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# Fighting Educational Poverty: from “Childhood, First” to Multisite Projects



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# Child poverty in Italy

**10%**

The percentage of households in absolute poverty in the South.  
6,7% North, 5,6% Centre

**1.4 millions**

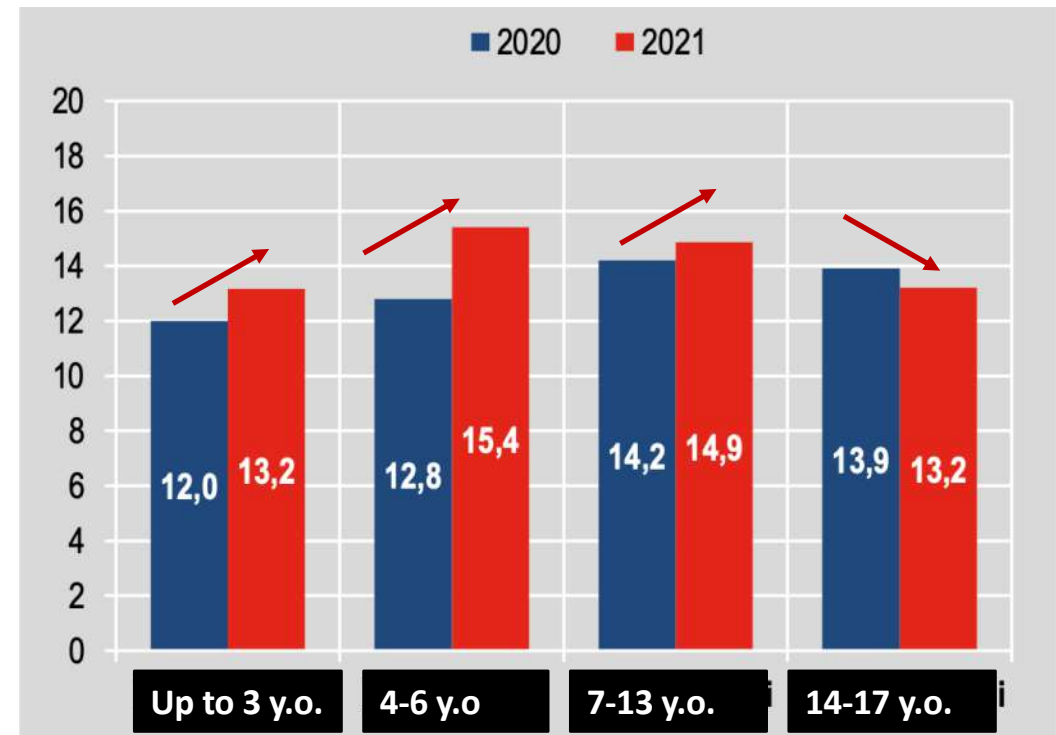
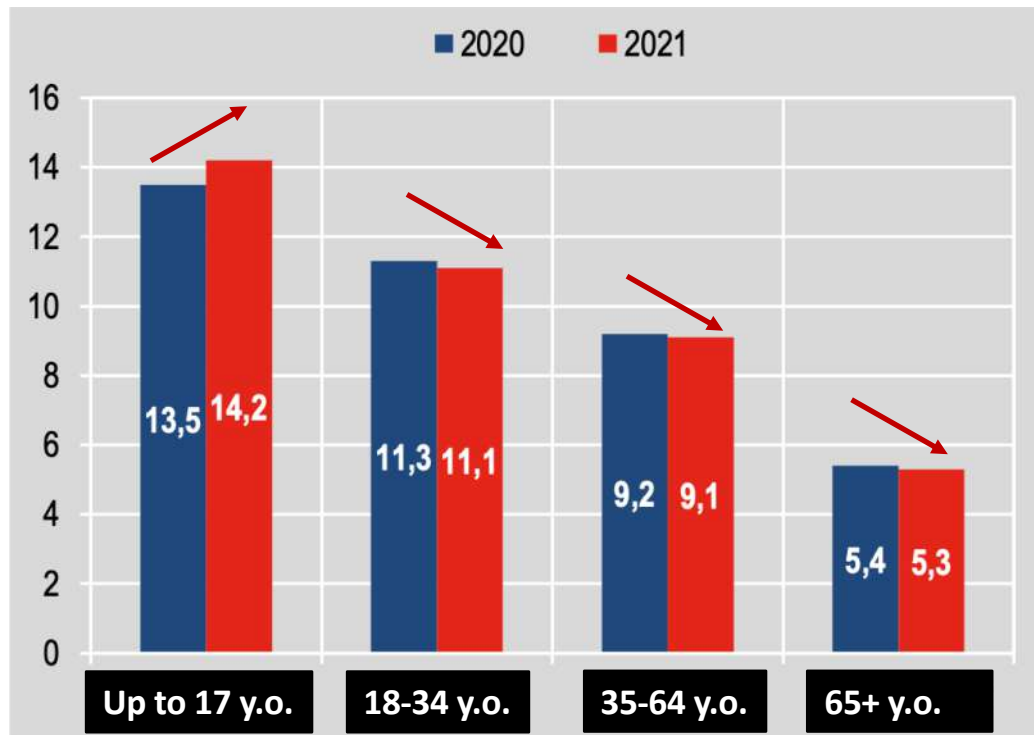
Children in absolute poverty  
(14,2%)


**32.4 %**

Incidence of absolute poverty among resident foreigners (29.3% in 2020). 7.2 percent among Italians (7.5% in 2020)

Data on child poverty in Italy highlight that almost 1.4 million children were in “absolute poverty” in 2021, corresponding to 14.2% of all minors living in Italy. The percentage of people in absolute poverty reaches the highest level among children (14.2%), declines among young adults 18-34 y.o. (11.1%) and adults 35-64 y.o. (9.1%) and reaches its lowest level among the elderly (5.3%).

# Child poverty in Italy



 The percentage of poor people has increased with respect to 2020 among minors (13.5% in 2020) but it has slightly decreased among all the other groups of the population (11.3%, 9.2% and 5.4% among young adults, adults and elderly in 2020).

**22.8% of  
families with  
3 or more  
children are in  
absolute  
poverty**

Moreover, economic difficulties increase with the number of children: in 2021 absolute poverty affected 8.1% of families with one minor child, 22.8% of families with three or more minor children.

High percentage are also recorded for couples with three or more children (20%).

# Child poverty in Italy

Along the years, these problems remain unaddressed, or addressed with ineffective measures.

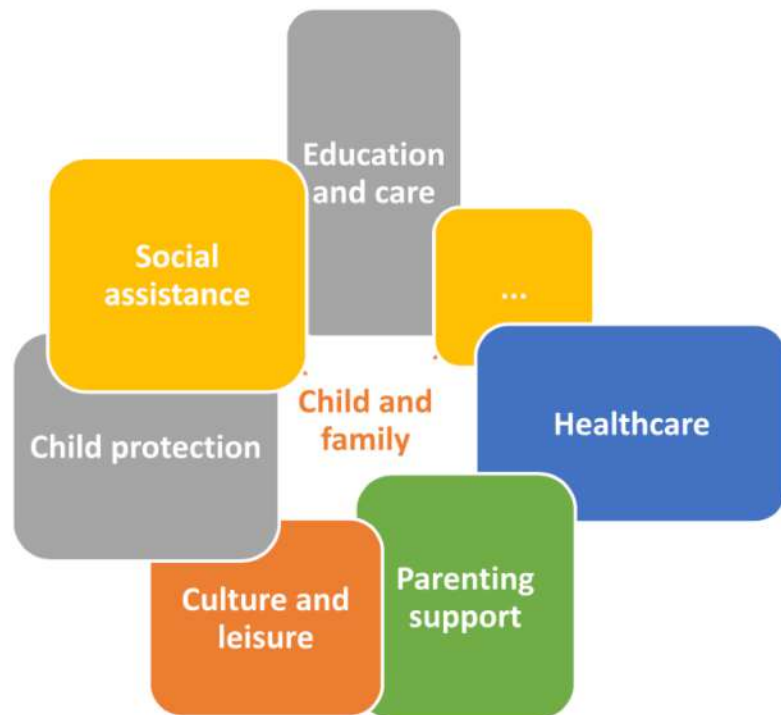
But children cannot be told that schools need to be improved, that family is in crisis, that politics takes care mainly of the oldest, that social mobility is no longer there.

It is an impoverishment that makes everything more difficult today and that re-proposes the question:

**how to fight against educational poverty?**

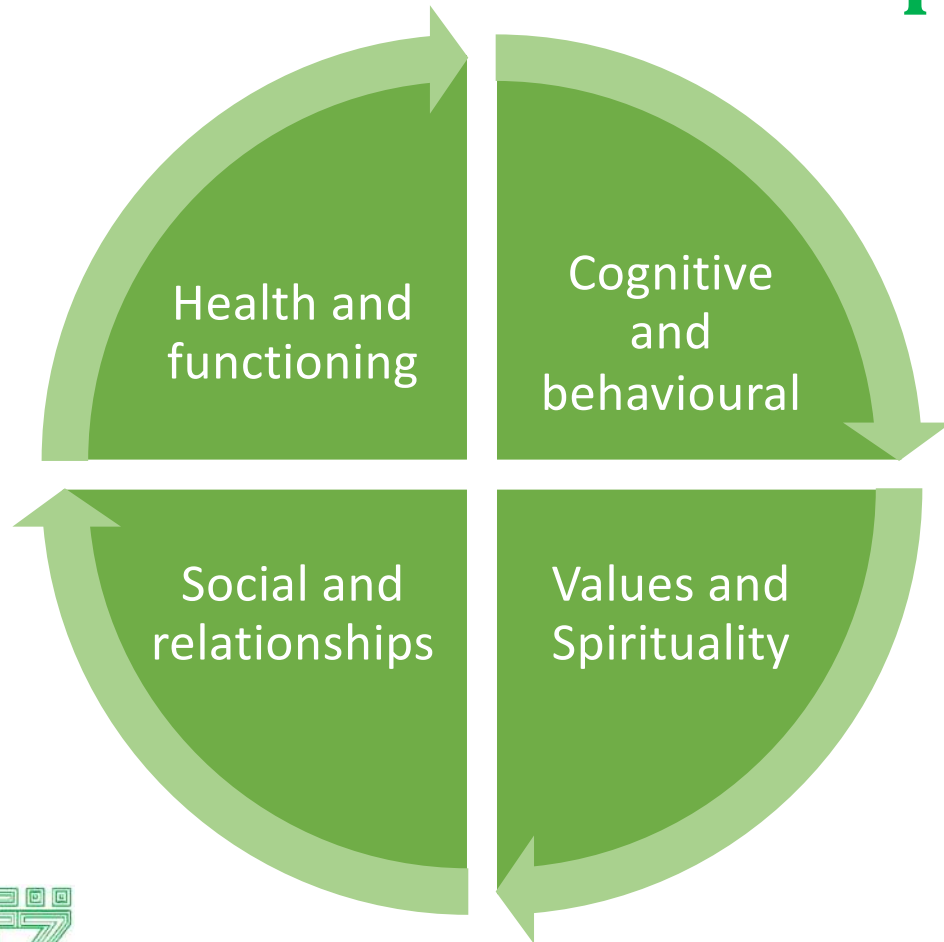


# Child poverty in Italy: a multidimensional perspective



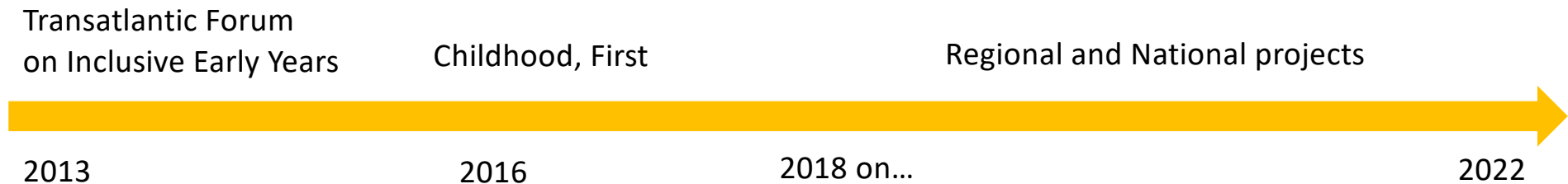
The Council of Europe (2016) highlighted that poverty and social exclusion of children can be addressed with integrated systems of responses, combining preventive measures, of family support, with educational services and early childhood care, with social services and appropriate housing policies.

# A multidimensional perspective



It is not only a matter of income since it is related to the social, cultural and relational contexts that children experience from the early years and it is associated with factors of disadvantage concerning health, cognitive skills, relations, values and spirituality. A **map** can help us think and act using four dimensions for better focusing on "the problems and potentials" and increasing the possibility of achieving positive outcomes.

# Multi-site projects for fighting against poverty



These projects are based on the existing theory and developed solutions “tailored” to the different territories. Overall, this represented an **“open-air” experiment for developing new ideas and solutions** for improving the wellbeing of children and families experiencing educational poverty.



2013-2016



# TRANSATLANTIC FORUM ON INCLUSIVE EARLY YEARS

INVESTING IN THE DEVELOPMENT OF YOUNG CHILDREN FROM MIGRANT AND LOW INCOME FAMILIES

2016-2018

2016



**The future in our hands. Investing in childhood to nurture life**

**Childhood, first**



# A positive development: a community of practice



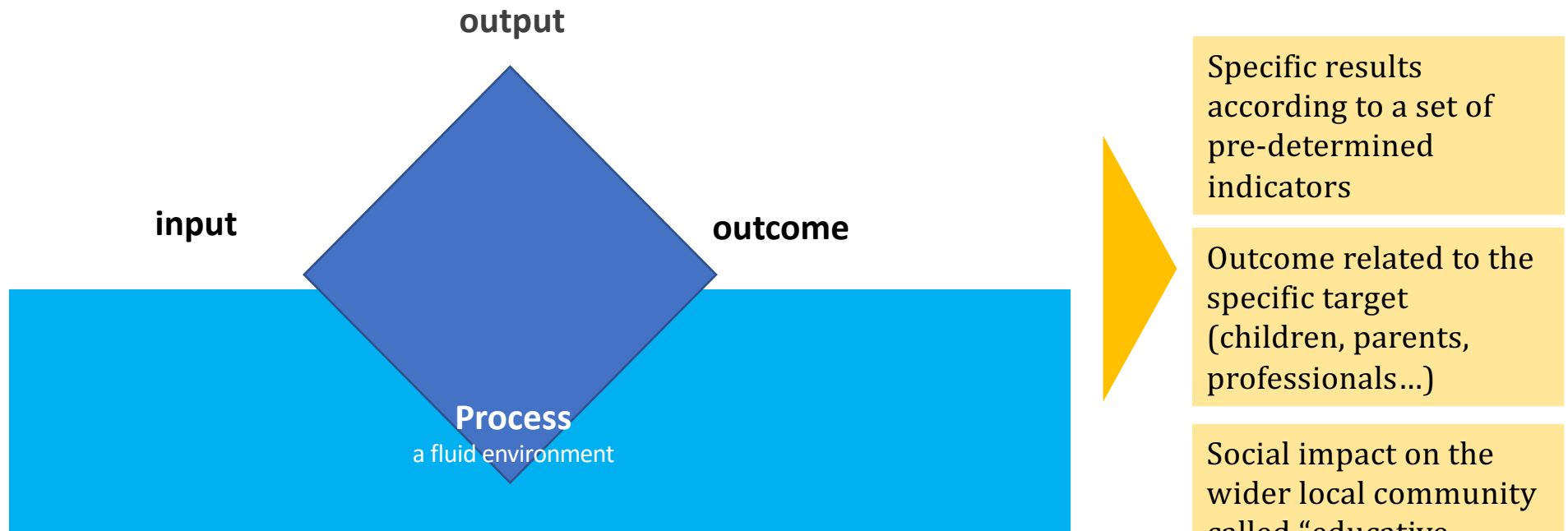
## A flourishing of projects...

Early childhood	7
Adolescence	5
Children and adolescents	10
Other focus	10

**... to monitor and evaluate!**



# The model we developed...



The professional and organizational processes necessary to combine all factors for addressing needs but also capacities/skills together



## ... with an additional criterion

### *for individuals*

Target population, while benefitting from the project opportunities, need to be supported in (re)discovering their own capabilities and resources, and encouraged to use their “talents” to help themselves and other people. This is in tune with a generative welfare perspective that promotes the role of individuals as active players. This is in line with a person-centered approach, and contributes to promoting self-esteem, socialization, social integration, responsibility, ... in addition to generating benefits for the overall context.



**... with an additional criterion**

*for professionals*

A “generative welfare” approach implies a transition from merely delivering benefits/programmes towards professionally transforming needs and capabilities, measuring the contribution to the outcome resulting from professional and personal (non-professional) cooperation and co-partnership.



# A multidimensional model plus “gw”

Tri-dimensional model that combines input, output, and outcome that is supported by a **process** that is able to combines needs and capabilities together

Reinforcement provided by a “generative welfare” approach aimed at involving users as active players toward themselves and the others

*The “helper”:  
«I cannot help you  
without you!»*

*The person:  
«You cannot help me  
without me!»*

**The reciprocity between two point of view (the helper and the person) can make the difference.**

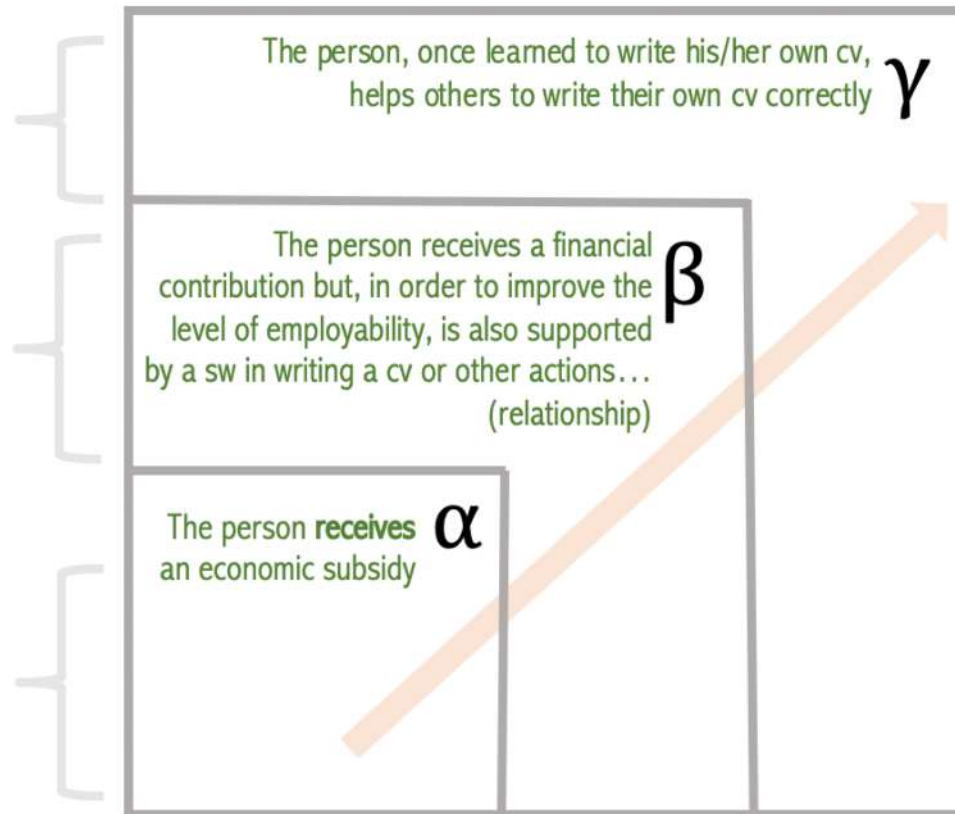


# GW: Increasing levels of achievable outcomes

**Gamma level:** Outcomes generated by the "co-production of outcomes": those who are helped, help both themselves and other people in need

**Beta level:** Outcomes made possible by collaborative relationships between those who help and those who are helped

**Alpha level:** Outcomes made possible by the provision of benefits from those who help towards those who are helped



**Gamma** measures the value of the person's contribution to the global outcome

**Beta** measures the professional outcome made possible by "tailored" approaches

**Alfa** measures the outcome of input of service resources (alfa area)





How to «translate»  
this model into practice?

Our 2 leading rules

## Rule n. 1 – Measuring!



No monitoring and evaluating without measuring!

We need a baseline ( $T_0$ ) for measuring improvement over time ( $T_n$ ).

## Operational Plan form

Prison (Country): \_\_\_\_\_

Training module(s): \_\_\_\_\_

	A. Expected scenario (ex ante)	B. Actual scenario (ex post) <i>[To be filled in after the end of the training module]</i>
<b>Goals, contents and results of the training path</b>	Please fill in by specifying the expected contents/numbers	Please fill in by specifying the relevant differences/variations (if any) with respect to the expected scenario
Main overall goals of the training path [Short and medium-long term goals, for the detainees involved and broader context]	Main goals: _____	Main goals: _____
Activities – contents and duration (number of hours) of the training	Specific contents of the course _____ Number of hours: _____	Specific contents of the course _____ Number of hours: _____
Date of start and end of the training	Start: __/__/__ [dd/mm/yyyy] End: __/__/__ [dd/mm/yyyy]	Start: __/__/__ [dd/mm/yyyy] End: __/__/__ [dd/mm/yyyy]
Target group (detainees)	Number: _____ Characteristics: _____	Number: _____ Characteristics: _____
Attendance of the training *	Number of detainees attending training for at least 75% (or other significant percentage, please specify: ____ ) of the time: _____	Number of detainees attending training for at least 75% (or other significant percentage, please specify: ____ ) of the time: _____
Staff involved in planning, organising and implementing the module	Overall number: ____ Profile 1: _____ No.: ____ Profile 2: _____ No.: ____ Profile 3: _____ No.: ____ ...	Overall number: ____ Profile 1: _____ No.: ____ Profile 2: _____ No.: ____ Profile 3: _____ No.: ____ ...

# Tool Operational Plan

Specific tool (“Operational Plan”) for monitoring, that:

- is completed before and after by professionals in charge of the service/program
- collects relevant data/information on the overall *process* underlying the service/program (**input → output → outcome**), i.e. activities, timing, resources, targets, results, ...

## Rule n. 2 – Evaluation!

**M**onitoring supports **E**valuation through the usage of tools to collect quantitative/qualitative data/information useful to assess:

1. benefits for the direct beneficiaries of the service/program  
(**outcome**) [*Ad hoc tools/questionnaires/scales, ...*]
2. benefits for the wider community, also due to the generative activation of beneficiaries (**social impact**) [*GIA – Generative Impact Assessment*]
3. Development of the network of actors involved [*Map – System of Responsibilities*]



# Concentric circles of attention

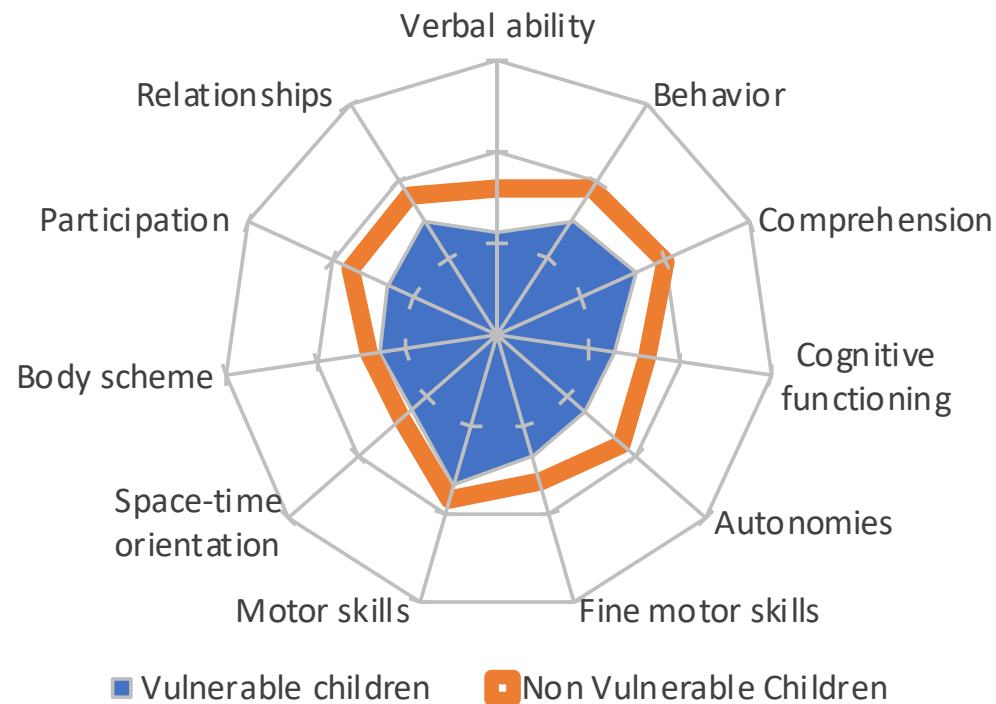
Outcomes for the direct beneficiary (Monica)



Benefits for the wider community



# Target: Children in early childhood service



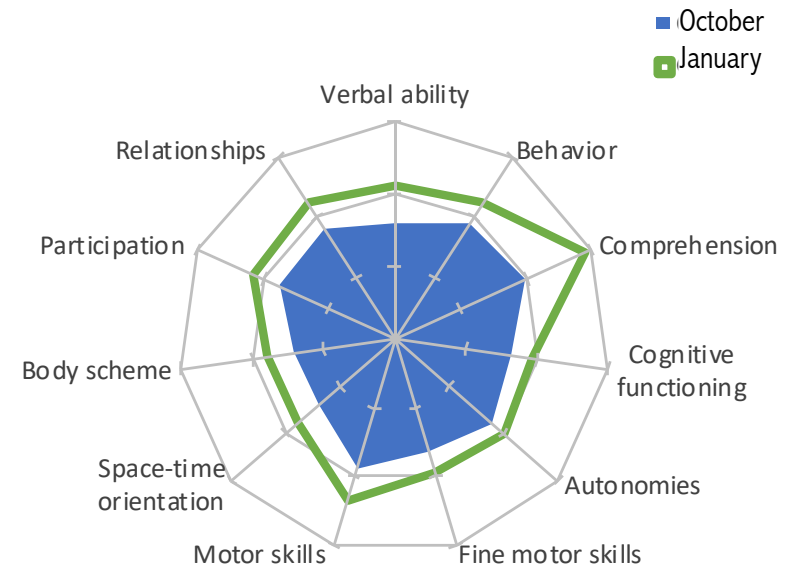
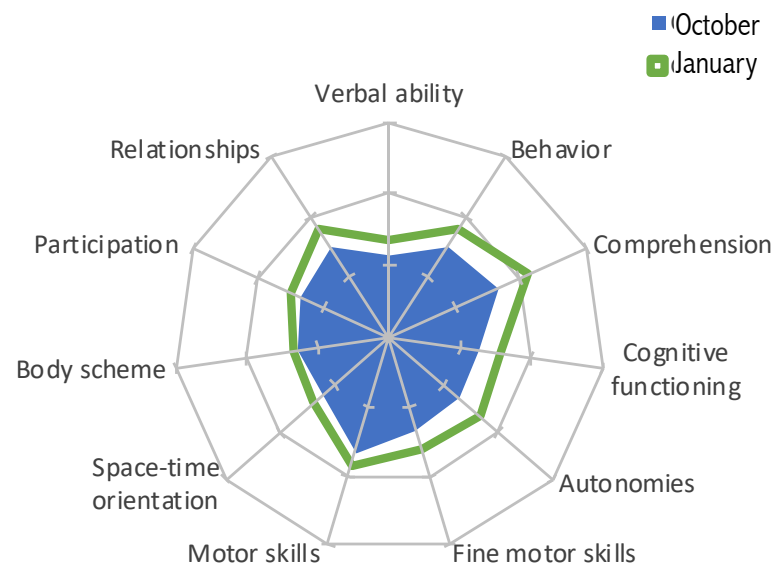
It is widely recognised the importance of attending early childhood services, especially for vulnerable children.

This project aims to increase the access to services for children experiencing different kind of vulnerabilities.



**Multidimensional representation of 2 groups of children**

# Improvements over time *(Oct 2018-Jan 2020)*



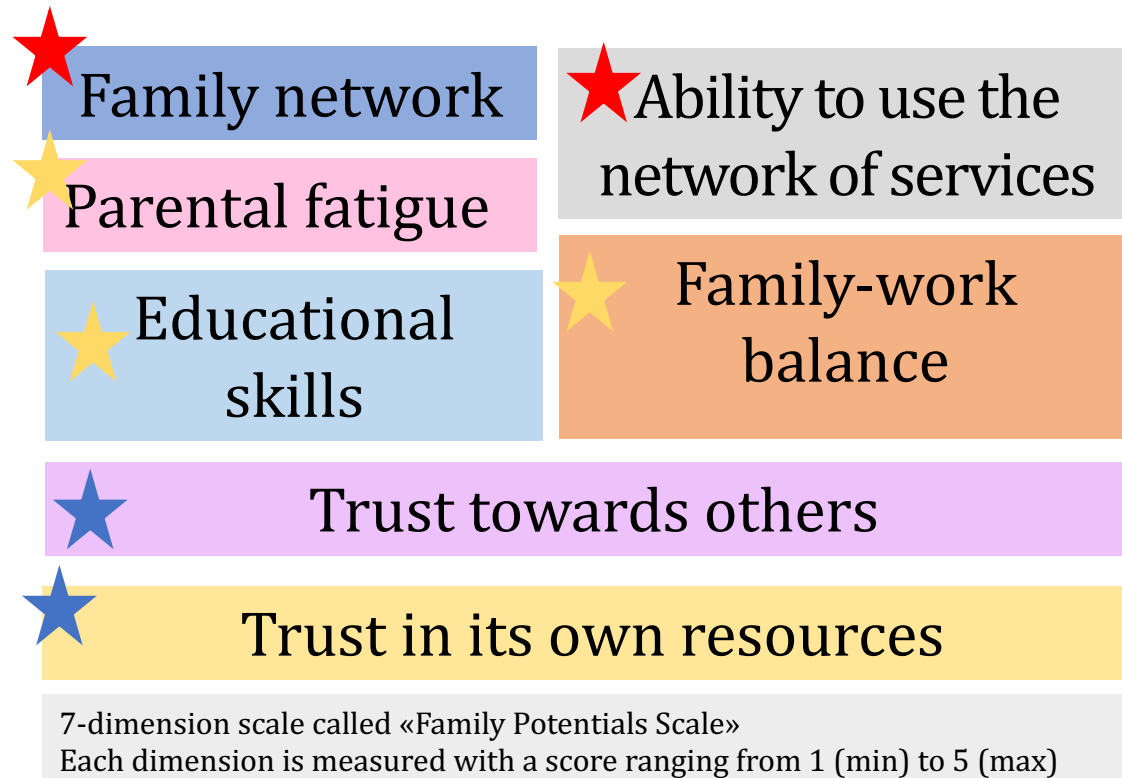
Multidimensional representation (vulnerable)

Multidimensional representation (non vulnerable)

Worst situation: toward the centre – Best situation: towards the external circle



# Target: Parents in prison

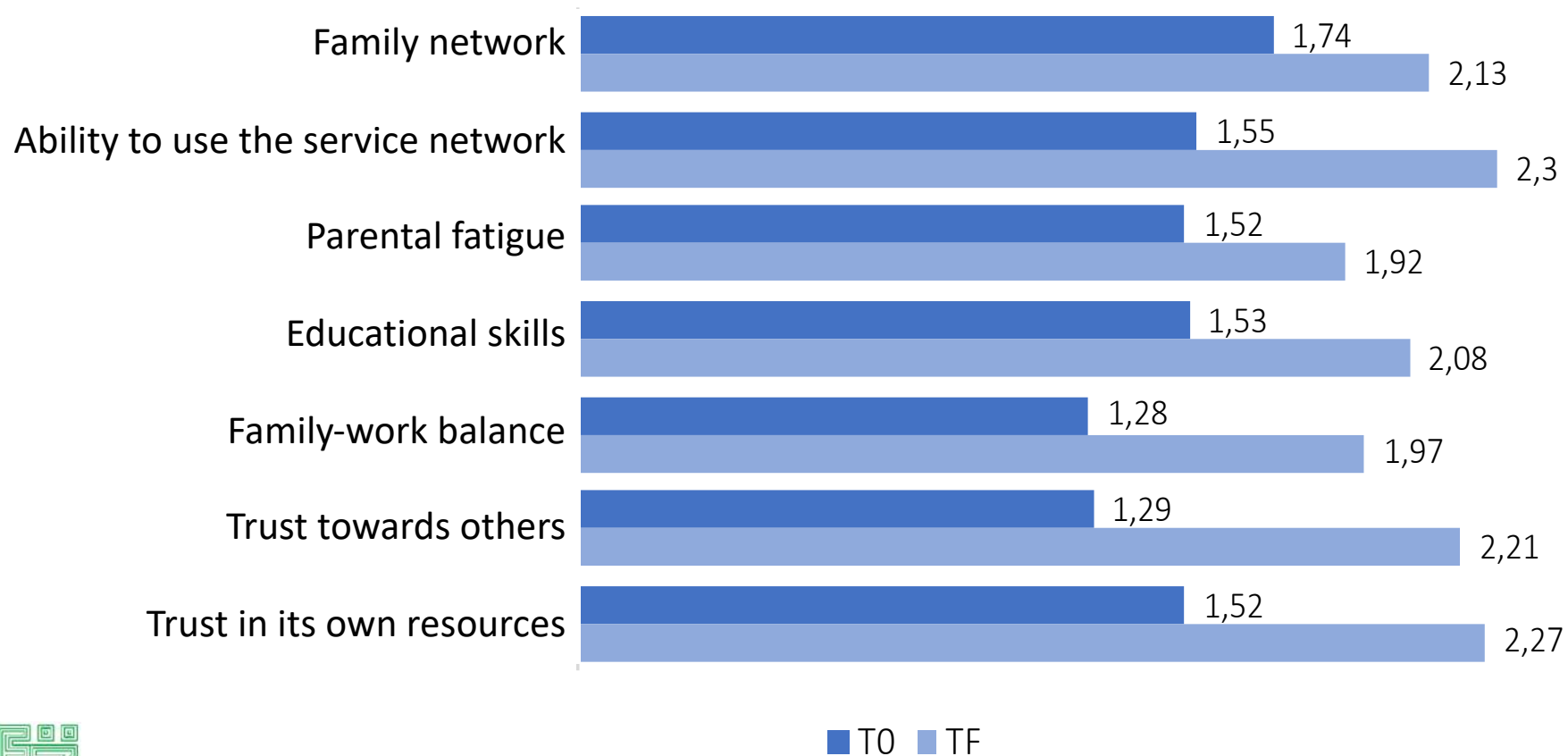


Parents in prison have low possibilities to develop positive relationships with their children. This project aims to improve the parental competences of parents who are in prison, through a number of activities with their children and the other partner.

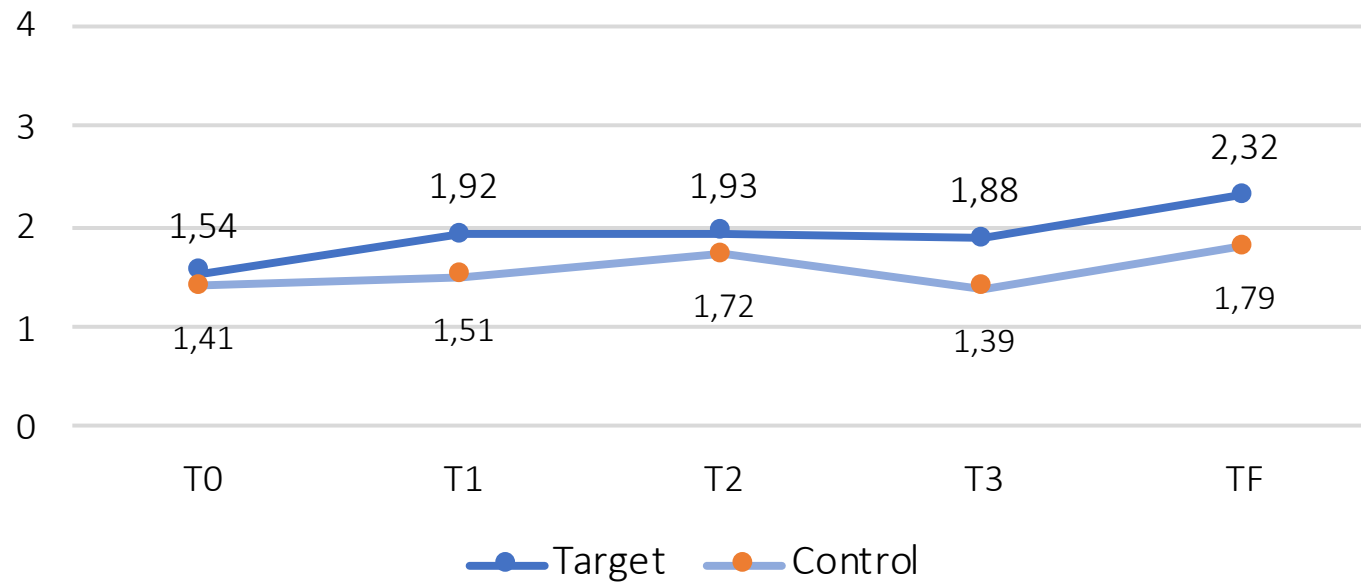




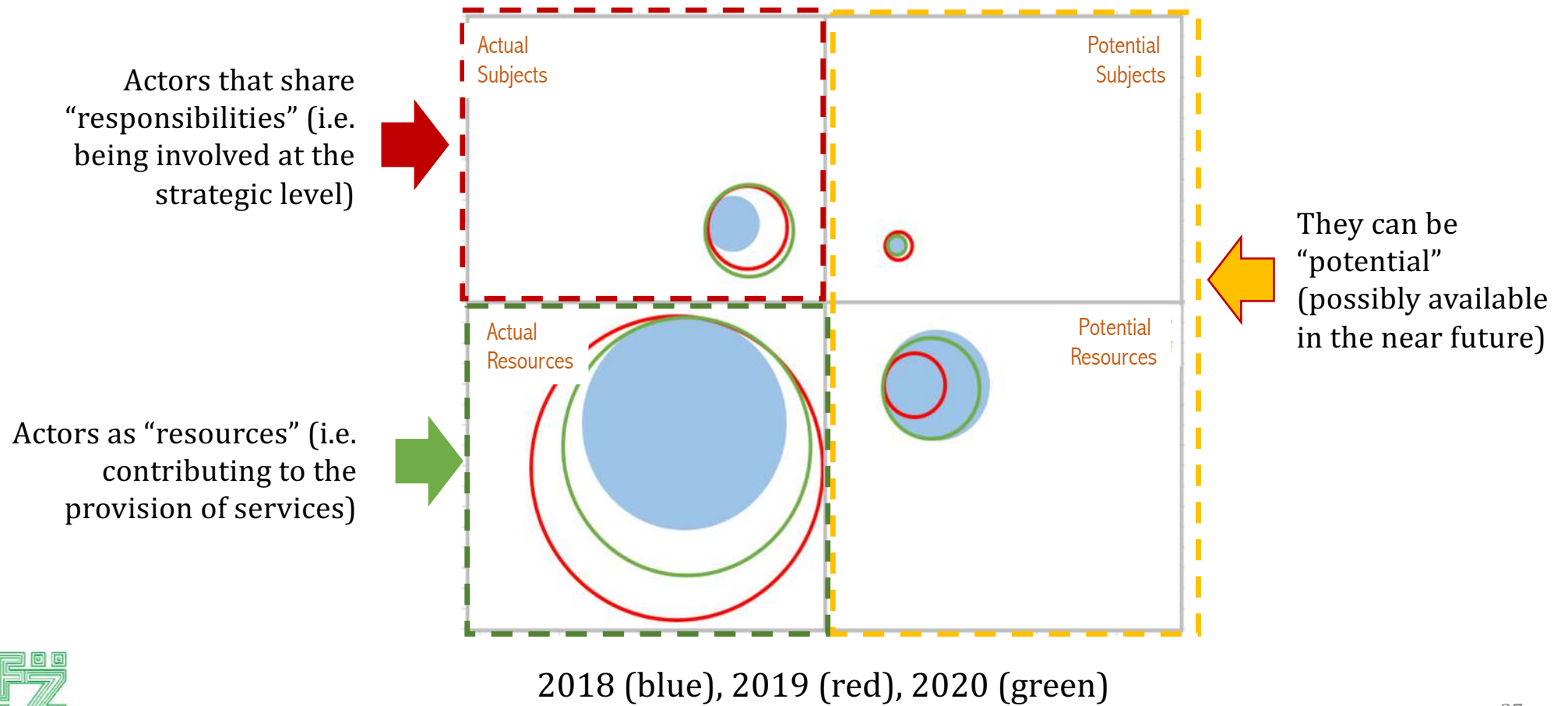
# Improvements over time for parents in prison



# Comparing groups



# Target: Actors in the local community



Goals and qualifying actions	Results
<p><b>Increase effects and qualify access of children and families</b></p>	<p>2,532 children and 2,832 parents involved            One third of children and parents “new” to services and 72% of children from vulnerable families and 76% of parents from vulnerable families  <b>66% of children experienced positive effects (wellbeing, skills, social competences)</b>  <b>33% of parents experienced positive effects</b></p>
<p><b>Increasing the attendance of services</b></p>	<p>More than 90% of children and over 95% of parents attended the activities on a continuous basis</p>
<p><b>Parents feel responsible in reaching the goals and spend their time to the project</b></p>	<p><b>7,300 hours dedicated to activities by parents</b>, worth 73,000 euros (8% of the resources for the 10 projects)</p>
<p><b>Alternative forms of co-participation</b></p>	<p>The families of 82 children (8% out of 978) participated in-kind (<i>non monetary contribution</i>) with the equivalent value of 28,000 euros</p>
<p><b>Involvement of “unusual” partners</b></p>	<p><b>36 new organisations</b>, economic resources for 15,700 euros, materials for a total value of 6,700 euros, human resources: 42 people dedicated at least 956 h in total</p>

# Community of practice

The tri-dimensional model guided us in developing ideas and tools for improving services and practices, and helped us to further develop tools and methodologies to **monitor** and **evaluate** them.

All results have been systematically shared among communities of practice in which participants discussed the expected and obtained outcomes and the impact of their innovative work.

## We learned...

- It is essential to create the conditions for strengthening **learning**, helping to reduce the gap between theory and practice
- We can learn from experience not only using a narrative approach but **monitoring** and **evaluating** results and outcomes (documenting)
- It is useful to create “thinking spaces” that systematically read *processes* and results in terms of strengths and weaknesses
- Participants are aware of the importance of comparing (intra- and inter-organizations) with exchanges of practices
- A community of practice can bring innovation but...

*... it is important to take care of the community of practice*



# Conclusion

The balance between theory and practice can be seen as the balance between the “noble” culture, based on systematic study and rigorous scientific research (represented for instance by academic institutions) and the “poor” culture that arises from a methodical reflection on training and social work experiences. *This is the road that **MEL** is promoting and that will bring mutual enrichment.*

Lectio Magistralis Giovanni Nervo



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**Thank you!**

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