





EMPOWERING VULNERABLE GROUPS

Support was granted to activities designed to increase the scope and diversity of the support provided to socially vulnerable groups and to inspire these groups to engage in activities for their own and others' benefit.

- 143 projects (including 26 targeted at children and youth)
- 219 locations where activities were carried out
- 22 projects were national in scope
- 42,500 individuals received support
- 7,900 professionals improved their skills through training
- **21** improvements in the system of service provision
- **4,800 people participating in self-help**, self-organising and volunteering initiatives (including **1,301** people from socially disadvantaged groups)
- 143 NGOS extended or improved the quality of service provision

Projects were diverse both in terms of the type of socially vulnerable groups targeted and the forms and methods of engagement.

Supporting vulnerable groups

The activities were largely designed to provide support to individuals from groups vulnerable to social exclusion, for example people with disabilities and their families and friends, elderly people, children and youth from socially vulnerable communities, people with learning difficulties and mental disorders, families in crisis, inmates and convicts, individuals living with HIV/AIDS, homeless people, migrants, Roma, sex workers, victims of violence. Moreover, assistance was provided to groups previously rarely included in non-governmental support schemes, e.g. carers of disabled people or uniformed personnel suffering from post-traumatic stress disorder. In total, 42,489 individuals received support and they used one or more of 181 various services.

Forms and methods of support

Conventional methods of support were applied, such as legal and mental health counselling, training and workshops designed to encourage activity and involvement (e.g. physical activities, arts and crafts, computer classes, financial education), physiotherapy, building social knowledge and skills (e.g. self-presentation, communication, psychoeducation workshops). Support activities for children and youth were accompanied by initiatives designed to remove barriers in their access to culture and education.

Innovative techniques and methods were also used to reach and support the individuals most severely challenged. Legal and mental health counselling was provided not only on the premises in organisations, as would normally be the case, and through mobile help-desks, but also by home visits to home-bound individuals and by visiting residents in nursing homes. Counselling was offered in sign language through Skype and ooVoo; an emergency sign language service was set up using phone cameras to assist in urgent situations where translation was needed. Individuals who tend to stay away from institutions and care facilities were given the option of accessing support directly from field workers. The Romanian Roma community in Wrocław was assisted through community work. Street workers and party workers distributed information and provided

education to sex workers in Warsaw and encouraged them to visit the Bezpiecznik centre (a drop-in centre offering basic social support that is often the first step in a decision to use more substantial services, e.g. therapy). Street-working was used also by organisations working with people with addictions and children and youth from socially vulnerable communities. A hostel was set up for LGBT individuals suffering from hardships 22 and a hostel for individuals with addictions. Another innovative approach included a sexuality development workshop for individuals with physical disabilities.

The quality of support was enhanced with the use of innovative techniques of working with special needs groups, e.g. augmentative and alternative communication for people with multiple disabilities and cerebral palsy who are unable to speak, intervention visits to families in psychological distress, a new approach to problem solving, e.g. working with social networks (organisations and institutions that provide assistance in problem solving by co-designing public services to people in debt, family conferencing), the launch of new facilities or new programmes based on existing infrastructure (Child and Family Centres, local migrant integration policy), the development of new tools (response algorithms for teachers and health professionals in cases of suspected domestic violence, legal infographics for individuals with disabilities, a consumer bankruptcy qualifier).

Training of professionals and improvements in the system of services provision

The quality of services was strengthened by induction training for a range of professionals about the application of innovative techniques. Therapists learned meta-cognitive training for individuals with schizophrenia and introduced it in their practice, librarians acquired skills to serve readers with autism, welfare centre employees gained the skills to enable them to act as financial educators for their clients, police officers improved their skills of communicating with deaf people, etc. Altogether, 7,897 professionals improved their skills through training. They were mainly staff in centres that offer support to individuals vulnerable to exclusion and government officials and uniformed services who routinely interact with socially vulnerable individuals.

Furthermore, some activities focused on upgrading existing facilities. For example, 17 centres for individuals with intellectual disabilities (small homes or day support centres serving some 330 individuals) developed and implemented quality standards. Altogether, the programme implemented 21 best practices to increase the efficiency of service provision including quality standards and new work practices using innovative tools.

Self-organisation and self-help

Finally, there were a few essential activities designed to empower individuals vulnerable to exclusion: they were encouraged to speak for themselves, support other individuals, engage in the community. A group of self-advocates from Jarosław (32 individuals with intellectual disabilities) developed an understanding of their inherent rights and obligations as well as social skills that allow them to represent themselves on issues that are relevant to them. One of the successes of this process was a project proposed in the participatory budgeting process. People who have experienced a mental health problem learned how to design and engage in public speaking situations which allows them to provide others with peer support and advocacy. Self-help groups were formed that involve homeless people, carers of dependent individuals and individuals experiencing abuse. Parents of individuals with autism planned to form a community group for their children approaching adulthood. Ukrainian women living in Warsaw and neighbouring communities formed a Ukrainian Women's Club where they can meet and engage in joint activities. People who are vulnerable to exclusion (including youth from dysfunctional families) volunteered in social initiatives, e.g. food bank campaigns. Self-help, self-organising and volunteering activities attracted 1,301 people from socially disadvantaged groups. A total of 67 self-help groups and initiatives supporting various forms of self-organising and volunteering helped individuals vulnerable to exclusion.