Demographic change and active inclusion in Sofia: Community support centre and mother and baby unit

Cities for Active Inclusion

The EUROCITIES Network of Local Authority Observatories on Active Inclusion (EUROCITIES-NLAO) is a dynamic network of nine European cities - Birmingham, Bologna, Brno, Copenhagen, Krakow, Lille Métropole - Roubaix, Rotterdam, Sofia and Stockholm - each with a Local Authority Observatory (LAO) within its administration. Their aim is to share information, promote mutual learning and carry out research on the implementation of the active inclusion strategies at the local level.

The nine observatories are coordinated by EUROCITIES, the network of major cities in Europe, and supported through Inclusive Cities for Europe, a partnership between the European Commission (DG Employment, Social Affairs and Inclusion) and EUROCITIES.

www.eurocities-nlao.eu
1. BACKGROUND ON DEMOGRAPHIC CHANGE

1.1 Current city data and main trends

Sofia is the capital of Bulgaria and its largest city. It has a population of 1.3m (1,291,591 on 1.2.2011). In Sofia, 36.8% of the population have a higher education, more than double than the average for the country as a whole; 44.9% have high school education; and 17.8% have only a basic or primary education. There is a significant difference in educational attainment for different ethnic groups. For example, 8.4% of Roma people living in the Sofia region have never attended school, while in other ethnic groups the proportion who have never been to school is under 1.0%

Of the population aged 15 years old and above, some 680,000 people are economically active. In fact, the Sofia region has the highest rate of economic activity in the country: 71.5% of the adult population is economically active. Compared with the rest of Bulgaria, for the 15-64 age group, it has the highest employment rate at 65.5%, and the lowest unemployment rate at 8.3% (this is around half the national average).

Sofia is also the region with the highest proportion of people who are of working age: some 930,000 people in the Sofia region are aged between 15 and 64, which is 66.5% of the city’s population. For the country as a whole, the 15-64 age group is only 62.2% of the total population.

The 2011 figures show that the average age of people living in the city is 40.5 years old and the average life expectancy is 74.91 years.

1.2 Main demographic trends

According the most recent census data (2011), the total population of Bulgaria is 7.4m. During the 10 years since the previous census, the population decreased by some 564,000 people: an average rate of decline of 0.7% per year. Two thirds of the decline (68.9%) is due to negative natural growth (fewer births than deaths) and almost one third is due to emigration.

Analysis of the demographic changes for Bulgaria as a whole over the past two decades clearly shows a number of challenging trends. Some of these trends are similar to those in other European countries, and some are typical for countries in transition. These trends for Bulgaria as a whole include a long-term reduction in the birth rate, partly due to ageing of the female population beyond child-bearing age, and an increase in the death rate: these two trends have resulted in a sharp decline in natural population growth. There has also been an increase in emigration to other countries. In addition, the share of children born outside marriage has increased; the population is ageing; and there has been increasing urbanisation and rural depopulation.

However, the capital city, Sofia, shows more positive demographic trends. During 2011, the city’s population increased by 0.7%. This was a result of migration into Sofia from the countryside, combined with positive natural population growth (more births than deaths). In fact, over the last 10 years, the population of Sofia has increased by 10.3%, and currently, some 17.5% of the population of Bulgaria now live in Sofia. This has been mainly due to people migrating into the city from rural areas.

---

1 The population figure is according to official statistics: surveys show that an additional estimated 450, 000 people live in Sofia without a registered address, although some of these just work in Sofia and have a registered address elsewhere.

2 All the statistics in this document are taken from the updated National Strategy for Demographic Development in Bulgaria 2012 - 2030.
Over the last two decades of transition, all the major ethnic groups in Sofia have seen a decline in their birth rates. Within this general decrease, the Roma ethnic minority group\(^3\) (who represent 4.9% of the total population), and the Turkish ethnic minority group\(^4\) (8.8% of the population) show birth rates that are relatively higher than average.

The comparatively low overall birth rates in Sofia in the 1990s (7.2 births per 1,000 in 1997) and into the 2000s, has meant that the share of the population aged 0-14 years is still relatively low, at only 13.4%. However, the overall birth rate in the city has slowly begun to rise in recent years, and by 2010 the birth rate had reached 11.9 per 1,000. During 2010 and 2011 Sofia was the only region in the country with positive natural population growth: the figures show a natural increase of 0.1 person per 1,000.

On average, women in Sofia are also waiting longer to have children. For example, in 2001, the average age of women in the city who were giving birth to their first child was 27.0 years old. But by 2010, this figure had increased to 30.1 years old. By comparison, the figures for the country as a whole show that in 2001, the average age for women having their first child was 26.0 years old, and by 2010 this had only risen marginally, to 26.2 years old. The main reasons for this difference are the changes in the socio-economic conditions and values for women living in the city: before having a family, these women prefer to ensure their independence first, by gaining higher educational qualifications and pursuing a career.

One of the most striking demographic challenges for Bulgaria as a whole, and also for Sofia, is the high death rate. The death rate for Bulgaria is 14.6 per 1,000 people per year. For Sofia it is 11.8 per 1,000: the rate is higher among men (12.5 per 1,000), than among women (11.2 per 1,000). The main factor determining the dynamics of the death rate is the high proportion of elderly people. Two of the leading causes of mortality are: diseases of the circulatory system (67.5%), which include cerebral and coronary vascular disease; and cancer (15.1%). These two groups of diseases cause 82.6% of deaths in the country. The forecasts show that due to the aging demographics, the death rates will remain high until around 2030.

### 1.3 The impact of demographic change

Population ageing is a demographic challenge both for Bulgaria as a whole, and for Sofia. As the population ages, this affects the size and quality of labour resources. An additional challenge is the dynamic nature of the labour market, with its constantly changing requirements for different employee qualifications and professional skills. The combination of an ageing population and constantly changing job specifications means that there is a need to continuously improve the potential of the workforce and ensure lifelong learning for people of working age. A further

---
\(^3\) The ethnic and religious composition of the population is calculated on the basis of self-determination and the voluntary responses given during the census in February 2011.
\(^4\) As for footnote 3 above.
concern for the city is that the growing number and proportion of older people aged 65+ places serious demands on the social insurance system, social services and healthcare services.

The migration of large numbers of people from the countryside into towns and cities also has an impact. In the decade between 2001 and 2011, nearly 500,000 people moved to a different area in Bulgaria. The ongoing spatial redistribution of the population from the countryside to urban areas is an indicator of the widening gaps in quality of life and work opportunities between rural areas and cities: in general cities offer better prospects. The consequences of urbanisation are multifaceted: it causes not only demographic change but also economic change and social change. The fact that these consequences have not yet been addressed adequately is one reason for the current acute demographic problems.

Over the past decade or so, the largest share (32.1%) of people migrating from rural areas to urban areas in Bulgaria have settled in Sofia. 40% of these migrants are aged 20-39 years; 25% are young people under 20 years old; and 18% are aged 40 to 59 years old. In 2010, the region of Sofia had positive net inward migration of 7.7%.

1.4 Main policies to deal with demographic change

The largest group of people migrating into Sofia over the past decade were parents with children. On a local level, this naturally has an impact on services such as childcare and education. For example, during the 1990’s, kindergartens were closed down because of the significant decline in the birth rate: this was mainly due to the difficult situation in Bulgaria and the resulting huge wave of emigration by young people to other countries. However, now the situation is reversed. The demand for kindergarten places has now outstripped supply, and there are currently approximately 6,000 children on the waiting list for day care services.

An important policy for the city of Sofia is therefore to focus its efforts on expanding existing kindergartens, and on building new kindergartens, day care centres, playgrounds and sports facilities.

Another priority policy area is the provision of integrated social services for children and young people, and for their parents. The aim of these integrated social services is:

- to improve parental skills by providing advice and sharing good practice experience;
- to support parents in overcoming difficult family situations;
- to reduce and prevent risky behaviour such as alcohol and drug abuse, smoking and young people dropping out of school.

To maximise the effectiveness of its inclusion policies, Bulgaria has put in place good and effective inter-institutional cooperation on active inclusion at all levels of government: national, regional and local. In line with the European strategy on Active Inclusion, all Bulgaria’s strategic documents and policies are coordinated at national, regional and local level, and have been developed by expert groups representing all stakeholders. These stakeholders include: the Ministry of Labour and Social Policy; the Agency for Social Assistance; the Child Protection Agency; the Sofia regional authority; and Sofia municipality. The policies and initiatives are also publicly discussed with NGOs and with representatives of civil society, and are regularly updated.

Under the most recent amendment to Bulgaria’s Social Assistance Act and its regulations in March
2010, Bulgaria’s regional authorities now have responsibility for regional planning. So each region has had to design its own regional strategies for the provision of effective social services. The governor of the Sofia region therefore set up a commission to develop Sofia’s first regional social services strategy, covering the period 2011 to 2015.

This regional strategy aims to create a balanced approach for the development of social services in order to ensure equal access to quality services for all vulnerable groups in Sofia. The goal of the strategy is to create a package of local policies for sustainable active social inclusion, through the planning, innovation and improvement of social services. These services are required to be both flexible and financially efficient, but at the same time, they should meet user’s needs and ensure quality of life.

It is a requirement that all the municipal strategies are developed in line with the national strategies, including the General Strategy for Development of Social Services, and the Strategy for the Development of Social Services for Children and Families 2010 - 2013.

2. HOW SOFIA IS COPING

2.1 Demographic change at city level

Since the early 1990s, there has been a trend away from the traditional model of marriage and family, and towards free cohabitation. As a result, there has been a continuous increase in the number of births outside marriage. In Sofia, the share of births outside marriage has risen from only a fifth (18.5%) in 1992 to over half (54.1%) in 2011. Approximately 68% of these children are acknowledged by their father, and many of these live together with both their parents.

However, according to sociological research undertaken in Bulgaria, many people in Bulgaria think that free cohabitation and having children outside marriage may negatively impact the physical and mental development of children and may also have a negative impact on women. Cohabitation is still generally seen by society in Bulgaria as an unstable situation: one which may increase the risk of abandoned children and higher school dropout rates, and which may also place women and children at increased risk, for example, from poverty, acts of aggression, and alcohol and drug abuse.

With the current global economic crisis and rising unemployment rates, combined with social instability, changed family models and internal migration into urban areas, many families are finding it harder to cope. The likelihood is that more people will be living on social security benefits and more families in Sofia will fall into poverty.

In 2011, there were over 8,000 reported cases of children at risk in Sofia: either living in poor economic and social conditions or facing possible abandonment into an institution. In addition to these 8,000 cases, there are also significant numbers of children who are potentially at risk but who have not yet been identified by social services. They too are living in poverty and are at risk of social exclusion or abandonment to an institution. These children have a variety of different types of problems, often emotional, and remain outside the child protection system until something serious happens.

Figures from the National Children’s Hotline\(^6\) show that in 2011, the hotline received some 6,500 phone calls. 58% were from children or adolescents. The reported issues included behavioural problems, acts of aggression, a high risk of dropping out of school, drug and alcohol abuse, and general risky behaviour.

Bulgaria’s Department for Child Protection takes measures to protect children while they are living within the family home and can take steps to place these children in an institution. However, this is not always possible or in the best interests of the child. Although the number of children placed in institutions is continues to decline due to the government’s policy of deinstitutionalisation, there are still a significant number of children living in institutions in Bulgaria. To minimise the number of children living in these institutions requires the development of community based services to support the parents of these children, and to help protect the rights of children to grow up in a family environment.

A further issue is that the provision of comprehensive long-term support for mothers and their children in Sofia, including accommodation and psycho-emotional support, has not been sufficiently developed to meet local needs. It is still a common practice to separate children from their parents, even when reintegration back into the family is planned.

Alternative models of care need to be developed for parents with problems. They need help in making informed decisions about the future of their family; and they need help to ensure that the child can live in a secure and safe environment while maintaining an emotional and supportive parent-child connection. The growing need for better support for families is highlighted by the significant numbers of children who are at risk of dropping out of school, alcohol and drug abuse or aggressive behaviour. In addition, parents with problems are also increasingly willing to seek and accept help, and services need to be provided to meet these requests for help.

2.2 Solutions at city level: Community Support Centre and Mother and Baby Unit

Sofia’s Community Support Centre and its Mother and Baby Unit have been established as a result of the city’s active inclusion policy. The centre and the unit aim to support families in the city by providing a range of integrated services based on individual needs. The management of the centre and unit complies with the Sofia Municipality Strategy for development of social services for children and families. All the relevant institutions at national and local level are involved in its work. These include: expert professionals; the city’s child protection department; the national government’s child protection agency; and local services such as schools, kindergartens, children’s doctors and local hospitals.

The centre and its programmes are a municipal service: they are funded by the state, and are co-financed by Sofia municipality when renovations are needed or when particular additional projects are implemented. Following a tendering process in 2011, the centre and unit are being managed by the ANIMUS Association, an NGO whose work is supervised and monitored both by the municipality and by the government’s social assistance agency. People wishing to use the services of the centre can either apply to the city’s Child Protection units or they can contact the centre directly.

\(^6\) The National Children’s Hotline is 24-hour hotline with national coverage for children in need. The hotline offers an anonymous, accessible and free mechanism for asking advice, reporting cases of children at risk, and undertaking the necessary measures for their protection.
2.2.1 The Community Support Centre

The Community Support Centre has been designed to work with up to 120 people a month. Its main objectives are:

- to support children at risk;
- to promote responsible parenting;
- to prevent risky behaviour and other situations that threaten children's health and life;
- to develop a quality social services system for children and families adapted to their needs;
- to ensure the active inclusion of families who are at risk of social exclusion.

Based on the needs of vulnerable families for psychological and pedagogical support and to prevent social exclusion and poverty, four main sets of social services are provided by the centre:

- Prevention of child abandonment and the reintegration of children: these services support pregnant women who may not feel able to keep their baby, and children at risk of abandonment due to neglect or because the family is unable to provide adequate child care. This includes the following programmes:
  - Pregnancy at risk: aimed at young pregnant girls and women who are hesitant about keeping their child, this is organised in cooperation with the municipal healthcare system;
  - Prevention of abandonment of newborns;
  - Training for good parenting;
  - Reintegration of children from institutions: these programmes help reintegrate children back into their own family or into the family-style environment of foster care;
  - Preparation for independent living: skills and support for the successful social and professional inclusion of young people leaving institutions;
  - Foster care services: working with children who are to be placed in foster families, and training candidates who apply to become foster parents;
  - Adoption services: working with adopted children, and training candidates who apply to adopt children.
- Support for children who have experienced violence and other abuse: working with children who have experienced violence and other forms of abuse, to prevent further abuse and help minimise the effects of their experiences.
- Support for children and families with behavioural problems: these services include:
  - Socio-pedagogical and psychological counselling: for children with behavioural problems and their families;
  - Prevention of school dropouts: working with children, families and schools;
  - Mobile social work: working with children on the street;
  - Raising awareness: informational campaigns to raise awareness of the services and the assistance that is available.
- Support for children and young people with disabilities and their families: most of the children needing support have mild and moderate learning difficulties, sensory disorders and motor disorders; the services include speech therapy, teaching, and rehabilitation
All the services described above are provided both in group sessions and as individual sessions, after consultations with psychologists and social workers. The group sessions are held weekly, for 90 minutes each, and the group works together for a period of 3 months. These sessions are interactive and give participants the opportunity to share their ideas and experiences. The individual sessions are planned according to individual needs.

2.2.2 The Mother and Baby Unit

The Mother and Baby Unit is based at Sofia’s Community Support Centre and provides services to pregnant women and mothers with babies. They are mostly young single parents in need of psychological support and temporary accommodation. The main goal is to provide them with protection and assistance until they gain the skills and confidence to raise their children themselves, rather than abandoning them to institutional care. Each year, the unit provides services and support to about 30 pregnant women and mothers.

The Mother and Baby Unit aims to help each mother develop a close relationship with her baby and to recognise the clear benefits for the child of growing up in a family environment rather than an institutional one. The unit also aims to prepare mothers and babies for independent living. These services help to ensure the active inclusion into society of these one parent families who are otherwise at risk of social exclusion. The unit ensures that the basic needs of these mothers and children are met, through psychotherapeutic, social, medical and legal services.

The Mother and Baby Unit provides the following key services:

- Accommodation: housing and care for pregnant women, and for mothers and babies, for a six month period with the possibility of extending this further;
- Health care: medical advice on pre-natal and post-natal care, balanced nutrition for children, basic hygiene, sexual health advice, access to health services and provision of medicines;
- Mother and baby relationship: helping to develop close relationships of affection between mothers and babies;
- Active inclusion and preparation for independent living: helping to improve the social skills of the women and helping them develop good supportive relationships with their families and friends;
- Career support: helping the women start a career so they can support themselves financially, including careers advice, training courses and legal advice.

The services provided both by the Community Support Centre in general, and by the Mother and Baby Unit in particular, are aimed at preventing the social exclusion of parents and children. These services play an important role, not only in increasing the parents’ capabilities, but also in raising the children’s educational level and in ensuring the active inclusion of parents and children in the wider society.
2.3 Key successes

One of the key successes for both the Community Support Centre and the Mother and Baby Unit is the holistic nature of the services provided to families. They cover the whole cycle of abandonment prevention by supporting parents and children at all stages.

Another important factor is the sustainability of these services. Unlike project-based services which are implemented with short-term funding and which usually end when the project ends (unless further funding can be found), the Community Support Centre and associated services have been set up by the state with secure funding. They are therefore sustainable long-term.

The Community Support Centre is very popular: people feel comfortable about visiting the centre, and this guarantees easy access to services both through the child protection system and by people directly contacting the centre themselves.

Another achievement is the well-developed model of providing staff with regular training as a team, and also setting up regular supervision sessions. In these sessions, staff discuss their case work with more senior staff and receive support and guidance. The combination of training and supervision helps to maintain professional standards and high quality services.

As a result of the work of the Community Support Centre team, there has been a clear decrease in the number of school dropouts, as well as many examples of children being successfully reintegrated into their family, following intervention from the team. For the period from December 2011 to April 2012, a total of 17 children were identified as being at risk from dropping out of school, but thanks to the Community Support Centre services, these children are still in education.

The continuing rise in the number of people searching for help and support is, on the one hand, an indicator for the need for such services, and on the other hand, an indicator of the public’s positive attitude to the centre and the public’s trust in the team’s work. Further proof of this is the fact that the centre exceeded its stated capacity in March 2012: the centre assisted 180 people, where as the centre is designed to work with only 120 people per month.

The most significant success of the Mother and Baby Unit is the rising number of mothers who keep their children and do not abandon them by putting them into an institution. For the period from December 2011 to April 2012, 12 mothers with 14 children used the Mother and Baby Unit. Four of them are already successfully reintegrated into the community and live independently; seven are still with the Mother and Baby Unit; and one has given up her child for adoption.

The Community Support Centre and Mother and Baby Unit integrate two of the three pillars of the EU active inclusion strategy, namely: access to quality social services, and inclusive access to labour markets (through services such as career advice).

2.4 Challenges

The challenges faced by both the Community Support Centre and the Mother and Baby Unit mainly relate to two aspects. On the one hand, the rates of pay for staff are relatively low, due to the mandatory pay structure regulated by national legislation. On the other hand, there is a need to provide high quality services, which ideally means being able to attract the best staff and therefore offer higher rates of pay. A further challenge is the high turnover of trained staff: this may be linked to the low rates of pay.
2.4.1 Specific challenges for The Community Support Centre

The success of the Community Support Centre in attracting high numbers of service users, also gives rise to the main challenges for the centre. There are currently more people seeking support from the centre than the planned capacity of the centre. With the team working to more than full capacity, there are extra responsibilities for each member of the team. This can have a negative impact in terms of providing a service at the precise time it is needed. A waiting list has had to be introduced, and for some people there is a delay before they can receive the support they need.

2.4.2 Specific challenges for The Mother and Baby Unit

The most important challenge faced by the Mother and Baby Unit is the lack of a sufficient pool of willing and suitable foster carers. There are not enough foster families to look after the children whose mothers have given them up for fostering or adoption. So some of these children are having to move into institutional care. A key priority for the unit is therefore to promote foster care through information campaigns and also through better training for prospective foster parents.

Another major challenge for the unit is that there are insufficient resources for supporting mothers in starting a career. In addition, there are not enough staff who are trained to undertake the difficult but vital psycho-social work in the unit: at present, the unit is being supported in this work by four university students who are studying psychology, social pedagogy and social work.

2.5 Future plans and dissemination

Given the large number of people currently on the Community Support Centre’s waiting list, there is no question that there is a significant need in Sofia for these types of integrated services for children and families. In addition, some of the existing services can only offer partial solutions. Therefore the city needs additional service provision and a new, and even more integrated, approach to service delivery.

In 2011, Sofia successfully applied to the national Ministry of Labour and Social Affairs for funding for a project called: ‘Social inclusion through building community support centres for children and families at risk in Sofia.’ As a result of this funding, the city has started to build two new Community Support Centres for children and families at risk. These two new centres will offer services that are even more integrated, and which include mobile street units and new on-site kindergartens. These new centres will also help to meet the high demand that is currently not being met due to the insufficient capacity of the existing centre.

The two new Community Support Centres are expected to open in September 2012. They are designed to provide integrated services for families who are at risk: children from 0 to 7 years old and their parents. The main objectives are to prevent social exclusion and reduce child poverty by investing in early childhood care.
The services and activities of the new centres will be aimed at enhancing the overall well-being of children and their families. The target groups are children from vulnerable groups who are at risk including:

- ethnic minority communities, including the ethnic group of Roma people;
- families living on social benefits;
- families with low educational levels;
- families living in poor housing conditions;
- children from families without health insurance;
- children with disabilities;
- neglected children;
- street children;
- children exposed to abuse such as violence.

The new Community Support Centres will offer services that aim to support responsible parenting. They will also develop new approaches and new forms of care for children at risk and their families. The new centres will provide support in raising children and will promote a wide range of activities to ensure a good family environment for children. In addition, they will ensure equal access to quality pre-school and school education for children from vulnerable families and children with disabilities.

All the services provided by the centres are priorities for Sofia municipality in the field of early childhood care. The public will therefore be as widely informed as possible on the availability of the services, the aims of the services, and the expected positive benefits for different potential users and for the community. So the new centres and their services will be widely publicised using all the effective tools available, including: printed materials, conferences, public relations campaigns and press coverage.

To ensure continued refinement of the services, service users will be invited to provide feedback through questionnaires and interviews. They will be able to rate the quality and impact of the service provision, and also suggest how things could be further improved. The results will be summarised and recommendations taken into account. This will help to ensure continuing high quality services in order to mitigate some of the problems caused by demographic change, and maximise the active inclusion of vulnerable families in Sofia.

Additional information:

Contact person: Mrs. Dragoslava Lundzhova,
Chief Expert at the Social Affairs Directorate, Sofia Municipality
Email: dlundzhova@sofia.bg
Telephone: +35 92 80 35 912
This publication is commissioned under the European Union Programme for Employment and Social Solidarity (2007-2013). This programme is managed by the Directorate-General for Employment, Social Affairs and Inclusion of the European Commission. It was established to financially support the implementation of the objectives of the European Union in the employment and social affairs area, as set out in the Social Agenda, and thereby contribute to the achievement of the EUROPE 2020 goals in these fields.

For more information see: http://ec.europa.eu/progress.

The information contained in this publication does not necessarily reflect the position or opinion of the European Commission.