

According to the Contract for the provision of early care as a social prevention service, the reasons for a contract termination and the respective notice periods are stated in the Article no. VI. The paragraph no. 1 states that: *"The client may terminate the contract at any time without cause. The period of notice shall be 14 days from the date of the provider´s notification. The Report on the client´s early care is then immediately sent to the client. The provider respects the client´s right to terminate the service"* (Contract for the provision of early care as a social prevention service).

Education of parents

Finally, the information related to the education of parents was used in this longitudinal research. In Table 2, the results were compared with the educational levels of the population of the whole Czech Republic according to the Census, carried out in 2011 (ČSÚ, 2014).

Table 2: Education of parents in the population of the Czech Republic and in the research sample

	Mother		Father		Total	
	Population	Sample	Population	Sample	Population	Sample
BS	22,44 %	6,15 %	13,97 %	4,00 %	18,36 %	5,12 %
SVS–M	28,70 %	20,00 %	42,09 %	27,67 %	35,15 %	23,68 %
SVS+M	31,16 %	46,77 %	26,42 %	46,67 %	28,87 %	46,72 %
PSE	5,37 %	4,62 %	3,24 %	2,33 %	4,35 %	3,52 %
UE	12,34 %	22,46 %	14,28 %	19,33 %	13,27 %	20,96 %

The abbreviations used: BS = "basic" school, i.e. primary and lower-secondary school; SVS–M = secondary vocational school without the "maturita" exam; SVS+M = secondary vocational school with the "maturita" exam; PSE = post-secondary education; UE = university education.

The percentages from the Census were recalculated after excluding the inhabitants with no education, with unfinished "basic" education and with undetected education.

Conclusion: There are significant differences in the education of mothers ($p < 0.0001$), fathers ($p < 0.0001$) and even parents together ($p < 0.0001$) compared to the whole population of the Czech Republic. Except for the post-secondary schools, the significant differences occur everywhere. In the sample, there is a lower representation of the people with the "basic" education (mother $p < 0.0001$; father $p < 0,0001$; total $p < 0,0001$) as well as the ones with the secondary education without the "maturita" exam (mother $p = 0.0034$; father $p = 0,0001$; total $p < 0.0001$) than in the whole population. On the other hand, there is a higher representation of the people with the secondary education with the "maturita" exam (mother $p < 0.0001$; father $p < 0,0001$; total $p < 0.0001$) and the university education (mother $p < 0.0001$; father $p = 0.0204$; total $p < 0.0001$). The most noticeable finding is a lower occurrence of the "basic" education (especially in case of mothers) and a higher occurrence of the secondary vocational school with the "maturita" exam (especially in case of fathers) in the sample than in the population of the Czech Republic. An interesting finding is a considerably higher difference between the university-educated mothers (13.34% in the population, 22.46% in the sample) and fathers (14.28% in the population, 19.33% in the sample).

It can be assumed that the parents with a higher level of education are involved into the service of early care more than the parents with a lower level of education. The parents with a higher level of education monitor the development of their child more and they search for the sources

of information in case of the suspected developmental limitations. In that respect, especially the mother´s education appears to be important.

A comparison of the collected data with other institutions was not feasible, due to the non-existence of other data.

Research summary, completion of the aim

In early care:

1. An important, though gradual growth of client families from 2003 to 2016 is apparent. The situation always reflects the provider´s possibilities in terms of capacity.
2. There is a significantly higher proportion of boys than girls (p < 0.0001).
3. Within the reference period, there is a significant growth in the number of cases (r = 0.5055; p = 0.0072); without the first three half-years of the "boom", the correlation is even stronger and the growth is more significant (r = 0.8028; p < 0.0001).
4. The boys have significantly different diagnoses than the girls (p = 0.0250).
5. If attention is paid to the admission of the client family to the care and to the child´s diagnoses, the admission of children over the age of 4 was being carried out in 2003 and in January 2004, then it almost stopped, and it re-appeared again at the beginning of 2009 (the beginning of autism spectrum disorder, the growth of combined disabilities). In the group of children with autism spectrum disorder, this phenomenon can be explained in terms of a more difficult diagnostics process.
6. The most frequent child´s age at the moment of admission to care is between two and two and half years (frequency 56; 15.43%). Between six months of age and four years of age, 83.75 % of children were accepted (304 children), and 0.55% of children younger than six months (2 children), and 6.61 % of children over the age of 4 (24 children). These figures are adequate to the aims of early care although the rule "the sooner the better" is still valid.
7. Logically, the most frequent child´s age at the termination of care is between 6.5 and 7 years (frequency 63; 24.51%). In 47.56 % of all cases (123 children), early care is terminated after the sixth year of the child´s age. There occurred only two cases (0.78%) when the care was terminated after the seventh year of the child´s age.
8. Based on the statistical processing of the data on the education of parents, it can be assumed that the parents with a higher level of education are involved the service of early care more than the parents with a lower level of education. The parents with a higher level of education monitor the development of their child more and they search for the sources of information in case of the suspected developmental limitations.

The fundamental aim of the research paper was to use a longitudinal investigation in order to evaluate the selected statistical indicators of one of the forms of the 'endangered child' early care in terms of the particular service of social prevention carried out by the specific provider. The longitudinal research of the specific service provider confirmed the justifiability and effectiveness of the service provided for a very vulnerable target group: a family with an early age child with limited possibilities of socialisation consequence of his/her disability (sensory impairment, or mental, communication or combined disability).

CONCLUSION

In accordance with the aforementioned descriptions in our research paper, the care for endangered children and the efforts to enhance the quality of the system of these children´s rights and protection has always been an important topic in the social sphere in the Czech Republic. Besides, a significant initiative was included in the document The Right to Childhood (MPSV, 2012). In this document, the tasks for the period 2012–2015 were determined. Its aim was to fully

use the current sources in the social system directed towards the quality enhancement of the children´s rights and the care for endangered children. The service of social prevention, which was established according to the Act No. 108/2006 Coll., on social services, represents a significant help in quality enhancement of this system.

This research paper, which contains both a retrospective account and a description of the current state of the Czech system and foreign practice of early care / intervention / support, can represent a significant information source related to the topic. The subsequent analysis of the selected statistical indicators, which was carried out by means of longitudinal research at the particular service provider, enabled the justification of the need for the provided service as well as its effectiveness for a very vulnerable target group: a family with an early age child with limited possibilities of socialisation due to his/her disability (sensory impairment or mental, communication or combined disability).

Early care / intervention / support is an important service both at the professional as well as the political level not only in the Czech Republic but also in other developed countries. For example, the Czech early care is the most significant source of inspiration for Slovakia (Slaná et al., 2017). Its main principle is the fulfilment of each child´s and his/her family´s right to the help they need. The aim of the early care is to support and strengthen the child, his/her family and the necessary services, which helps to create inclusive and cohesive society that takes account of these rights (Šándorová, 2017).

The answer to the final question "Why is it necessary to pay so much attention to early care?" is clear: Because it supports the improvement in the quality of life of the early age children with limited development and their families, it sets out to eliminate discrimination and unequal treatment of this target group, and it supports the child´s comprehensive development in his/her natural family environment.

Early care is considered to be preventive: in terms of the prevention of secondary disablement – it is effective; in the prevention of residential institutional care – it is economical; and in the prevention of segregation – it is ethical (Společnost pro ranou péči, 1998). Early care is also a path towards inclusion (Šándorová, 2017; Levická et al., 2018).

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The Place of Family Mediation as a Form of Support and Protection of Children's Rights in Social Assistance Activities

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Joanna Rajewska de Mezer[1] is a lawyer, legal advisor, family mediator, closely cooperating with the institution of the social assistance system in Poland, doctor in pedagogy (2008), dealing with the issues of legal aspects of social assistance, legal protection of a child and family, as well as the issue of social rehabilitation of people leaving correctional institutions and prisons. She is a Lecturer at the Faculty of Educational Studies and the Faculty of Social Sciences of the Adam Mickiewicz University in Poznań, and author of a number of publications on legal aspects of social assistance and resocialization.

Abstract
OBJECTIVES: The purpose of the work is to show the importance of mediation, which is a form of conflict resolution, as a tool of social work with the beneficiary in the case of divorce and the need to protect children's wellbeing. THEORETICAL BASE: Mediation is a form of extrajudicial conflict resolution allowing the participants to present arguments, work out a satisfying solution (in case of divorce) and protect and stabilise a child's situation. METHODS: Publications, statistical data, and legal acts regulating the conditions for providing assistance in regulating the legal situation of a child to divorcing families and the possibility of using mediation in social work with families were examined. OUTCOMES: Mediation proceedings are often taken up in the context of social assistance and are proposed as a form of extrajudicial dispute resolution in family cases. Institutions of the social assistance in Poland offer clients a free-of-charge mediation proceedings that can be used by clients dealing with family problems. SOCIAL WORK IMPLICATIONS: The interpersonal dimension of mediation is important for community social work as it makes it possible to find alternative ways of conflict resolution between family members. Mediation allows support based on activating people for self-help (subsidiarity principles).

Keywords
family mediation, mediation in social assistance, child's good, family conflict, conflict resolution

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INTRODUCTION

In order to function in the contemporary world, individuals are required to possess a number of social and professional competences and adapt to the ever-changing economic and social conditions that make their life situation unstable and cause a sense of insecurity about the future. The appearance of problems that generate a dysfunction for the communal life and significant social needs that are a consequence of a growing number of people who are in a difficult life situation requires support. Most problems of social assistance clients are linked to a lack of some element necessary for the functioning of the biopsychological system or for the functioning in an external system or environment (Obuchowski, 1966). The aim of the activities taken up by assistance institutions is to support individuals and families in solving problems, eliminating risks and completing life tasks and aspirations. In contemporary times, helping an individual or a family exit a difficult situation that they cannot tackle on their own has a multidimensional and interdisciplinary character. Everyday work with a client of social assistance requires one to seek new forms of interaction that assure the effectiveness of the intervention carried out and allows encouragement of the client to act and help themselves using their own potential. Assistance activities are also directed at families that are going through emotional distress as well as material problems resulting from a family breakdown (divorce, separation) and related conflict between partners that affects their children. Families or parents who are in conflict and whose life together has disintegrated at the emotional, physical, and material levels cease to fulfil the appropriate functions assigned to the family, including the important socialisation, educational and protective functions towards their children. Often, the problem that calls for a solution is the shaping of their relationship with underage children. A conflict at home that results in the lack of a sense of security, and failure to understand the reasons of a family breakdown. Fulfilling a child's legal right to have contact with their parent and to have the other parent influence the educational process (as long as it does not pose a threat to their life and health, of course) is a means to protect their wellbeing and makes it possible for the child to develop socially and psychologically in a correct way. It is thus necessary to help the family. The support may take the form of widely understood social work with those in need. As part of it, one aims at activating the client's cooperation in the assistance process and equipping them with competences to act, by using various work techniques and methods. Among them, techniques based on negotiation and mediation to seek solutions are becoming more and more popular and appreciated. Social workers who work with clients encourage them to undergo a change, thus in a sense negotiating the change with them or families and mediating between the parties. By referring to the principle of reciprocity, they aim at fulfilling the needs (sense of support, belonging, care) of the conflicted parties and their children. The expected change in how parents function towards their children is intended to lead to regulating the situation of family members and parents taking up responsible behaviour that takes into consideration the child's wellbeing. The discussion below is focused on the role of the family in shaping a person, the meaning of mediation and specific tools in solving family conflicts and protecting the child. It indicates the advantages of using mediation as one of the methods of social work with families that are at conflict in order to safeguard and protect the widely understood rights of the child.

THE MEANING OF FAMILY IN SHAPING THE HUMAN AS A SOCIAL INDIVIDUAL

The family is an elementary factor that shapes the human as a social individual. It influences how their identity is formed, and how patterns of social roles and patterns of reaction mechanisms towards various life situations are moulded. When defining the notion of family, developmental context is focused on, as it is of considerable importance for each individual's growth in early childhood. It remains linked to some developmental changes and transformations of a human's psyche and behaviour in later stages of ontogenesis, including the period of adulthood. This context influences

the development of a human, equipping them with the ability to learn from people who they are connected to with a social and emotional bond (Harwas-Napierała, 2009).

Researchers who study this issue define the family by combining the elements of three family descriptions that exist in the tradition: the modernist cell model that puts pressure on having and socialising the child; the evolutionist model where the mother-child pair is both the genetic basis and the basis for family life; and the postmodernism dyadic model of Simmel-Trost (Trost, 1993; Szlendak, 2012). A dyad is a group that is dissolved when one of its members leaves (due to divorce) or for example dies. According to this concept, the family forms a group where there is at least one of the dyads: parent-child or partner-partner. According to Trost, the dyad model allows us to define the family in the contemporary world when the family structure is dynamic (Trost, 1993). At present, due to frequent family breakdowns caused by partners in formal and informal relationships ending, changing of partners, rebuilding of relationships with the participation of a new partner, existence of children from the first and further relationships in the family, there are various configurations of dyads. The above may lead to the sense of temporariness, low stability and lack of security among children living in such families, and lack of fulfilment of the functions assigned to the family, for example, as far as socialisation is concerned. With its characteristic way of functioning and network of intertwined interactions of a different nature and emotional intensity, the family is an important factor that influences the process of socialisation. In the process of socialisation, the child adopts the way of life of its group and society by learning the rules and an idea included in the culture (Sztompka, 2002), acquires the features of a social person, shapes its subjective competences which make it possible for them to function and puts down roots in the structure of a given social system. The child identifies in and with it, thus starting social participation that is expected and accepted (Modrzewski, 2012:24).

In the course of socialisation, a human's personality is also shaped. The human learns and acquires skills that are the basis for any social interaction, including norms, patterns of behaviour, emotional reactions or values (Szacka, 2003).

Parents are the people who considerably influence how the child is shaped in the first period of their life and how the process of socialisation is carried out. Sociologists call parents "significant others" (Szacka, 2003). A family allows the child to gain maturity, self-reliance and independence in decision making in adult life. It sets intellectual, emotional and physical borders that are crucial in shaping a human (Szymańska, 2015).

Economic, social and political changes that take place in the contemporary world, problems related to covering basic necessities and insecurity related to employment all affect the family, and the socialisation and custody functions it fulfils. An unfavourable professional, health or family situation causes a number of family conflicts that lead to the breakdown of the family and marriage. Statistics indicate that the breakdown of relationships is more frequent than in the past, both among married couples and informal partners, and the number of contracted marriages is on the decrease (Stańczak, Stelmach, Urbanowicz, 2016; Boguszewski, 2019).

Conflicts between spouses/partners may be caused by unsatisfied needs (e.g. the need to be accepted, admired or understood). Frequently, conflicts are a consequence of communication errors consisting of judging, generalising or misunderstanding the intentions of the speaker. A dispute may also be a result of functioning in a given social role that determines the way of behaviour and influences the shaping of the system of values (Byra, 2008; Cybulko, 2009; Kozłowska, 2014). Conflicts can be divided into destructive (those causing unbeneficial consequences for the parties involved) and constructive (where beneficial elements predominate and where there is a possibility of reducing or eliminating the existing tensions caused as a result of a dispute) (Białyszewski, 1983). A destructive conflict during a family breakdown will intensify negative consequences of the separation not only for the partners, i.e. parties of the conflict, but also for their underage children. Affecting interpersonal relations and communication quality, a conflict makes it impossible to have a realistic and objective view on the problem or regulate the situation while focusing on the child's well-being.

However, apart from antagonizing elements that are perceived as negative, conflicts can also be beneficial; thus, as mentioned above, they may be constructive. Diagnosing a conflict and attempting to view it from the other party's perspective increases the awareness of an individual. It also has an educational meaning as it objectifies the problem that is the source of the conflict. It makes it possible to reveal the needs, rights and potential of individuals, i.e. conflicted parties (Cybulko, 2009; Grudziewska, 2015).

A family conflict has a specific nature and often builds up over a longer period of time. It is multi-layered and accompanied by a big emotional tension between the parties and their children. Partners feel disappointment and frustration caused by the loss of a relationship and sense of stability, the need to build their life under new conditions and redefine the social roles that they enter. The situation is aggravated by the lack of knowledge about formal procedures available and strictly legal consequences of the activities undertaken (Milewski, 2016).

A problem that arises is related to the possibility of normalising the situation of the family, above all regulating the rules of functioning of the children that it brings up. It is necessary to ensure protection for families at different stages of marriage breakdown, in particular taking into account the protection of children, their rights and widely understood well-being.

The breakdown of a family caused by divorce or separation of spouses, and sometimes the breakdown of an informal partnership (cohabitation), both form a life situation referred to as critical.

Polish law – Act of 25 February 1964 Family and Guardianship Code (i.e. Journal of Law 2019 item 2086 with changes), defines divorce as a dissolution of marriage by court provided that premises stated by law are fulfilled.

Children go through parents' divorce or split-up completely differently from adults. They do not treat it as an opportunity to use the so-called second life chance. Irrespective of their age, it is a painful experience (Kordasiewicz, Milewski, Rolirad et al., 2017). Children often do not understand the reasons for parents' parting, especially if there have been no overtly conflictual, aggressive, or violent situations. Five phases are distinguished with regard to a child's adjustment to the new life situation. The first one is the phase of negation when the child refuses to accept the information about the divorce and loss of the parents, and does not accept the breakdown of their family. When the child notices that they have no influence on the changes taking place and cannot restore their family's unity, they undergo a period of so-called "anger" or "rage". It is a time of becoming aware of the parents' separation and starting a fight to restore the previous state. In the next phase called "bargaining", the child attempts to reunite parents into a family and acts in order to reconcile them. When they notice the ineffectiveness of their actions, they stop fighting. A sense of helplessness, guilt and responsibility for the breakdown of the family appears (a period of "depression"). The last phase is when the child realises that the situation is irreversible, and their parents will no longer function as a couple. They start to learn living in a different personal configuration in the family ("phase of acceptance") (PCM, 2000).

Research shows that children of parents who get divorced experience a number of social and emotional losses as a result of their parents' separation and become defenceless in a sense. Divorce also frequently leads to destructive methods of conflict management and decreased social competence of children and lowers their sense of masculinity and femininity (Fagan, Churchill, 2012). The child often becomes an object of a game and fight between their parents, too. The child's feelings frequently go unnoticed and are underestimated.

Divorce is also often linked to the child changing their dwelling place, which leads to moving the child to a different school and them losing their peer group that they have built and maintained satisfying relations with, and from which they have received support.

Having observed undesired and worrying changes in the child's behaviour, such as impulsive and aggressive reactions, problems with concentration, absent-mindedness and worse marks, the school can implement assistance procedures (Karaszewska, Rajewska de Mezer, Silecka-Marek, 2019).

The new material (problem with satisfying basic needs) and emotional situation (the feeling of

frustration, anger, longing, disappointment) faced by the members of a family (spouses, children) undergoing a breakdown frequently requires outside assistance provided by specialised institutions that support the child and the family, such as social work system entities.

MEDIATION AS A FORM OF SOCIAL WORK WITH THE FAMILY IN THE SITUATION OF A FAMILY CONFLICT DURING DIVORCE

In Poland, assistance provided to families is based on the Act 1507/2017, Coll., on Social Assistance, among others. Supporting families in fulfilling their functions is carried out through social assistance institutions that are obliged by law to act in this respect. Help is provided by municipal social assistance centres, district social assistance centres or municipal family support centres. A big role is played by specialist counselling provided with reference to legal, psychological and family problems, and the still underestimated social work with families and their members, including family mediation.

The principle adopted in Polish legal regulations referring to social assistance is that aid is provided that will make it possible for an individual or family to overcome a difficult life situation that they cannot deal with using their own competences, abilities or resources. One of the situations is problems with the functioning of a family and its breakdown. When providing assistance, it is necessary not to deprive a family of their decision-making autonomy. Considering the above, those taking up assistance activities should pay attention to their subsidiary character and the principle of subsidiary reduction that forms the principle of subsidiarity. The principle of subsidiary reduction consists in modifying the forms of support provided, reducing the scope of assistance provided and withdrawing from providing it when the individual who receives support starts to function correctly, i.e. gains social competences indispensable for overcoming difficulties on their own (Rajewska de Mezer, 2018).

Beneficiaries are obliged to cooperate with social assistance entities in order to overcome their problems by the Polish act on social assistance. In case of a lack of effort taken in this respect, assistance may be limited or refused (Art. 4 and Art. 11 of the Act 1507/2017 Coll., on Social Assistance)

on social assistance) The need for individuals or families to actively participate in the assistance process, use their potential and engage in the activities taken up has been underlined in various models of social work that have been shaped in recent decades. In the diagnostic (psychosocial) approach that underlines the importance of people's psychological structure, presented by M. Richmond and G. Hamilton, the social workers' task is to mobilise an individual's strength by influencing the environment, in order to create better conditions for the individual's functioning. According to H. H. Perlman, the creator of an approach focused on solving the problem, the assistance process should be concentrated on supporting the client in seeking a solution themselves, should avoid presenting ready solutions that require no effort from the client, and support from the outside in finding the latent strength and potential. The creators and supporters of the behavioural approach, on the other hand, underline the change in their client's behaviour as a result of supporting them in generating active self-assistance. The approach based on assisting one's development and transformation (the so-called relational model) that refers to the social and pedagogical dimensions of social work also underlines the role of a social worker in supporting individuals in their making changes necessary to exit a difficult situation and in participating in this process (Marynowicz-Hetka, 2006). All these approaches point out inciting the potential of an individual, their activity, taking responsibility for their actions by beneficiaries, which influences their building a sense of agency. Having a sense of agency assures them that they can influence their lives and the courses of their lives by their actions. Aiming at changing the way of behaving/functioning of an individual (e.g. parent, partner) or a family through social work and seeking resources for a beneficiary's self-activity, techniques typical of mediation are used.

Support is provided for parents who are in conflict and do not possess sufficient competences in finding solutions to problems related to bringing up children (their place of residence, contacts with them). Through a moderated conversation and guiding questions (typical for mediation), social workers stimulate parents to be active, propose their own solutions based on how well they know the child, their needs, problems and specific ways of functioning of their family. By carrying out social work based on mediation techniques, social workers can objectivise the problem, allow the sides of a family conflict to view the problem from the perspective of the other parent and the feelings that accompany it. The above provokes reflection, can lead to a change in behaviour and conduct towards the child or ex-partner, and help in efforts to find a solution whose priority is the good of the child.

A skill that is crucial for entities that provide support is for them to capture the moment when, due to the improvement in their client's condition, they should change the form of the assistance provided to the client and reduce its scope. The final objective of that is to stop providing it and let the individual "out" of the system of support, thus allowing them to lead an unassisted life that is independent from institutional interference (Rajewska de Mezer, 2018). Otherwise, it may lead to the loss of the competences to act, even if only few, that one possesses and the creation of learned helplessness. One of the aims of the assistance provided is thus to support the family and children who are brought up in it and protect their well-being.

Mediation is a method of social work that prepares one to become independent in decision making, whose aim is to equip parents with the competence to take independent decisions and seek the best and most satisfying solution for the parties to solve the conflict. The parties acquire the skill to have a conversation, seek a solution in a given case, and can use patterns of behaviour when other problems that cause conflicts appear. Activities of social assistance entities aimed at protecting children's rights consist in supporting families as socialization environments, among others. Reasons that justify activating formal support for a child and their family include its dysfunctions caused by malfunction in fulfilling traditional social roles, helplessness, inefficiency in topics related to custody and upbringing, family breakdown, divorce, separation, negligence, and abuse (e.g. physical and psychological violence). The occurrence of certain problems in the functioning of a family triggers the activity of various entities. It is important for the activities of assistance institutions to make a correct and quick diagnosis of the situation that justifies the interference in a family's autonomy. It demands broad specialised knowledge and professional experience from social workers or family assistants.

The theory of social work describes various types depending on their willingness and capability to cooperate in exiting a difficult situation, and models of working with them. It influences the effectiveness of using various methods of social work with them, mediation included. The "model of social work in the family" is distinguished. It is used in a situation when a family cannot function, when the family suffers from a lack of patterns, educational inefficiency and deficits in preparing one to fulfil social roles (the role of a parent) or an inadequate, distorted image of these roles. Such a family should be supported in taking up and carrying out the distorted functions. It is treated as an area of social work (Kotlarska-Michalska, 2011). When working with a family and using mediation techniques, social workers support them in solving family problems, teach the parties involved, help them acquire competences, work with them to uncover their potential, indicate the scope of social roles and duties linked to them. They are educators of the parties of the conflict and protectors of children's rights, but they do not provide solutions; these are worked out by parents themselves with their help. In the "model of work with a family" that assumes that the family is aware of the scope of roles and is motivated to act, but is unable to deal with some tasks due to objective difficulties and a lack of resources to overcome them, work can be based on a modified environmental method. Families are then supported in their deficient spheres, e.g. carrying out the material and economic functions (Kotlarska-Michalska, 2011). Social workers who work with such parents/partners based on mediation techniques help them work out solutions, orient activities by

mediating the solution of problems with maintaining children, alimentation, and participation of both parents in the upbringing and financial support of their children. Taking into account the competences and capabilities of the beneficiaries, they can suggest a subsidiary material support from social assistance entities. In the "model of social work for the family", applied when the family is unable, cannot, and is not willing to work towards a solution of the problem, becomes a subject with a passive attitude who does not define their needs or the scope of the assistance expected, it may be useful to apply social work methods linked to the essence of direct interaction with an individual, i.e. solution-focused social work, solution-focused therapy (SFT) and solution-focused approach (SFA) (Kotlarska-Michalska, 2011). In this model of work, one can try and use mediation techniques, aiming at changing the attitude of the family towards a cooperation with a social worker, activating passive parents who are unwilling to act and who are conflicted to take up an effort consisting in designing a parental plan together (regulating the issue of contacts with the child and their maintenance). In case of working with such a family, it is necessary in the first place to change the attitude of the beneficiaries from a passive one that negates cooperation to an active one that is expressed through cooperation in order to exit the difficulties.

A social worker or family assistant who works with the family and diagnoses, among others, a family conflict between parents that affects the completion of their educational functions or makes it difficult to satisfy children's various needs can suggest partners/parties of the conflict accepting support in the form of mediation.

Research conducted in Poland indicates that social workers can see a place for mediation in social work. They can see its function in discharging negative emotions and family conflicts in the family that they assist (Grudziewska, 2015). Using the mediation method substantially influences both the quality of social work and the effectiveness of activities taken up by the social worker (Łojko, 2014).

Mediation makes it possible to include a family/partner/spouse in the assistance process, understood as conscious participation in pursuing a consensus in contentious issues and tackling a difficult situation using one's own competences and resources supported by the knowledge, experience and company of a mediator.

Social workers who took part in research underlined the meaning of mediation and the tools it uses to motivate clients to actively participate in solving their problem, based on responsibility for the decisions taken (Grudziewska, 2015). The mediator strives to uncover and reveal the potential of the sides of a conflict and builds upon the positive elements discovered. The mediator assists self-aid, thus fulfilling with their work the ideas characteristic of the principle of subsidiarity that is in force in social assistance, and its objectives become identical with the aims set for social work. The mediator takes up activation functions in the process of decision making, at the same time allowing the sides of mediation to develop the sense of agency and influence on the course of their lives.

Social workers, however, can also see the drawbacks of using mediation as a form of social work with families that are in conflict or undergo a breakdown. They underline that the procedure is time-consuming, there is a threat of them getting excessively involved in the problem that a given family deals with, too much interference in the intimate lives of the family members, fear of being made responsible for the solutions worked out by the parties that turn out to be unsatisfactory. There is also the issue of the need to keep additional documentation, and of the superiors' expectations to yield immediate results from mediation activities (Grudziewska, 2015). The reasons mentioned that support resigning from mediation in one's work with individuals and families in a situation of a family conflict are definitely important. However, due to the importance of the problem and positive results that mediation can bring as for regulating the situation of a family, protection of the rights and well-being of children that the family brings up, these should not lead to a decision to give up using it.

In spite of the more and more frequent use of mediation and techniques that are typical for it as a form of supporting clients of social assistance in situations where difficulties are caused

by, among others, a family conflict, it has not been regulated *expressis verbis* in the act on social assistance. Mediation as a method of social work with (conflicted) families is carried out based on Art. 45 of the act on social assistance that regulates assistance in the form of social work. Mediation has not been listed as a tool for working with families in the act on supporting the family and system of custody, either. However, in Art. 8 item 1 and 2 of this act the state does ensure families experiencing difficulties in fulfilling their protective and educational functions support in the form of assistance in developing protective and educational skills, boosting awareness within the scope of family functioning, and strengthening the role and function of the family. Families are supported by means of a widely understood work with them, i.e. consultations, specialist counselling, therapy and mediation. By carrying out activities related to supporting families and using various methods such as mediation, emphasis is put on using the family's own resources, supporting the family in working out solutions for regulating educational issues and contacts with children on their own. Social work with families based on this method makes it possible for the social worker who conducts mediation or external mediator who supports the activities of the social assistance entity to teach conflicted partners how to seek an amicable way of solving the conflict through a conversation about their needs and the needs of their children, and based on the potential that the beneficiaries possess. What is also characteristic of mediation proceedings is that the act indicates that the family is free to decide about their participation in the activities that strengthen their protective and educational functions. Regulations on mediation are scattered across various Polish legal acts – in the Code of civil proceedings, in the Law on the system of common courts, in the Code of administrative proceedings, and in the Code of penal proceedings and in executive acts. They are used to carry out social work with clients.

Most organisational units of social assistance in Poland offer their clients support in the form of mediation by mediators who cooperate with a given social assistance centre. Mediation points are created at those centres where information about mediation, its objective, course, rules and benefits that extrajudicial conflict settlement brings can be gathered.

Many social workers aim at gaining competence in conducting mediation by taking part in training, courses and workshops. Knowledge about conflict, its meaning in human life, ways of solving it, and mediation techniques are very important when working with a person with difficulties, i.e. in the work carried out every day by social workers. This knowledge also makes it possible to educate society and introduce new methods of support.

Social workers who took part in research admit that they use techniques characteristic for mediation in their work with clients by conducting informal mediation meetings (Grudziewska, 2015).

Family mediation is one of the methods of supporting a family, which does not exclude the possibility of using the help of other specialists or experts (e.g. psychologists, psychotherapists, lawyers etc.). It can be conducted at social assistance units. One has to remember, however, that mediation is not a therapy or counselling. The parties of the conflict can be provided with psychological or therapeutic assistance or help with regard to specialist legal counselling irrespective of mediation activities. The parties can seek the opinion of specialists, consult the solutions worked out with their plenipotentiaries or other experts (pedagogues, psychologists etc.).

FAMILY MEDIATION IN THE PROTECTION OF CHILDREN'S RIGHTS

Mediation is a form of extrajudicial conflict resolution between parties that represent conflicting interests. It is a voluntary, confidential proceeding led by an impartial mediator who is neutral for the parties and subject of the dispute, and whose role is to help reach an agreement and facilitate communication. The mediator supports the conflicted parties in their quest for solutions, facilitates their communication, makes sure that the proceedings are legal and correct (PCM, 2010). When leading mediation, they allow the parties to have a conversation without imposing their own solutions to the dispute. It is extremely important for the parties to accept the mediator

and their assistance, as well as for the agreement worked out to be consensual and accepted by both parties (Gójska, 2011; Rękas, 2011). Mediation makes it possible for the parties to shape the ability to take conscious decisions and participate socially in the decision-making process. It creates favourable conditions for the protection of the liberty of the subject (Zienkiewicz, 2007).

The great value of mediation is the opportunity for the parties to actively participate in shaping their legal and social situation, and reach a consensus that takes their rights and interests into account with the support of a professional, impartial and neutral mediator. It is incredibly important due to the character of the work with a social assistance client who needs to be supported in becoming active, who is often convinced about the lack of influence on their own life and who expects their supporter to design a solution.

Mediation proceedings make it possible for the parties to seek solutions and take decisions in the course of a conversation, thought exchange and presentation of their arguments. It does not create solutions for their lives for them or shift responsibility from them, which, as I have mentioned before, is crucial to the completion of the principle of subsidiarity and activating assistance.

Mediation is conducted based on certain rules. Among them, one has to mention the principle of freedom according to which the parties are free to accept their participation in mediation proceedings. This approval can be withdrawn at any stage of mediation by each party. Parties should be informed of this at the beginning. Mediation is conducted in accordance with the principle of impartiality, and the parties in mediation have equal rights and should be treated identically. Impartiality is understood as freedom from favouring anyone, prejudice, and bias (Model Standards of Conduct for Mediators, American Arbitration Association, American Bar Association, Association for Conflict Resolution, 2005).

The course of mediation proceedings is confidential, in accordance with the principle of confidentiality. The mediator cannot impose their own suggestions of how to solve the dispute on the parties. The agreement is worked out by the parties themselves (the principle of neutrality), and they have to accept the person of the mediator and their help in reaching an agreement (the principle of acceptability). At the beginning of mediation, the conflicted parties can also agree with the mediator on the rules of mediation that they will follow in the course of mediation (Zienkiewicz, 2007; Kuć, 2010). There are three more principles added by the Polish Mediation Centre that unites Polish mediators: the principle of selflessness (the mediator cannot use their contact with the parties for their own benefit), the principle of professionalism (the mediator should complete specialized trainings in mediation and use their knowledge and skills for the well-being and best interest of the parties), and the principle of respect (the mediator makes sure that the parties address each other with respect, without judging or criticizing).

Mediation makes it possible to get to know and make an attempt at understanding the other party's reasoning and point of view, building from the start, sometimes improving communication or relations that allow the parties to reach an agreement (PCM, 2010). It is a chance to work out a solution to the problem that will be satisfying for both sides of the conflict; it may take the form of a parental custody plan and mediation settlement (e.g. child custody, child's contacts with parents, size of alimony etc.). By participating in a mediation process, the mediation parties can build their sense of responsibility for their actions through active participation in the decision-making process in their own case and are prevented from shifting responsibility to assistance employees, e.g. social workers.

Unlike a judge or arbiter, the mediator does not take decisions that settle anything in the case. Due to that, their influence is limited to leading the proceedings and assisting the parties in the so-called integrative negotiation. The mediator is also a so-called guardian of the agreement, which is understood as the mediator's duty to make sure that the agreement is realistic and make the parties aware of the consequences it will have (Jakubiak-Mirończuk, 2018).

The mediator oversees the procedure, formally chairs negotiation sessions, educates the parties during mediation and makes contacts with exterior experts and resources possible (PCM, 2000).

Mediation is used to achieve various objectives by making it possible for the parties to define and explain problems, understand various perspectives, identify interests, study and evaluate possible solutions to the conflict by reaching mutually satisfying agreements (Model Standards of Conduct for Mediators, American Arbitration Association, American Bar Association, Association for Conflict Resolution, 2005).

Primary and secondary objectives of mediation are distinguished (Riskin, 1994; Zienkiewicz, 2007; Kalisz, Zienkiewicz, 2014). Primary objectives include objectives of personal (consisting in self-discovery, self-improvement and internal moral growth), interpersonal (e.g. restoring/maintaining correct interpersonal communication, reaching a solution that is acceptable for both parties and realistic, preparing for future cooperation), and social character (carrying out the postulate of pluralism as far as forms of the judiciary are concerned and respecting the autonomy of will of subjects (parties of the dispute), stabilization of social order by conciliatory and peaceful conflict resolution) (Riskin, 1994; Seul, 1999; Kalisz, Zienkiewicz, 2014).

Secondary objectives include objectives of communication (enabling a conversation based on the principle of equality, freedom, ethics, open to the other party's arguments), psychological (shaping the parties' attitudes that are adequate for pursuing a consensus, discharging negative emotions, option to be listened to, parties' cooperation), and those related to negotiation and information (making the parties aware of the advantages, objectives and consequences of mediation, optimum choice of strategy, working out one or several variants of dispute resolution) (Kalisz, Zienkiewicz, 2014).

It is important to underline that mediation in family cases, carried out based on a court referral, as well as based on an agreement between the parties without the initiating participation of a court institution, does not have to lead to reconciliation between spouses/partners and return to a life together. This is often impossible due to the breakdown of marriage. Its objective in such cases is for the parting parties to agree on satisfying conditions for the breakdown that take into account the interests of both parties and secure an option to have a conversation in the future.

A low level of popularity of mediation in society is, however, underlined; this also includes judges who influence the decision to refer a case to mediation proceedings. This is caused by the judges' conviction about their abilities and personal competences that lead the parties to reach a settlement. Most mediators and some judges who took part in research indicate that judges are mostly oriented at solving and issuing arbitrary decisions in the form of a sentence, and not at working on the origins of the conflict and counteracting its happening again in the future. The parties are formally informed about the option to take part in mediation, but they are not indicated what the benefits of mediation or what the opportunities of participation in the decision-making process concerning oneself are, without the need to submit oneself to arbitrary court rulings (Rudolf, Cichowicz-Major, Matysiak et al., 2015). Accustomed to the fact that conflicts in cases are solved top-down with arbitrary court rulings, society is not aware of the essence and great educational importance of mediation.

In spite of different opinions of its supporters and adversaries, mediation is more and more frequently used in proceedings related to family issues, such as divorce and separation, and related problems of carrying out parental authority, regulating contacts between a parent and a child, and determining alimony for children. It is used when solving problems related to providing care for a family member and in inheritance cases in the family.

It gains importance in family cases, because the parties have concrete knowledge about their lifestyle, type and schedule of work, have their own experience, and above all are driven by the well-being of the child. Taking all this into account, they can reach the decision about the child's place of residence, frequency, length and rules for contacting the child by the parent and other family members, and the child's maintenance (alimony). They agree on the other parent's participation in the decision-making related to the child's education (e.g. choice of school, profile of learning) and their healthcare.

The mediator has to be neutral and impartial towards the parties of mediation. While helping them work out an optimum solution for their specific, unique configuration of family interactions, the mediator has to protect the rights of the children whose parents separate. Protecting the legality and plausibility of the decisions taken, the mediator is obliged to pay attention to regulations that are contrary to the child's well-being and direct the parties of mediation to specialists to consult their decisions and solution proposals. In a situation of conflict between parents, the mediator also enters the role of the child's "attorney", a spokesperson who protects their interests, thus facilitating the parents' agreement on the scope of their parental roles once the relationship (e.g. a marriage) is over. They assure that the child's needs are taken into account and satisfied in the widest possible way (Kordasiewicz, Milewski, Rolirad et al., 2017). The mediator attempts to make parents, who view their personal harm subjectively, aware of the situation of their common child, of their feelings, fears and anxiety. In a conflict between partners, a problem of a fight for the child, or rather a fight "with the use of the child", often occurs. The parties prove to each other who is the better parent and try to punish their ex-partner (the other parent of the child) by limiting their contact with the child. By acting under the influence of negative emotions and willingness to retaliate, they try to eliminate the partner from their life and that of their child/children. The decision to limit contact sometimes results from the willingness to protect the child against the negative influence of the other parent, in case there have been previous difficult experiences, and to ensure emotional stabilization for the child. In the situation of objectively assessing and identifying a threat to the child's well-being, the guardianship court can, based on legal regulations, limit or deprive a parent of their right to contact the child, irrespective of the parents' will (Art. 113^2 and art. 113^3 of the Act of 25 February 1964 Family and Guardianship Code (i.e. Journal of Law 2019 item 2086 with changes)).

For the children's good, protection of their right to lead a worthy life, right to live in a family, and contact their parents, the spouses/partners who split up should define the rules for cooperation themselves. They can do that in the form of a parental custody plan, also called the upbringing plan. It regulates in detail and foresees various situations and circumstances for regulating the rules of cooperation for parents who do not function as a couple/family as far as bringing up their common children is concerned.

For many parents who separate, their children's place of residence is an important problem. In the past, courts most often used to decide that children would live with their mothers, and fathers had the right to participate in executing parental authority and contact their children as ruled in the court statement. At present, solutions consisting in the so-called joint custody are also adopted, where the child or children stay for some time at their mother's and for the equivalent time at their father's. In this case, the parent who exercises custody at a given moment provides the child with care, makes sure they follow compulsory education, organises their leisure time and satisfies their needs. The issue of joint custody is currently unregulated in the Family and Guardianship Code, and there is no definition of it in civil procedure regulations, either. According to the Ombudsman for Children, it is necessary to regulate the topic of joint custody in Polish law in detail, in the face of courts more and more frequently ruling equal rights to execute parental authority for parents in the form of joint custody (Sobczak, 2017).

This solution has many supporters who raise a thesis about its just character, as well as many opponents who underline the negative effects of the solution as it leads to an unstable situation of the child and lack of one place for their life, the so-called "home". Adopting a solution that consists in joint custody requires both parents to define their rules for the upbringing in detail and draw equal limits for the children that will give them the sense of security and make manipulation impossible.

Another solution that is becoming more and more important is the so-called balanced custody. Its character is close to joint custody and it consists of parents' equal time participation in their child's custody in the child's active time (time after school, and out of sleeping hours), while keeping one place of residence for the child. This solution makes it possible for both parents to

have equal contact time with their child/children, even though the child/children live with one of them. Balanced custody makes it possible to reduce the negative effects of the parents' split-up and related moving to one of them, and to have steady contact with the parent whom the child does not live with. This form of custody is thus not formally defined in the law binding in Poland, even though it is used in court rulings.

International studies also indicate positive results of using joint and balanced custody, underlining that a steady and frequent access to both parents can reduce potential consequences of the absence of one of the parents in their child's life due to divorce. This sort of custody makes unbeneficial financial consequences of the parents' split-up smaller by giving both parents the opportunity to participate in maintaining their child (Bauserman, 2002).

Still, one has to pay attention to the fact that when there is a high level of conflict between the parties who split up, reaching an agreement on the rules for exercising custody alternately will be difficult, and sometimes impossible.

If the child lives at one parent's because the parties did not agree on or the court did not rule joint or balanced custody in its statement, it is important to define the rules for contacting the child by the parent who does not live with the child. A schedule of the child's meetings is drawn up with the other parent. Making arrangements as for the frequency of the meetings, their length, possibility of spending a night out at the other parent's or holidays with the other parent who does not live with the child depends on many factors, such as the child's age, state of health, emotional bond with the parent, education stage and number of extra classes, distance between the places of residence of both parents, their system of work, amount of leisure time etc.

The schedule of meetings forming part of the parental custody plan includes very concrete and unambiguous records whose aim is to avoid any conflicts due to lack of regulation. The time and place of collecting the child and taking it home, and venues for meetings, are agreed on. In case of smaller children, meetings can initially take place at their place of residence, which ensures them keeping a sense of security. Apart from the time during the week and on weekends, parents also agree on the rules for spending holidays, winter and summer breaks in the upbringing plan.

An important aspect is also the child's option or right to contact one parent while spending time with the other (option to call them on the phone and contact them via the internet).

The upbringing plan also defines the rules of the child's contacts with other members of their parents' families (celebrating birthday, anniversaries, visiting their grandparents etc.).

Irrespective of whether the child lives with only one parent or they are under joint or balanced custody, rules related to decision making in the issues linked to the child have to be defined. It is important, especially if the child is still unable to make their own decisions due to their limited maturity, knowledge or awareness. Issues that require taking decisions and representing the child include school matters linked to the educational process, excursions, out-of-school events, medical check-ups at school, and participation in extra-curricular or non-compulsory classes (religion, family life education). In the upbringing plan, parents can state that one of the parents, consulting the other, takes decisions in more important cases (which can be listed in the plan) related to the child, their education and medical treatment. If the child possesses their own exclusive wealth, a decision has to be taken about whom on their behalf and following the approval of the guardianship court will act as far as managing the child's wealth is concerned. In cases where both parents have to approve by law, the mother and the father have to take appropriate actions.

The arrangements included in the parental custody plan are an integral part of the agreement concluded between the parties with the support of a mediator. If, however, mediation was carried out following a court referral, they are a substantive basis for a ruling in the form of a court statement. By using mediation when working with families and seeking solutions that protect the good of the child, it is possible to regulate a number of issues that are important for the sense of security of the child, but also of their parents who have parental rights. Solving conflicts in the family that has a child in the background is a way of avoiding a number of other problems that follow.

It teaches beneficiaries self-restraint when proposing solutions. It underlines the need to transfer responsibility to beneficiaries for their decisions on their further functioning in the role of a parent. It allows fulfilling the principle of subsidiary reduction.

CONCLUDING POINTS

To summarize the above discussion, one has to state that mediation is a tool of great strength that has a positive influence in working with people. It entails the chance to solve many conflicts (including family conflicts that are so common today) in an amicable and extrajudicial manner. It allows a conversation and exchange of thoughts. It gives the parties an opportunity to express their feelings and ways of perceiving a conflict with the participation of an impartial and neutral mediator. Thanks to mediation, the event of a conflict can become a chance for both parties to make progress in their relationships, e.g. in the family (problem of executing parental authority, regulating contacts with the child). Articulating and concretizing the problem that causes a conflict can lead to its end and to the enabling of communication between family members who are often close to each other, clarifies the legal situation of the child, and protects the child's well-being. Mediation is enumerated as one of the forms of social work. It enriches social work and opens an opportunity for social workers who manage social work with clients to act towards ending a family conflict, thus supporting the family in difficulties that they are not able to overcome on their own without the support of an impartial third party. Using the potential owned by the parties and underlining the sense of responsibility for their actions, the mediator completes the objectives defined for social work. Aiming at activating the family and inspiring their members to self-assistance, it fulfils the principle of subsidiarity.

Mediation is a tool aimed at changing the attitude of a client/parent towards fulfilling the function of a parent, making them aware of their role in the process of bringing up their child and responsibility for the actions taken. It teaches conversation and looking at problems from the point of view of the other party. It activates them to be self-reliant and use the resources they have. When mediating between the parties of a conflict, social workers are neutral, support them in seeking solutions, moderate their behaviour, do not pass sentences, or urge individuals to take a given action. They leave it up to the parties to articulate ideas to solve their problem, protecting the good of the family and children it brings up during this exchange of thoughts, needs and proposals. They teach beneficiaries self-restraint when proposing solutions. They underline the need to transfer responsibility to beneficiaries for their decisions on their further functioning in the role of a parent. They allow fulfilling the principle of subsidiary reduction.

More and more often, social workers use the help of mediators who cooperate with social assistance units in order to support a family that remains in the difficult state of a conflict. They suggest to their clients that they should take part in mediation proceedings by showing their benefits. In their social work with clients, they often use techniques characteristic of mediation themselves in order to deal with a family conflict and regulate the situation of children who are brought up in the family to protect their rights.

It is important to promote the idea of mediation in society and equip children with the knowledge about the rules, course and benefits of mediation proceedings while still at school. It is crucial to make people aware of its importance in aiming at regulating the legal situation of children and protection of their rights and well-being. With this aim in mind, it is necessary to educate social workers and make them aware of the need to activate the parties of a conflict so that they seek solutions themselves, with the support of an impartial person who oversees the course of mediation and leaves the responsibility for decisions taken up to the interested parties themselves, in line with the principle of subsidiarity.

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Reflection of the Impacts of the Society Transformation in Relation to Education in Social Work

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Veronika Mia Zegzulková[1] is an internal PhD student at the Faculty of Social Studies at the University of Ostrava. Her doctoral thesis deals with the topic of education of social workers for international social work.

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Abstract
OBJECTIVES: The present study deals with a reflection on the impact of the society transformation in relation to the education of social workers. It determines the depicted main signs of modern society in the second modernity and deals with the issues of the impact of modernisation in the context of the current society and the area of education in social work. THEORETICAL BASE: The study is based on the theoretical approach of the period of the second stage of modernisation and the interrelated neoliberalism. METHODS: The aim of this article is to analyse from a critical theory perspective the professional theoretical discourse of changes in society in relation to education in social work. The main research question was set: What are the consequences of the process of transformation of society in relation to education in social work? OUTCOMES: Outcomes of the submitted treatise dwell in the reflective analysis of thoughts of depicted authors dealing with the impacts of the societal transformation that has changed not only the content of education of social workers as indicated by examples from Great Britain and Scandinavia but also of social work as a profession. SOCIAL WORK IMPLICATIONS: Investigation results support the forming of new findings usable for expert discourse regarding the topic of education in international social work.

Keywords
international social work, social worker, education, social work, neoliberalism

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INTRODUCTION

Social work as a profession is undoubtedly interconnected with the modern society. According to Göppner and Hämäläinen, it is the reaction to its own functioning and issues that are related to this functioning. Based on this, social work is a sort of a child of modern society (Göppner, Hämäläinen, 2008). In this context, Chytil (2007:119) defines social work as follows: *"a tool of institutions of secondary sociability with the task to resolve the issues of modern society generated by the modernisation process that deprived people of traditional social support"*.

Should we claim that social work is interconnected with modern society, it is essential to ask a question on what is the form of current society. The form of contemporary modernity is actually crucial for current social work and its education. Contemporary modernity is already in its second stage, which is significantly differentiated from the first modern society lasting approximately until the mid-1970's. In this context, not only education of social workers but also the social work itself is located in a completely different environment than the environment from where it originated and fulfilled its previous functions.

The current form of modernity is indicated as liquid modernity (Bauman, 2002), a risk society (Beck, 2011), an incommensurable society, or a new social risk society (Keller, 2011), or it simply includes the term post-industrial. The term "post-industrial society" indicates that the current society should be situated within some evolutionary development of society on a higher qualitative level than the industrial society. All positive aspects of industrial modernism will remain, and the difference will be that the sophisticated service economy accedes instead of the cumbersome, polluting, and energy-consuming manufacturing. Nevertheless, reality is significantly different. Social discrepancies are deepened, and poverty grows – even inside the most developed world economics (Keller, 2010).

Transfer of most economically active persons from industry to the area of services has created a completely new situation than the former transfer of mass population from agriculture to industry. In the last quarter of the 20th century it means transfer of mass population from the industry sector to the tertiary sector, transfer from an area with high work productivity to an area with far lower productivity (Keller, 2006).

The aim of this article is to, from a critical theory perspective, analyse the professional theoretical discourse of changes in society in relation to education in social work. The main research question was set: What are the consequences of the process of transformation of society in relation to education in social work? Social work develops and is formed within the broader socio-cultural, political-legislative, and economic environment. It is therefore contextually conditioned. The form of social work is influenced by a number of processes that take place at the national, international, and global levels, as well as by dominant lines of thought or ideas. A critical theory within the article is the incentive for social workers to understand that our societies create inequality and experience most of the users' social problems, and therefore social workers should try to oppose capitalist ways of thinking and acting. This study contains an analysis of foreign academic articles, which is supplemented by the knowledge of the publications of authors reflecting changes in society in relation to education in social work.

Education of social workers in the context of neoliberalism

Harvey (in Morley, Dunstan, 2013) defines neoliberalism particularly as a series of political theories of the economic practices that suggest that human welfare is developed with increasing individual business freedoms and skills within the institutional frame that is characterized by free market and free business. Thus, the objective of a state is to create and maintain an institutional frame suitable for an increase and maintenance of these practices. Since 1970s, there is a significant turnover in politically-economic practices and thinking in the direction of neoliberalism. Neoliberalism has an omnipresent impact on the manner of thinking to the level that the society interprets and understands the world it lives in by means of it.

Social work is a discipline that is basically engaged in and influenced by a political and social context it utilizes. Nevertheless, disciplinary responses to the stability of social changes created a profession that is constantly chased with the identity, legitimacy matters, and direction, which is also irrecoverably reflected in education (Donovan et al., 2017).

In order to actually understand impacts of neoliberalism on education at social work, it is crucial to identify its typical features, which are as follows:

1. acceptance of the economic globalisation as "determined", particularly with the dominating position of the market-oriented solution of the economic and social issues and extended use of the market-oriented vocabulary for determining the relationships that formerly existed outside the market or in opposition to market forces (Reisch, 2013)
2. rising level of expertise and insecurity of being employed in profession-related sectors from production to social services (Reisch, 2013)
3. superiority of development of human capital rather than creation of the collective, social capital (Reisch, 2013)
4. use of disciplinary mechanisms for regulation of human behaviour in the areas such as social care, health care and criminal justice (Soss, Fording, Schram, 2011).

Within the indicated typical features, we may clearly recognize the signs of transformation of the modern society such as increasing level of insecurities and transformation of the social aspects.

The impacts of neoliberalism on social work and social workers are discussed in in-depth analyses by numerous authors (see for instance Baines, 2006; Ferguson, Lavalette, 2006; Wehbi, Turcotte, 2007; Wallace, Pease, 2011). In brief, some of these authors observe that the ways neoliberalism is interpreted and practiced result in the following: (1) devaluing skills and knowledge of social work, reduction of autonomy and discretion of social workers; (2) transformation of collaborative relationships among clients and workers into hierarchical relationships where the employee gains "solely" the role of the specialist alienated from the experience and feelings of the clients; (3) shift from the structural analytical frames to the acceptance of procedural and technical solutions of social issues; (4) and finally the loss of meaningful identity of social work interconnected with emancipation of the social change, which is the complete opposite to the neoliberal form of identity that is primarily concerned with the governmentality and economic interests (Morley, Dunstan, 2013).

In Witkin's point of view (2014), the area of education in social work currently indicated insufficiencies in the curricula either in relation to a certain content (e.g. environment) or the manner to teach the particular content (e.g. specialisation); or the preparation of students for critical and more effective thinking over changes and complexity of the current social environment (e.g. globalisation, modernisation). In social work education, competency-based approaches to learning reduce education to training in the micro-skills of assessment and case-management and seek to give employers and government (rather than social work academics and practitioners) control over curricula (Morley et al., 2017).

Education as a social institution reflects and contributes to a wider social context within which it functions. In this regard, neoliberal ideology has evoked doubts of students of various disciplines and professions. As part of university education, it is in particular fear of the impact of neoliberalism on education, learning process, and scholarships. From this perspective, students are regarded in particular as employees, and the primary task of education is to prepare them for these roles (Witkin, 2014). Further manifestations of neoliberal impact may be, according to Reisch (2013), perceived in the emphasis on the working experience based on evidence, methodological trustworthiness, as well as individual responsibility in the standards of social work, and accreditation standards and external financing in education. Pursuant to Reisch, such impacts change the role of the educating institution. It is ironic that neoliberalism itself may be considered to be the transforming power "in relation to the education and social justice" even though there is a presumption that everyone might be

successful regardless the sociocultural context. Although transformation of education proposes radical change, it is not equal to the changes actually required.

Global and critical perspective within education of social workers

In seeking to interpret social work education it was important to understand what constitutes social work globally. This inevitably leads to the International Association of Schools of Social Work/International Federation of Social Workers (IASSW, 2001) definition. Whilst this current definition in part recognizes social work as having a unique perspective in relation to practice (Sims, 2011) and a degree of international commonality, others have highlighted that professional information to help direct the process of international collaboration in social work research is limited (Lombe et al., 2013). The acceptability of the definition has been challenged, along with the ability to have a single, global definition of social work in a postmodern cultural environment (Sewpaul, Jones, 2005; Payne, Askeland, 2008; Spolander et. al, 2014). During the last couple of decades, there were challenges for the profession of social work and education at social work resulting from political-economic changes accompanying globalisation, dramatic demographic and cultural transformation, and fast technological progress. Among these challenges, we can mention the following: expanding differences in the income and wealth between global north and south, increasing racial and class differences in health care, employment rate and housing; shift in the political circles towards fiscal economy and politics that points out market-oriented and tailored solutions; and changing nature of universities, students and the educational process. Even though formal documents of social work further stress the topics of social justice, the actual experience of social work and preparation of students for work, education, and research significantly differs from theory. This is manifested in various ways such as the non-critical acceptance of "practice based on evidence" as the foundation stone of the education and research in the area of social work; increasing interest in online methods of education; and the emphasis laid on the quantitative "results" as indicators of the success rate in the education (Reisch, 2013). The author of the study reflects change of the society within the second modernity, which is described with the signs of individualisation, increase of inequalities, economisation, and the abstraction and generalisation of social relationships.

The author further discusses increased popularity of online methods of education and the stress on measurable, quantitative "results" such as performance indicators of students on the impact of rationalisation as part of the education within social work. Keller (2010) also warns against massive use of e-learning in the area of education, and quantitative assessment of education only based on imminent recoverability of knowledge immediately in working experience. Furthermore, according to Keller (2010; 2011), education should not be solely the means of emancipation through knowledge. Education should become the source of a double win for the elites – it should both become the source of profit and the means of supervision of the remaining part of the society. Considering the situation when education is not a sufficient condition for finding employment, meaning it does no longer provides security, Reisch (2013) discusses that some students of social work consider that due to increasing indebtedness rate for most of them, social work is not a rational choice as a profession. Therefore, it is essential to deal with the fact how the students will finance their education. Financial problems of the current and further groups of students differentiate from the problems of previous generations apart from others due to changes in career development, family constellations and fast-increasing living costs and tuition fees.

REFLECTION OF THE IMPACTS OF THE SOCIETY TRANSFORMATION ON EDUCATION IN SOCIAL WORK

This section presents the process of changes in society in relation to the education of social workers in practice. For this purpose, an analysis of texts dealing with the revitalization of education

in social work schools in England and three social work schools in Scandinavia will be used. Deliberately, countries were chosen according to Bradley and Höjer (2009) when both Swedish and English social work cultures operate within a Western European post-modern world in which the 'unique theories' that should help explain the modern world have been critiqued. Gone are the certainties arising from a particular discourse. There is no one over-arching truth: the single vision has been replaced by pluralism in all its guises (Howe, 1996). In terms of welfare regimes within Western European culture, there has been a shift away from universalist welfare policies and a move towards welfare pluralism (Taylor-Gooby, 1996). In social work, new theories and practices have emerged, ones based on the nature of pluralism, diversity and difference, reflecting the fragmented times in which we live and the contested nature of social work.

Change of the content of education at the social work – Scandinavia as an example
Flem (2017) discusses the necessity to develop new theoretic frames and new methods of work experience in the area of social work and its understanding in relation to the increasing globalisation and neoliberal reorganisation of social countries. According to Flem's studies, the economic crisis combined with the Scandinavian unemployment rate exceeding the national level of Germany and Great Britain, and differences in inequalities are ever increasing. For instance, the increase of income inequality has such an impact that differences in the approach to work are ever increasing, and that the salary coordination system was not able to mitigate income inequalities, and that tax systems do not prevent the wealthiest companies from taking over ever increasing shares (Dølvik et al., 2015). In line with the claim of the authors, Keller also discusses that social inequalities are being deepened and poverty grows inside the economically most-developed economics (Keller, 2010).

This development in the Scandinavian countries represents a changing context of social work. In particular, and in the last decades, Scandinavian countries went through reorganisation of the governmental intervention, as other European countries after which there was neoliberal management, which was introduced not only to politics but also to the procedures of social work. Both as part of the Scandinavian countries and as part of other European countries, there were differences how the reorganisation was implemented, but it is obvious that the increasing use of these market principles has been expanded via basic social services (Flem et al., 2017).

At this point you may observe a relation to Keller's opinion (2009) that discusses economisation of the social aspect, and application of market mechanisms within the area of social work. As part of the market approach of social work, we may presume a social worker as a bearer of these values, a bearer of power (ability to act). Social workers are not robots but human beings. They are construed as those that should help, they may identify with hopelessness of their clients, and perceive limitation of their abilities and possibilities to help (i.e. insufficient financial resources, bureaucratic obstacles). The risk of economisation of social work is that service budgets will be managed not according to the needs of the clients but according to the criteria of financial effectiveness (Ferguson, 2004).

According to Flem (2017), these changes in the form of the use of "managerial ideology" and discourses regarding the quality and effectiveness of the use of the economic criteria undermined education and work experience in the area of social work and its basic values and principles.

Reality of newly established vulnerable groups such as people from immigrating countries in marginalized areas, unregistered migrants, long-term unemployed people, victims of human trafficking, wars, political conflicts and ecological disasters, requires reflection of the perspective and procedures in the area of education in social work with the aim to prepare further social workers to deal with the complexity in the globalized environment. Numerous newcomers to Scandinavia face marginalisation, unemployment, exclusion and discrimination (Dølvik et al., 2015).

In this regard, Keller (2017) uses the term integration. In the sociological field, we may perceive the topic of social integration as something that has to be met so that society does not fall apart

and stays together. Apart from others, this is a highly actual topic of modern society that has been formed on the debris of the traditional society. In the area of social work, we perceive the answer to the question how to include in society not only newcomers but also fully disadvantaged classes so that they feel to be part of the majority. Nevertheless, the situation is hindered with different approach of the European countries in relation to the immigrants.

Whereas Great Britain and Netherlands were traditionally close to the multicultural approach of living in diversity, from the historical perspective, France laid emphasis on assimilation of immigrants and expected that their offspring will not differ from the society from a cultural and political perspective. France has just gradually realized that this automatism does not work for the offspring and starts discussing the question of including immigrants and their offspring in society (Keller, 2017). On the other hand, Great Britain and Netherlands recede from some multiculturalism principles and accept some elements of assimilation politics.

Globalisation, migration and global social issues increasingly threaten the solid basis of the social work and create tension between universal proclamations on human rights, social justice and ethical codex of social work, and the Scandinavian social work as the strongest regime of the social care in Europe. Realizing global social issues such as the change of political conditions of the social state, increasing impact on ideology of neoliberalism, and increasing social issues with global roots strengthen the need to include new critical views in the area of education in social work. If the students are enabled to gain practical international experience, they should be afterwards able to exceed the imaginary borderline of the national and international context (Flem et al., 2017). Furthermore, the authors of the article highly appreciate mutual exchange of experience among social workers or students of social work both within Europe and outside Europe as well as how to deal with social issues related to the global social issues and neoliberal politics, in particular via critical perspectives.

To be able to discuss social issues of threatened and marginalized groups, individuals and families that do not match the social security system and government of individual countries do not promote any of them in any peculiar manner, education in the area of social work has to include both global and critical perspectives. When developing theoretical educational approaches of the social work within people with an immigration background (in the context of Scandinavian countries) and during on the ground training of the students, critical perspectives are necessary, in particular due to prevention of individualisation and culturalization of social issues (Flem et al., 2017).

In relation to the aforementioned, Beck claims that: *"Individualisation is pursued within social conditions which do not allow more than any other time that the person would live individually and lonely"* (Beck, 2011:211).

And these are the conditions in which the individual (whether an immigrant or not) should freely realize that they are highly unfavourable for full and free realisation. Beck (2011) and Preston et al. (2014) also discusses the risk of individualisation of social issues and asks to resist against neoliberal discourse which individualizes social issues, splits the community, and supports the market. Decolonisation of pedagogics and the actual practice is necessary and desirable. Challenging traditional discrepancies such as us/them and good/evil should create more space for what forms differences, inclusion and exclusion in the particular class and in the whole society. The authors have agreed on the need to "re-frame" the key terms and the language in such a way that the aforementioned space is created. Social workers play important roles here wherein they support their clients to unveil (construe) possible meanings of their experience, to identify contrasts and bilingual experience, and lead them to the responsibility for their own interpretation. In order to ensure effectiveness, this ability should already be under development during their education.

This trend is close to the social constructivism, aspiration for deconstruction of the dictated dominant discourse and what happens within the society. However, according to Keller (2013), the main objective of constructionism is to transfer all from the actual modern world to the virtual world. He claims that social constructionism serves as a sort of boatman from reality to fiction via "no man's land".

Change of the content of education in social work – Great Britain as an example
A wide range of authors has been investigating the changing environment at British universities, from the launch of financing based on fees and student loans supported by government. In the current highly market-oriented segment, the research also deals with what impact a neoliberal environment may have on the nature and quality of education in social work. Recent adoption of the Children and Social Work Act from 2017 has announced a new era of regulation, professional standards in England and expectations that dwell from the current requirements of the "knowledge and skills" for those who enter the profession, but also those who already perform it. Expansion of the field of professional education providers of social work, and thus traditional university courses have become one of many possible ways to gain education of a social worker. Governmental support for these alternatives for provision of university education has been increased via promotion of graduate programmes which are operated by private service providers and partnership relations among universities and local offices. At the times of evident changes and insecurity in this field, a range of universities even closed their courses of social work completely (Cleary, 2018). In connection to this, Rogowski (2018) added that the face of social work education changed further with the introduction of fast-track training programmes like "Step Up to Social Work" and "Frontline". These initiatives have created a two-tier social work education system; a key concern being that the focus of the programmes is on practical knowledge and the skills employers need rather than the theoretical underpinning of a practice which confronts social inequality.

The prevailing ideology of neoliberalism and its impact on the Anglo-American university sector cannot be overestimated. Crouch (2011:VII) proposes the following definition of this predominantly economic paradigm: "*There are a great many sectors and signs of neoliberalism, but there is also a dominant topic behind them: free markets where individuals maximize their material interests, provide the best means for satisfaction of human aspirations, and the fact that markets ought to be preferred over the state and politics, which are in the best case not effective and in the worst endangering freedom*".

Furedi (2011) describes features of the so-called "marketing" university where academic education is self-transformed into a commodity and refers to the pro-activeness managed by the government in order to create a market scenario that may compete on the global level and generate significant income. Kelly also (2009) follows this claim and claims that the president of the British universities association marked the sector of university education as *"one of the most valuable sectors in Great Britain"* (Kelly et al., 2009:3). This development as part of the university education, however, attracted significant criticism. While most of the literature challenges a philosophical shift that is typical for student reconstruction as a "consumer", emphasis is laid on practical implications of this changing educational environment.

In accordance with the aforementioned, Molesworth (2011) also considers the transformed role of the student into a consumer paying fees who currently often "expects" that he/she will graduate from the university with the degree he/she paid for. McGettigan (2013) provides a detailed analysis of the financial system that currently supports British universities, motivates a higher number of students and a political trajectory in the direction of possible privatisation of the sector. In this aspect, we can see the connection with determination of Keller (2013), where it is claimed that the ideology of neoliberalism is based on replacement of regulation in the public interest by regulation dwelling from the interest of strong business entities, critics of the state and social state, in order to privatize the public sector, which is required by the temporary aspect of employment contracts and emphasis laid on decreasing the price of work, conforming all to the economic imperative, and where the social politics should remedy the most detrimental impacts. In relation to the rise of poverty, Keller mentions the fact that the current society is in the state of utter property, power and social incommensurability when social inequalities and poverty is increased under the conditions of the economically most-developed countries (2010). Keller also claims that the social aspect has been dissolved, which is created by isolated and artificially interconnected islands in

the form of the social sector losing the ability to integrate and regulate the society as a whole, and is subordinated to purely economic regulation (2007). Pugh (2005) adds social work education is now governed, in large part, by neoliberalism considerations. This is not to argue crudely, however, that the entire field has been subjected to wholesale transformation, and that it is now entirely dominated by a neoliberal agenda.

According to Cleary (2018), academic independence must enable open dialogue and reflection regarding the topic of values of neoliberalism changing the character of education without fear from individual or institutional reprisals. If there is not such a space that would enable self-reflection and criticism, it is necessary to create it to be able to maximize educational quality as well as to maintain the principle of academic freedom. The author's research has utilized experience of individual academic workers that discusses doubts regarding the systemic impact on the market-university sector on education in social work in Great Britain. Based on the study, the author proposes that the current critical and anti-liberal analysis as part of academic social work is spread in such a way that it takes into account the university sector with the aim to develop collective, coherent, and transformational strategy for the future of the university education in social work.

Individual authors of the aforementioned treatises have agreed on the implications of transformation of society and their impact on the area of the education in social work. Analysis of these expert treatises also corresponds to the theoretical discourse resulting from the work of Keller, Beck and Bauman.

The impact of transformation of the society on social education work and its possibilities

The last section deals with the summary of transformation of society in relation to the education of social workers and in particular in the possibilities proposed by the authors of the analysed expert treatises. Witkin (2014) has defined specific ideas needed for enhancing transformation of the education. The following ideas rank among them:

1. Creativity and imagination – change of the educational content requires more than the criticism of the conviction and presumption. It requires imagination "how it could be different". The ability to imagine new possibilities, overcome borders of what is considered to be true, existing or possible. Creativity is an engine for imagination that supports new ways of understanding of subsequent reactions. In the contemporary environment of neoliberalism and technocratic approaches, the meaning of imagination and creativity based on evidence decreased.

2. Questioning and challenging – these are two interconnected strategies enhancing imagination and creativity. In general, questioning deals with challenging general presumptions of the theory or established or acquired presumptions. It is the manner of debasement of knowledge in such a way that it can become the background material for critical analysis.

Change of the educational system in social work enables and requires students (including teachers) to maintain a critical approach to their own as well as other ideologies, theories, convictions, presumptions, and practices. Whereas in this context the author does not consider critical approaches to be negative within the meaning of aspiring for elimination or silencing of their opinions. Deepening education of social workers is also crucial via life-long education that dwells in the active search and participation at educational events, coaching, training, and other events, meaning with the activity of the actual social workers themselves (Abramovitz, Zelnick, 2015).

In this context, Reisch (2013) draws your attention to the paradoxical fact of how schools may satisfy formal requirements to direct the students' work experience towards economic and social justice when most of the students miss the understanding how the economy functions or how it has changed during the recent decades. It is ironic that due to these changes, there are no requirements to supplement the education with theoretical or practical content focused on the nature of the work and its meaning on human development and family welfare.

Preston (2014) also deals with the question to resist the impact of neoliberalism on the area of education for social work. In conformity with other authors, he has proposed a solution, radical transformation of the overall education based on a new understanding of the area of cooperation among scholars, social workers, students, and service users – the aforementioned needs to be implemented on the multinational/global level.

In the context of the society transformation, it is crucial to build on the current discourse, transfer it above the dichotomy of the political and philosophical debate, change reactions based on understanding the capital and power field of one's own disciplinary knowledge (Donovan et al., 2017).

Morley (2013) claims similarly that if the use of the critical pedagogics and critical reflection is part of the education in social work, it also provides a guarantee against neoliberalism in the context of its implications for the practical education of social workers. As part of his research, the author was interested in testing abilities of critical reflection to develop alternative thinking and procedures that could create opportunities for a change. He proposes critical reflection as the process that is particularly based on elements of deconstructive thinking that could provide means for reconstruction and thus transformation of manners individuals perceive their social worlds with. Some of the specific principles of the critical theory are relevant for the needs of this essay (Morley, 2013):

1. the interconnection of personal experience with a wider social as well as political context – including understanding how individual experience is construed from the social perspective. This also involves the ideological analysis of what position the dominance on the micro and personal level has and the recognition of the close relationship between insight and power;
2. the analysis of how power functions both on the structural and the personal level including awareness of how individuals may use the personal power in structurally defined contexts
3. sufficient work experience;
4. the obligation for social transformation and changes (in particular how changes acquired in micro/personal context have further impacts on structural changes);
5. assessing empirical knowledge and subjective ways of insights (e.g. personal, social and expert knowledge); and
6. the ability whereby people use their life chances and the critical reflection for reconstruction of their identities, opportunities and circumstances.

In the aforementioned, the author's understanding of the social construction of reality is perceived as positive or needed. This is, however, in contradiction with Keller (2013) who criticizes a social construction of reality. In his opinion, some society members are convinced that their lives are not socially-conditioned, and that it is crucial in how they create the reality themselves. Free construction and reconstruction of the world is, however, interconnected with the growth of the fictive, demonstrated, and engaged. The concept of construing social reality may be misused in several aspects. (1) First of all, it may be used for suppressing the matter of the level of truthfulness/illusoriness of structures. (2) Secondly, it lays emphasis on constructivism, and it leads to ignorance of the matter of existing power inequality. (3) Thirdly, the strict constructivism leads to the lack of interest in reality and all that is apart from the subjective approach of the researcher (methodological level); we cannot deduce from constructivism what relations this emphasis on freedom and arbitrariness of our approach to reality actually legitimizes (Keller, 2013). The increasing level of regulation, standardisation and prescription, especially in the curriculum and its delivery, is diminishing the independence of educational providers and tending to create a 'one size fits all' approach to professional education and training. Furthermore, the development of professional service standards, professional registers and codes of conduct, all ostensibly aimed at providing better and safer services for the public, are also creating powerful regulatory mechanisms which

may be used to discipline not only erroneous and poor practice, but also unorthodox perspectives and dissenting practitioners.

When summarizing the second part of the work, we may claim that it stems from the analysis of expert texts, that acceptance of neoliberal presumptions has significant impact on the education of further social workers, thus we may briefly summarize that stress on neoliberalism shifted the focus of social work rather onto the individual than the structural transformation away from the resistance to changes and closer to adjustment, flexibility and meeting the "disciplinary regime" that was created by neoliberal politicians. Moreover, marginalisation of the macroeconomic practice as part of the education in social work and the profession of social work as a whole, has implications of requirements on accreditation, acts of licencing and depoliticisation of the practice that enhances a "corruption" of the vocabulary of this profession. In spite of the fact that the terms such as social justice, oppressing and reinforcing status are freely used without any limitation, they have been withdrawn from wider political and ideological discussions. Furthermore, with a focus on the individual adaptation, ongoing dependence on practical theories and methods that lay emphasis rather on balance than change and rather on consensus than conflict was reinforced. According to Garrett (2009) it could, of course, be argued that social work education might provide something of a bulwark against the encroachment of neoliberal hegemony within the profession: that is to say, it could be maintained that the profession – given its commitments, referred to earlier, in the IFSW Code of Ethics – would be able to instil and defend a set of values which might counter the incursion of neoliberalism into social work. However, here one of the main problems for more progressively inclined educators has been that the forces of neoliberalism have sought to 'close down' the spaces for alternative ways of perceiving and doing social work. One of the main ways of achieving this, of course, has been to try and ensure that the professional formation of new social workers fits with, or does not unduly destabilize, neoliberal nostrums.

In the 21st century, educators in the social field will have to deal with basic challenges regarding the purpose of the social work in the fast-changing environment; whether the education will support a narrow or wide approach to the profession of the social work and its functions or not, and in particular what forms of development of knowledge and transfer are needed for fulfilment of the mission of the profession. In fact, social workers and social educators currently determine the professional role of new social work that arose as a result of neoliberalism. Instead of submission to the priorities of the neoliberal regime, social workers and educators should again focus via their research on recovery of community work (Reisch, 2013).

Wehbi and Turcotte (2007) has argued that the growing influence of neoliberalism is being felt in the reshaping of social work education. The worth of research is being increasingly tied to the viability of funding specific research topics. Similarly, the quantification of a scholar's publication record measured in terms of "productivity" is more indicative of the worth of her or his scholarship than are other criteria. Finally, courses are expected to prepare students to fulfil the needs of the market. Freedom of thought, creativity, and diversity are being sacrificed at the altar of neoliberalism.

To summarize, due to the aforementioned reasons, it is necessary to study development of social work and to adjust education to new, postmodern conditions. We may see that there are numerous opinions of what is radical and critical education, however, in most cases they complement each other and provide a sort of proposal on how to maintain the profession of the social work as stable in the fast-changing conditions of current society. Chytil (2007) also confirms the situation and claims that education in social work does not critically reflect changes in the society, and that schools follow in particular the economical perspective. This, however, leads to the fact that social workers are not able to reflect modern tendencies.

CONCLUSION

We may understand education in general as another source of insecurity, in particular for children of the middle-class. In relation to education, there is a paradoxical situation. On one hand, the value of diplomas has decreased, but on the other hand their quantity has increased. If an individual does not have the particular educational certificate, his/her chance to be employed automatically decreases even to the level that he/she will not be employed at all. In this regard, significance of the education gained is far more important than any time before. The other side of the coin is the fact that in comparison with the previous years, already gained education does not ensure that the particular person will actually get an adequate position. There is still less and less security, and education loses its value in these regards. The education as it was understood in this text is a key to the area of social work as a profession and its future, in particular in relation to the response to the constantly changing environment. It is clearly evident from the analysis of the depicted expert treatises that the very first step for stabilisation of the social work profession is the education of future social workers. The authors agree that students should be led to critical and conceptual thinking and to participate in the current specialized discussions. They should also be able to realize and afterwards reflect upon the impacts influencing social work, to maintain a permanently critical approach to their own ideologies, theories, convictions, presumptions, and practices, and to those of others; they should be able to interconnect personal experience with the wider social and political context, in particular via sufficient practice where they currently experience the critical approach. Students may afterwards transfer their skills and abilities gained during the theoretical and practical education to their profession, which leads to more effort needed for support of social change.

Not only students in the process of education or social workers via active self-education during the whole performance of their profession, but also scholars in the academic community, should critically reflect on general issues regarding the purpose of the social work in the fast-changing environment. They should also consider which forms of knowledge development and transfer are needed for fulfilment of the profession.

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Empowering Community Work
in Elastic-Reflexive Transformation –
A Nordic Perspective from Sweden

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Päivi Turunen[1], senior Lecturer/PhD in Social Work, previously worked as a social worker and community worker within municipal social services, encompassing work with social assistance, social pedagogy with Roma people, field-based social work with young people, and community work and planning in a new-built housing area. She is co-editor of two books about community work in Sweden. Research areas have encompassed diverse directions of community work in urban and rural contexts, explored from socio-political, socio-spatial and gender perspectives.

Abstract

OBJECTIVES: The aim of this article is to highlight empowering community work in elastic-reflexive transformation within professional social work in the Nordic context under the neoliberal transition of welfare states, focusing on Sweden. Two cases from Sweden: community work in a suburb, consisting of a municipal activity, and an association-based community project in a city-centre closed housing area are described, analysed, and compared. THEORETICAL BASE: Theories of empowerment and community work incorporating social policy and socio-spatial perspectives on local communities. METHODS: Literature review and qualitative case studies encompassing the triangulation of methodological devices (documents, webpages, interviews, field visits and observations, and a follow-up survey) within practice research. OUTCOMES: Community work has been transformed and has almost totally disappeared from professional social work in Sweden. Compared to the 1970s, community work has become less political, structural or collectively confrontational, and its aims of empowerment are more individually supportive, group-orientated, and resilient. SOCIAL WORK IMPLICATIONS: There is a great need to develop community work and the associated empirical research within professional social work, paying attention to changes in the everyday lives of people in marginalised urban and rural housing areas. Even comparative studies between diverse countries are asked for.

Keywords

empowerment, community work, social work, neoliberal change, social development and change, socio-spatial aspects, transformative praxis, Sweden

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INTRODUCTION AND AIM

In the Nordic countries, community work was introduced into modern professional social work during the 1960s, although older examples are also found within the settlement movement and early social work at the beginning of the 20th century (Lindholm, 1993; Turunen, 2004; Hutchinson, 2009). Community work had its "golden years" within professional social work in the municipal settings during the 1970s but became a project-based and marginalised practice within the Nordic welfare states, with only a few exceptions. The specific aims of this article are: to discuss the transformation of Nordic community work within professional social work under constantly changing societal circumstances, with a focus on Sweden, and to describe, analyse and discuss two ongoing cases of community work using theories of empowerment and community work. Firstly, the transformation of community work is described and problematised; secondly, the theoretical framework on empowerment and community work is presented, and thirdly, the methods of studying the two cases are explained. One of these cases is community work in a suburb (Samhällsarbete, Bifrost) in the municipality of Mölndal, near Gothenburg. This is a municipal case (a governmental case), carried out as a regular activity. Community work in Bifrost has been ongoing for more than 20 years in a segregated suburb, the one case in Sweden that has officially called for community work since the end of the 1990s. The other example is an open meeting place, Kulturum (Room of Culture), which has been run by a local association for over ten years in Brynäs, an old working-class district near the city centre of Gävle, north of Stockholm. This is a non-governmental case, carried out as a temporary project. These two cases represent two different organisational forms of community work in Sweden, even though they also share similar traits in their activities. Finally, a comparison is made between these two examples of empowering community work, which also illustrate the transformation of community work and empowerment in both theory and practice in Sweden.

THE TRANSFORMATION OF COMMUNITY WORK IN THE NORDIC COUNTRIES

Nordic welfare policies refer to the macro-scale policies of social security and social care services on the one hand, and micro-scale policies of social work (assistance, counselling and means-tested welfare benefits) on the other. Community-orientated approaches at the meso-level have not been the first priority of either the welfare state or municipal social services (Turunen, 2004; 2009), even though social-service legislation mandates community work within the social services and social work with the aims of improving living conditions and preventing social problems (Hutchinson, 2009).
The transformation of Nordic community work is associated with the transition of welfare states in the era of globalisation and global neoliberalism (Turunen, 2004; 2009; Sjöberg, Turunen, 2018). Community work reflects these societal changes and has become elastic in order to fit in with constantly changing societies and local communities. In the Nordic context, Sweden has been the leading country in terms of comprehensive and generous welfare policies, with the universal goals of taking care of citizens "from the cradle to the grave". Sweden also took the lead in progressive community work, especially during the 1970s in the Nordic context. Since the 1980s, the Swedish welfare state, like many others, has become deregulated, privatised, marketised, informalised and individualised, and gradually less universal, equal or generous in its policies (e.g. Larsson, Letell, Thörn, 2012; Sjöberg, Turunen, 2018; Szebehely, Minger, 2018). As a consequence of this, welfare and service gaps have increased between rural and urban regions (SOU, 2017:1), and a number of suburbs have become marginalised residential areas, where socio-economic segregation coincides with ethnic segregation (Andersson, Bengtsson, Myrberg, 2016). These areas have not only become poorer, they are also socio-economically and socio-spatially excluded from mainstream society, although to differing degrees (Lundgren Stenbom, Turunen, 2018). These marginalised suburbs have become impoverished, are characterised as vulnerable, extremely vulnerable and risky

areas, and are now the scene of increasing gang criminality and violence (Polisen, 2019). It was also in these areas that social work, field-based social youth work and community work were cut off or centralised during the late 1980s and after (Turunen, 2004; Sjöberg, Turunen, 2018). Some of these suburbs are currently also overrepresented in the statistics of deaths concerning Covid-19. Today, the need for preventive work is again highlighted by most stakeholders, from the police to critical researchers, as a result of the alarming socio-spatial and health situation in these vulnerable suburbs.

The transformation of modern community work in the Nordic countries can be divided and described in the following six phases, based on Turunen (2004; 2009), Hutchinson (2009) and Sjöberg and Turunen (2018):

1960: Introduction of modern, professional social work
1970: Transmission and radicalisation
1980: Initiation of national discourses and practices
1990: Academisation and further differentiation into diverse sectors
2000: Increasing transnationalisation through the European Union
2010: Re-emergence of professional social-work discourse

The introduction of modern community work within professional social work during the 1960s was primarily achieved by older female social workers who had studied abroad, especially in the United States after World War II. The discourses and practices of community work were radicalised by a younger generation of community workers, primarily young men, who wrote reports and books on community work during the radical 1970s. This younger generation of community workers was influenced by the writings of Karl Marx, Saul Alinsky, Antonio Gramsci and Paulo Freire, as in many Anglo-American countries (see further Pyles, 2004; Popple, 2015; Sjöberg, Turunen, 2018). During the 1980s, specific national concepts and discourses were introduced into four Nordic countries, e.g. social environmental work (Sosial Miljøarbejde) in Denmark, structural social work (Strukturinriktade insatser) in Sweden, structural social work (Rakenteellinen sosiaalityö) in Finland, and environmental neighbourhood work (Nærmiljøarbeid) in Norway (Turunen, 2004). During the 1990s, some academic theses and scientific research reports focusing on community work were published. Transnationalisation increased through membership of the European Union, which promoted community strategies and cooperation between countries and sectors. Since 2010, there have been signs of the re-emergence of community work within professional social work in each Nordic country.

Theoretically expressed, the transformation of Nordic community work is related to differentiation, including tendencies towards both divergence and convergence (Turunen, 2004; 2009). Discourses have fragmented in separate directions within diverse sectors and disciplines, while the working methods described are still quite similar to those conducted in neighbourhood work, community development, community organisation, or community empowerment. Regardless of context, community work and similar types of community-orientated approaches are still, to a great extent, conducted from a neighbourhood/community centre or meeting place, and have surprisingly many similarities with the type of community centres and community work started by the settlement movement at the end of the 19th century (e.g. Addams, 1910/1981; Chung Yan, Sin, 2011; Sjöberg, Turunen, 2018).

In sum, Nordic community work has become fragmented and has gradually shifted from professional social work in social services into other sectors and disciplines, where new discourses have replaced the concept of community work. Today, there are a number of community-orientated discourses, such as community social work, ecosocial work, metropolitan work, social economy, soci(et)al entrepreneurship, sustainable social planning, voluntary community work, local crime prevention, local public-health promotion, etc., and diverse discourses of empowerment (Hutchinson, 2009; Sjöberg, Turunen, 2018; Sudmann, Breivik, 2018).

FROM COMMUNITY WORK TOWARDS COMMUNITY SOCIAL WORK

In the Nordic context, outreach casework, group work and community work have merged into community social work, utilising a range of methods and a mixture of public and voluntary social work (Turunen, 2004; 2009; Sjöberg, Turunen, 2018). As I conceive it, community social work is not pure community work, which has traditionally taken a more resident- and community-based approach. Community social work is more client- and authority-based, and in some cases can also include social assistance and social care, or diverse forms of treatment, from rehabilitation to baby-massage, at least in the Nordic context (Turunen, 2004; Sjöberg, Turunen, 2018). During the 1970s, community workers made a clear difference with their community work and more authority-, client- and treatment-based approaches in Sweden. Community work was also discussed in more political and structural terms, requiring critical awareness and action aimed at social change and social justice for vulnerable people living in underprivileged housing areas. In addition, a clear distinction was made between top-down and bottom-up approaches (Wahlberg et al., 1978).

In the case of Sweden, other actors/stakeholders, such as housing companies, tenant movements, public-health providers, parishes, diverse associations, cooperatives and even private firms, but also some social movements, have taken over community-orientated work and have filled the vacuum of community work formerly conducted by professional social workers (see further Turunen, 2004; 2009; Sjöberg, Turunen, 2018). Kulturum is one of the new actors in this field. These new actors are seldom acquainted with the international or Nordic tradition of community work, and lack knowledge about its theories and methods. In Sweden, the transformation has resulted in polarisation: an increased professionalisation in academic communities and de-professionalisation in practice (Turunen, 2004). In order to reverse this trend, an initiative was begun for a new Swedish book on community work in 2015, including both theory and empirical examples, published in 2018 (Sjöberg, Turunen, 2018). In 2017, the Swedish government set up a committee to review the social-service law in relation to sustainable social services and structurally preventive social work (Dir, 2017:39; SOU, 2018:32). Finally, in 2018, the Swedish Research Council for Health, Working Life and Welfare announced a national ten-year research programme to manage major social challenges through research and innovation. One of the eight prioritised research areas is early/preventive measures to be taken by the social services, including community-based social services and involvement in community planning (Forte, 2019).

Even in other Nordic countries, there are signs of the re-emergence of community work within professional social work. New books, reports and scientific articles about community work and community-orientated approaches have been edited by Hutchinson (2009) and Breivik and Sudmann (2015) in Norway, Matthies and Närhi (2016), Roivainen and Ranta-Tyrkkö (2016) and Kostiainen et al. (2019) in Finland, Jørgensen and Arp Fallov (2017) in Denmark, Sjöberg and Turunen (2018) in Sweden. Sudmann and Breivik (2018) have also edited a specific Nordic issue on community work in *Community Development Journal*. Sjöberg, Rambaree and Jojo (2015) have compared empowering work within social work in Sweden and India, and Sjöberg, Többe-Schukalla, Singh et al. (2016) have made comparisons between community work in Germany and Sweden. Most recently, a scientific article on ecosocial change and community resilience in a coastal fishing community has been published by Rambaree, Sjöberg and Turunen (2019) in *Journal of Community Practice.* Finally, in 2019, a call for abstracts for papers for a special issue on Community Work in Nordic Welfare States in Transition – Conditions, Dilemmas and Directions was announced in the journal *Nordic Social Work Research*.[2] This issue will be published around 2021–2022.

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[2] See: https://think.taylorandfrancis.com/community-work-nordic/?utm_source=TFO&utm_medium=cms&utm_campaign=JOI11440

CONCENPTUAL AND THEORETICAL FRAMEWORK

Nordic community work has taken inspiration from international community work, the traditions of community development and community organisation overseas, and even the tradition of community planning in the Netherlands, developing diverse variants of these within each country and in local contexts (Turunen, 2004; Hutchinson, 2009; Sudmann, Breivik, 2018). Compared to the international traditions of community-orientated approaches (Brake, Deller, 2008; Stepney, Popple, 2008; Healey, 2012; Pyles, 2014; Popple, 2015; Mayo, 2016), Nordic community work within professional social work has to a great degree been a modified and modest approach due to being under welfare-state control, apart from a few radical exceptions (Sjöberg, Turunen, 2018). Indeed, Swedish community work has been recognised as an environmental approach to meeting needs and solving social problems, with the aim of promoting good living conditions and human wellbeing – by means of locality development, social planning and social action (discussed later as social mobilisation) – for social development and change. Theoretical perspectives have ranged from those developed within social work, social policy and sociology to political science (Swedner, 1969; Sundh, Turunen, 1992; Sjöberg, Turunen, 2018).

Practical working methods have encompassed neighbourhood work, cooperation and organising, social planning and social mobilising, including diverse types of empowerment. Three types of empowerment have been distinguished: psychological empowerment at the individual level, social empowerment at the group level and political empowerment at the community and societal level, also known as collective empowerment (Lindén, 2009; Sjöberg et al., 2015; Sjöberg, Turunen, 2018). In general, empowerment in Sweden has dealt with psychological and social empowerment, often expressed in terms of "Your own power" (Egenmakt). The emphasis is laid on individuals and their opportunities to master and take responsibility for their own lives by means of knowledge, support and material resources supplied by the state, municipalities and other networks (Askheim, Starrin, 2007:216).

With reference to North American research, Hardina (2003) states that empowerment in social service organisations has dealt with increasing the actual power of the client or community, involving three dimensions, as follows:

"An individual is empowered when his or her self-esteem or self-efficacy is increased. At the intrapersonal level, empowerment comes through the construction of knowledge and analysis of social problems acquired through shared experience. At the community level, empowerment occurs through the development of service resources and social change strategies, which in turn help individuals gain mastery over the environment" (Hardina, 2003:26).

Hardina (2003) concludes that the intent of an empowerment approach to community practice within social work is to foster social change at all levels: individual, group, organisation, community and society, where citizen participation is crucial. According to Ledwith (2016:xiii), empowerment means *"a process of collective liberation from oppression by becoming critical"* in the community development context. Here, the focus is on the interlinked intersectional factors of race, class and gender relations as three overriding sources of oppression, and analyses of power and collective action to change *"the world to a more a fair, just and sustainable place"* (Ledwith, 2016:3). This collective aspect of empowerment is also discussed by Sjöberg, Rambaree, and Jojo (2015), but not directly in terms of gender or race. In this present study, the theoretical perspectives on empowerment developed by Hardina and Ledwith are used to analyse the two cases.

In Sweden, professional community work has primarily been connected to socio-political analyses of living conditions and environments and their improvement through both planned and direct actions (Sundh, Turunen, 1992; Turunen, 2004; Sjöberg, Turunen, 2018). Community has chiefly been identified along three dimensions: as a spatial/territorial/geographical area, as a social entity of diverse groups of people, and as a feeling of togetherness. More recently, virtual communities and place-making communities have been included in conceiving community (Sjöberg, Turunen, 2018). At the

end of the 1970s, community work was defined as *"to analyse social disadvantages in society and from this analysis, change different social systems as well as form relationships with different groups, in order to carry out the desired changes"* (Swedner, 1969:21). During the 1970s and later, Ronnby has emphasised the mobilising of local communities and the oppressed in an empowering manner as follows:

"Community work is principally helping and stimulating oppressed, victimized and unorganized people to come together so that they can take better care of their interests or together change a problem in their reality and conditions of living. Mobilizing local communities means mustering all kinds of local resources: human capability and material supply, that are needed. Ordinary men and women will be encouraged to be active and learn together with fellows, and to take control over their lives and future. They can create a humane and democratic society" (Ronnby, 1994:209).

The Swedish conceptualisations of community work described above are used to analyse the two cases. The later discussions of Swedish community work have summarised the existing knowledge into a transformative praxis, including theories, skills and methods as well as the ethics of community work (Sjöberg, Turunen, 2018). The ethics discussed within community work are the same type as in professional social work and community development, requiring both ethical reasoning and ethical acting (Banks, 2012; Sjöberg, Turunen, 2018; Banks, Westoby, 2019). Most recently, the discussion of ethical community work in the Swedish context has dealt with ecosocial work and community resilience, meaning increased attention being paid to both social and ecological issues, when analysing sustainable development and human-nature interactions (Sjöberg, Turunen, 2018; Rambaree, Sjöberg, Turunen, 2019). Even spatial justice has been highlighted from ethical and human geographical perspectives, dealing with social interactions in space and place, as well as rights and access to them. In human geography, justice does not only mean social justice; it also has a spatial dimension, and this dimension has not been discussed to the same degree in community work as social justice, either in Sweden or internationally (see further Turunen, 2017).

The most striking thing that has occurred recently in Sweden is that the book *Rules for radicals* by Saul Alinsky (1971), which during the 1970s was a handbook for radical community workers, has become a handbook for the political grass-roots mobilisation of the extreme right, and simultaneously even for the youth section of the Left Party (Ung Vänster) (Wåg, 2019). This shift also illustrates the elastic situation of community work, where established political borders no longer apply as before.

In sum: community work is situation-, context-, space-, place- and time-based, as well as being an action-orientated praxis, which is undergoing a reflexive-elastic transformation in relationship to societal changes (Turunen, 2009; Sjöberg, Turunen, 2018). Community work is constantly changing in a turbulent world. It is also difficult to capture and replicate. The cases described in community work are generally used as examples for reflection and learning, not for generalising or copying. Even the cases of Bifrost and Kulturum examined in this article aim to do this. These cases were primarily selected because they represent two types of organising community work: a municipal and an association-based case.

METHODOLOGY: PRACTICE RESEARCH INVOLVING QUALITATIVE CASE STUDIES

Since the 1970s, most Swedish studies of community work have been field-based case studies in urban and rural areas, being examples of practice research in which community work has been studied by community workers, either alone or in close co-operation with university researchers (Sundh, Turunen, 1992; Turunen, 2004; Sjöberg, Turunen, 2018). A number of the very early studies of Swedish community work were action research in which research and social change were combined (Swedner, 1982; Wahlberg, 2013). Practice research in the Nordic countries has taken diverse directions, in the form of research on practices, conducting research together with practitioners, research conducted by practitioners, and even user-led research (Marthinsen, Julkunen, 2012). Swedish practice research within community work (Sjöberg, Turunen, 2018) has

similarities with international community-based studies in which co-producing research has been used, involving internal and external studies in close collaboration between diverse partners (van Ewijk, 2011; Banks et al., 2019).

The research approach in this article is a mix of internal and external studies with an abductive design, combining both theories and qualitative descriptions of two cases, informed by the case-study methodology of Merriam (1993) and Yin (2014), which was also used in previous studies by Turunen (2004), Lundgren Stenbom and Turunen (2018). The design involves research on practices, in close cooperation with practitioners, by gathering data and reflecting on the interpretations of the data together. Concerning Bifrost and Kulturum, triangulation was used to collect research material by means of documents, interviews, field visits and observations, internet homepages, and finally by means of a follow-up survey involving follow-up questions. These included questions about the background, context, goals, values, methods, theories/philosophy, co-operation, most important results and challenges, and perspectives on empowerment and empowering community work. The results are reported as brief summaries of each case. The community workers who participated in the study were four women of diverse ages, working in everyday life at grassroots level. They were also asked to read and give comments on the summarising description of each case. The final analysis, for which I am responsible, was carried out using theories of empowerment and community work, focusing on an inquiry into what kind of empowering community work is being employed and what kinds of similarities and differences can be identified between the two cases in question. The abductive-heuristic reasoning in this article involves combining both induction (two practical cases) and deduction (theories of community work and empowerment), adopting a pragmatist perspective on describing and exploring the characteristics, similarities and differences between the two cases, for comparison and reflection. The aim is not to try to generalise from two cases but to discover and visualise adequate and critical aspects for further reflection and development – by means of "learning by cases".

THE CASE OF BIFROST: "THE MISSING PIECE OF THE PUZZLE"

Community work in Mölndal was initiated by a professional social worker from social services in 1997, in a suburb called Bifrost. This suburb has 4500 inhabitants, of whom approximately 35 percent are people with a foreign background. Community work was started in a minor area of Bifrost, "as a missing piece of the puzzle", meaning that there was a lack of cooperation between diverse stakeholders (Ekström, 2006). This area has approximately 1000 inhabitants, with a larger proportion of people with a foreign background than in Bifrost in general. Mölndal lies adjacent to Gothenburg on the west coast of Sweden. It is a merged municipality created in 1971, including both suburbs and a rural environment. Overall, Mölndal has approximately 70 000 inhabitants and community work in four residential areas with a co-ordinating community worker and a collaborating area group in each one.[3] In the municipal leaflet, "Together we can achieve more" *(Tillsammans når vi längre)*, community work in Mölndal is described as area-based, combining an area analysis of local living conditions, prioritising and an action plan, encompassing community art (art, decoration and creative activities for all ages), security walks, integration projects, local events, neighbourhood gardening, and neighbourhood-based sports grounds *(Näridrottsplatser)*. A model of employment for young people working for security and comfort in the area has been developed for all four areas.

Cooperation for community work exists between Culture and Leisure *(Kultur och Fritid)*, Social Services *(Socialtjänst)*, schools, housing companies, etc., which have also co-financed it. Even though community workers are permanently employed, they have also been forced to apply extra

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[3] See further: https://www.molndal.se/startsida/kommun-och-politik/fakta-om-molndal.html; https://www.molndal.se/startsida/bygga-bo-och-miljo/samhallsarbete-i-bostadsomraden.html; https://www.molndal.se/startsida/bygga-bo-och-miljo/samhallsarbete-i-bostadsomraden/bifrost.html

resources to particular projects. Other cooperating actors include local people, particularly young people, associations, diverse religious communities and adult-education associations, as well as other public services ranging from schools to public health.

Bifrost was built in 1967–1971, during the so-called Million Programme (1965–1974) in Sweden, when a million apartments were built for people moving from rural areas and other countries to cities and towns to work (compare Lundgren Stenbom, Turunen, 2018). More recently, migrants from diverse parts of the world have settled in the area, which has had empty apartments available. Most of the housing in Bifrost consists of tower blocks, mixed with some semi-detached houses. Bifrost is a suburb that shares the same type of characteristics as other suburbs built during the Million Programme, with rental apartments in tower blocks. It is also a low-income area with increasing socio-economic and socio-spatial segregation, although it is not identified as being among the most vulnerable suburbs in Sweden (Polisen, 2019).

In Bifrost, community work was started as a research-based project at the end of the 1990s, at a time when there were many signs of unrest, friction and disputes between diverse groups, and car fires were taking place. At the beginning, community work was focused on young people aged 15–19 years, and even younger children who were out late in the evening, who were a problem and a worry for the neighbourhood. The current community work is conducted with diverse groups and addresses issues from labour activation for adults to groups working on environmental issues. Community workers in Bifrost are professional social workers, working at three levels of society: the individual, the group, and the local community level. Four strategic issues have been on the agenda from the beginning: conflict resolution, democracy and participation, adult responsibility, and young people's progression to adulthood. The value-based principles have included: commitment to equality, continuity by being placed in the area, relationships and trust, awareness-raising about societal trends, bridge-building between residents and the Town Hall in both directions, and being responsive and flexible in relation to the needs and wishes of local people and other stakeholders. The most central methods and measurements have included the employment of young people, user participation as co-creation, and cooperation around diverse local issues by enabling both large and small meetings to discuss them.

The problems with financing and the anchoring of community work within the municipality are still highlighted as challenges, even though community work in Bifrost has been a regular activity since 2000. Regardless of their secure employment and evidence-based results, community workers are situated at the margins of the municipality and are often forgotten as possible cooperating partners at the structural level. Among their results, community workers point out that community work has spread to three other areas and other sectors, it has become a regular activity of municipal services, gang criminality has been quelled, and Bifrost Park, a community sports ground *(Näridrottsplats),* has been built after 15 years of work and campaigning for it, together with young people and other stakeholders. Community workers also received 500 000 SEK for a two-year crime-prevention project, which was successful according to an external evaluator (Turner, 2010). Currently, Bifrost does not have the kind of gang criminality that characterises the most vulnerable suburbs and is not included on the national list of these suburbs (Polis, 2019).

Theoretically, community workers have been influenced by the theories and methods developed within community work since the 1960s in Sweden, including the theories of Freire (1972). Additionally, they have also found a need to use other theories in their everyday work, such as those of salutogenesis developed by Antonovsky (1991), learning theories by Senge (1993), conflict escalation by Glasl (1999), and motivation theories by Revstedt (2005), as well as philosophies presented by poets and poems, such as "To the reflection" by Kirkegaard and "Doktor Glas" by Söderberg. Empowerment is discussed as community work and specified as *"Egenmakt"* (Your own power), including listening to and encouraging those who are of concern.

Compared to theories of community work (Sjöberg, Turunen, 2018), Bifrost is an example of neighbourhood work, combining community development and community-based social work. In

Bifrost, the latter does not mean authority-based client work or counselling, but outreach social work based on the tradition of community work, but renewed by theories of salutogenesis, conflict resolution, lifelong learning and motivation. Compared to theories of empowerment developed by Ledwith (2016), the type of empowerment is not directly political or intersectional, even though community workers do work with women and men and encourage young people to influence political decision-making. The type of empowering has more similarities with the theories of Hardina (2003), who discusses it at individual, group and community levels as the mastering of life and environment.

THE CASE OF KULTURUM: "AN OPEN MEETING PLACE IN THE SQUARE"

Kulturum (The Room of Culture) is a cultural association, started in 2008 in the district of Brynäs in the city of Gävle.[4] From the beginning, it has been an ethnic association, initiated by a Turkish immigrant and two mother-tongue teachers (in languages other than Swedish). Gävle lies to the north of Stockholm on the east coast of Sweden and has approximately 100 000 inhabitants. It is an old city, founded in the 15th century and is internationally known for its Christmas goat. Brynäs is an old working-class housing area built in the 19th century, close to the city centre, with a population of 8000 inhabitants, of whom 25 percent have a foreign background. There are both old and new types of buildings. Since the 1940s, Brynäs has been exposed to city regeneration. The wooden houses have gradually been replaced by suburban types of low-rise blocks of flats. Currently, nine out of ten inhabitants live in such blocks. Brynäs is a low-income area, with a median income approximately 70 percent of the overall median for Sweden, while in Gävle as a whole, it is 97 percent. Even the levels of education and health are lower than in Gävle or Sweden in general. Currently, plans exist for city densification and regeneration.

Kulturum has a director of daily activities (originally a teacher by occupation) and a chair of the association (health pedagogy by occupation), who are leading the community-based work in Brynäs and more widely. Kulturum is based in a locality with a small art gallery in the square of Brynäs, called Agö Square. In 2019, it had five employees and a number of volunteers. It is project-financed by the municipality (approx. 30 percent) and by a number of other organisations, such as a housing company, the employment office, educational associations, a folk high school, regional agencies, a national environmental agency and a foundation. Kulturum has been conducted as a temporary project for eleven years, even though efforts have been made to transform it into a regular service. This means that it must raise money each year to enable its continuing existence and activities. The daily co-operating partners are the Workers' Education Association (ABF) and the folk high school, Färnebo. Kulturum is open to everyone in Brynäs, but most of its visitors are people with a foreign background, refugees and immigrants from diverse countries, and some also come from diverse parts of the county of Gävleborg.

The association became a partner in the national metropolitan work *(Storstadssatsningen)* for regeneration 1999–2004, which contributed to processes opposing segregation in Brynäs. However, this national-municipal project did not make Brynäs less segregated or transform Kulturum into a regular activity. Compared to the community work in Bifrost, Kulturum is not a municipal body, even though it acts within a municipality. Community workers are not permanently employed. They are temporary project workers, risking unemployment every year. Kulturum does work towards the same type of goals as Bifrost, but on a voluntary basis, for promoting democracy and democratic ways of working (Kulturum, 2019). The general goals are still the same as those formulated in 2008, encompassing four goals: to initiate meetings between people from diverse

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[4] See further: http://old.gavle.se/PageFiles/4168/2018/Bryn%c3%a4s%20-%20Faktablad.pdf; http://kulturum.org/index.php, http://kulturum.org/index.php/om-kulturum, http://kulturum.org/index.php/om-kulturum/18-kulturums-historia-i-artal/20-2008; Kulturum (2019).

countries and generations, to promote equality between men and women, to organise meetings, and to be a forum for societal issues and citizen influence. The most important values and principles are the needs and interests of human beings and to meet these in practice. In terms of methods, Kulturum maps needs and tries to find solutions, by encouraging people to express themselves, take responsibility, influence others and find their place in society. Kulturum has used a number of similar types of methods as Bifrost, ranging from safety tours to creating a meeting place for all ages and cultures. The work of Kulturum is focused on tailor-made responses to the needs expressed by visitors and in cooperation with other stakeholders. According to Kulturum, their activity is unique to Gävle, although an outsider can find a number of similarities with community work in Bifrost.

In terms of results, a number of activities have been conducted since 2008, ranging from the local newsletter "We in Brynäs" *(Vi på Brynäs)* and a project among unemployed immigrants in cooperation with local schools. Kulturum has even initiated community days *(Steneparkens dag and Brynäs dag)*. An area group *(Områdesgrupp)* has been built by diverse stakeholders in Brynäs, in which even the field group for youth work from Social Services participates. Kulturum has created an open and lively meeting place with a homely touch in Agö Square. The most recent activity of importance has been language support for refugees. This support was started with three participants in 2014 due to a lack of municipal services, and by 2019 it included 150 people. During the autumn of 2018, the play *"Det finns ju tält i Mosul"* (There are, of course, tents in Mosul) was produced and acted by visiting refugees and performed for the local people of Brynäs, for students and staff at the University of Gävle and for citizens of the city of Gävle. The play is based on the personal experiences of refugees, their flight, fears and dreams, and was directed by community workers. The play was originally a health project, including being one aspect of learning Swedish. It has also been an empowering method for treating the traumas of war, flight, migration and life in Sweden. Recently, Kulturum has made a film of the play.

The great challenges, and major differences compared to community work in Bifrost, are the financing and recognition of Kulturum. According to Kulturum, there is little understanding of the particular situation of refugees in their everyday lives or of the work that has been done by Kulturum in the municipality and in Brynäs since 2008. Kulturum has tried to change the situation and to be accepted as a serious actor in Brynäs and within the municipality's integration policies, most recently by means of a self-evaluation (Kulturum, 2019). However, Kulturum is still a temporary project, which has meant everlasting insecurity, including stress, pressure and unhealthy working conditions for the staff. Even their venues have posed a challenging problem. According to Kulturum, the available venues are not adequate for all of the organisation's activities, since they receive 100–200 visitors weekly and run a number of group activities. There are also local rivalries and personal conflicts among the diverse stakeholders, which have affected Kulturum and its work in a negative way. Community workers point out that politicians and representatives do not understand the meaning or the impacts of Kulturum in civic society, even though these have been reported by Kulturum since 2008, most recently in its self-evaluation (Kulturum, 2019). Regardless of all these challenges, problems and conflicts, Kulturum is still a place and space to which people come of their own free choice.

Kulturum does not use any specific scientific theories. Its working philosophy is focused on human rights and the principles and values of the association. These are also expressed in its logo, in its colours and keywords: The red means humanity, the blue is organisational competence, the yellow is optimism, the green creativity, the black criticism, and the white objectivity[5].

Empowerment is discussed from two perspectives, concerning visitors and staff, respectively. Kulturum aims to provide a place and a space for acting in creative ways. In the words of the community workers of Kulturum: "We work all the time so that participants are able to take the

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[5] See further: http://kulturum.org/index.php

initiative for mastering their own lives". The most important aim has been to develop an open and welcoming way of working, in such a way that anyone can feel themselves to be recognised and understood as humans. Kulturum emphasises "learning by doing", and points out that it would be good if associations could spend more time on reflection and theoretical knowledge, providing that the theoretical knowledge is available to them. One of the community workers has a Kurdish background and has been influenced by the Kurdish fight for freedom and Abdullah Öcalan's ideology and philosophy. Finally, the idea of empowerment is symbolically expressed as "You are not human before taking your space in the marketplace", with reference to Greek philosophy, and to their work in Agö Square.

From the perspective of community work, Kulturum is an example of neighbourhood work in a voluntary association, standing for social service and assistance which has traditionally been publicly offered by the municipality. Kulturum is an open meeting place with a focus on community art activism, which has not been the most common form of community work in Sweden (compare Lundgren Stenbom, Turunen, 2018). Both traditional (mapping needs) and creative (gallery, theatre, handicrafts, film, etc.) methods have been developed. The focus of empowerment has been laid on individuals and groups, not directly on the collective empowerment of the entire population of Brynäs. Despite the large number of activities since 2008, Kulturum is still fighting for its existence from year to year. Indeed, it has survived by its own efforts, and has developed skills of resilience.

Comparative Analysis

Even though community workers in these two cases do not speak explicitly about collective empowerment against oppression in Marxist or intersectional terms, they work with local people (children, young people, adult women and men with diverse backgrounds) to generate empowering community work. Compared to Kulturum, community work in Bifrost is well anchored in the municipality of Mölndal, although not without struggles and action. From the beginning, it was connected to research, and later to outside evaluators, which contributed to its legitimacy. In contrast, Kulturum is an association with dual aims: to act for its members and for the housing area of Brynäs. Kulturum has developed advocacy-orientated methods among people with foreign backgrounds and has used self-evaluation as a method of anchorage. This strategy has not been successful within the public and local power systems. Concerning the similarities, in both cases, community work has been developed in relation to the needs and problems identified locally at the grassroots level. Both cases are also practical examples from everyday life, where community workers, four women in leading positions, are meeting needs and solving problems, both against the grain and with a tailwind, at the margins of the welfare state.

CONCLUSION

The elastic-reflexive transformation of community work is connected to neoliberal changes in the Nordic welfare states, resulting in its general decline since the 1980s. Indeed, some signs of re-emergence in professional social work in Sweden and other Nordic countries have existed since the 2010s. In Sweden, community work has almost totally disappeared from professional social work and has moved to other sectors under diverse headings (Turunen, 2004; Sjöberg, Turunen, 2018). Compared to the 1970s, the Swedish development and cases described in this article show that community work seems to have become less political, structural or collectively confrontational, and more individually supportive, group-orientated and resilient in its aim of empowerment. The two cases in focus here are practice-orientated activities, although in diverse organisational forms. Bifrost is an example of regular municipality-based community work in Mölndal, while Kulturum is an association-based project activity, fighting for its economic survival on a year-by-year basis in Gävle. Both of them work with local people in segregated housing areas, where everyday life

is becoming tough and rough for individuals and groups at the margins of the welfare state. Both cases also reflect the transformation of community work in Sweden, where it still lacks an academic and political legitimacy in general (Turunen, 2004; Sjöberg, Turunen, 2018).

The further development of empowering community work requires more scientific studies and comparisons in both theory and practice. The cases in this study show that there is an urgent need for structural changes and the empowerment of individuals, groups and communities in segregated housing areas. There is also a great need for empirical studies of how contemporary community work is discussed and conducted in diverse contexts, and how empowering community work can be developed in cooperation with practitioners, researchers and participants, not only in theory, but also in practice in a constantly changing world. This implies a need to regenerate and redevelop diverse forms of action research, follow-up studies, and even comparative studies. In the Nordic context, it is not enough to write theoretical-ideological books about what community work should be in order to ensure its legitimacy. More empirical studies on working methods, how they are implemented, and evidence-based results are required.

ACKNOWLEDGEMENTS

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Laura Béres and Jan Fook (Eds.).
Learning Critical Reflection: Experiences of the Transformative Learning Process.
Oxon, New York: Routledge, 2019

Being able to be critically reflective is important in any sphere of life and activity. It enables one to learn and develop as a person and a professional and it helps enhance practice for the benefit of oneself and those that one works with. For these reasons it is of utmost importance across a variety of professions. Yet, although it is a valuable and desirable skill to have, it is not always understood as a concept, nor is appreciated how one learns critical reflection or how one fosters it in one's practice. This useful book, which will appeal to a wide audience, explores critical reflection and the process of learning to be critically reflective, as well as using critical reflection in practice. It explores the emotional and cognitive experiences which take place for learners in becoming more critically reflective. It also documents learning in a systematic and holistic way, from the experience of people learning to be critically reflective. It does not argue for the value of critical reflection, suggest models for its practice, or provide evidence for its value. Rather, in a reflective manner, it seeks to provide illustrations of the experience of learning to be critically reflective from different perspectives and to allow readers to make up their own minds as to the upsides and downsides of the experience. It signals that there is no right or wrong way to learn critical reflection, and that the journey different people take to understand critical reflection and to become critically reflective will differ from person to person. It does not purport to give all the answers but reading this book, and learning from the experiences of others, will help one along the journey to becoming effective at critical reflection. Laura Béres and Jan Fook are leading figures in the field of critical reflection, and both have a wealth of experience in learning critical reflection, teaching it and of using it in practice, which they bring to bear in this book. Through reading this book one taps into their knowledge, skills, experiences, and critical reflections in these areas.

Another delight of this book is that one also benefits from the learning and critical reflections of the many others who have written chapters of this book. The book is introduced and concluded by the editors and several of the chapters are also written by Laura. The authors of the rest of the chapters include people who have learned about critical reflection and how to be critically reflective and how to use this in their practice.

The various authors in this book are separated geographically from across a number of continents and territories. They come from different backgrounds, with a variety of perspectives and live and work in different areas, contexts, and spheres of work. What joins them together is their experiences in relation to critical reflection – both in terms of learning it and using it in practice. Hearing the learning and experiences from these different voices gives a richness, depth, and authenticity to this work. It also demonstrates that it is has appeal to a wide audience.

This well-structured book is split into a number of sections and chapters. The first chapter is written by Jan and Laura and includes a literature review on the topic and explores

different approaches to critical reflection. It helps one to understand what critical reflection is and why it is important and sets the scene for the rest of the book. The next sections help one understand the critical reflection process and how to put it into practice, through exploring the experiences of learning critical learning by the various authors of the chapters. Laura and Jan expertly tie up the different threads in the book in the conclusion. This book will appeal to a variety of readers, including students, academics, and professionals from a range of fields and disciplines. It is relevant to all who want to develop their understand of critical reflection, what it is and how it is learned and put into practice effectively.

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