



YouthReach



INCLUSIVE AND TRANSFORMATIVE
FRAMEWORKS FOR ALL

Capitalisation

MARCH 2022



Cofinancé par
l'Union européenne



UAB
Universitat Autònoma
de Barcelona



Univerza v Ljubljani
Fakulteta za socialno delo



BOB
ZAVOD ZA IZOBRAŽEVANJE
IN KULTURNE DEJAVNOSTI



aretés
Spudorabamentis



AG
Mestna Zveza Prijateljev Mladine Ljubljana

AUTHORS

Špelca BUDAL, Virginie POUJOL (LERIS: Laboratoire d'Etudes et de Recherche sur l'Intervention Sociale / Social Intervention Studies and Research Laboratory (FR), www.leris.org)

Angelina SÁNCHEZ MARTÍ (UAB: Universitat Autònoma de Barcelona / Autonomous University of Barcelona (ES), www.uab.es)

Andreja DOBROVOLJC, Natalija ŽALEC (ACS: Andragoški Center Republike Slovenije / Slovenian Institute for Adult Education (SI), www.acs.si)

Alenka GRIL, Tadeja KODELE, Klavdija KUSTEC, Milko POŠTRAK (UL: Univerza v Ljubljani - FSD: Fakulteta za Socialno Delo / University of Ljubljana - FSD: Faculty of Social Work (SI), www.uni-lj.si)

Barbara BABIČ, Sara RODMAN (BOB: Zavod za Izobraževanje in Kulturne dejavnosti / Institute for Education and Cultural Activities (SI), www.zavod-bob.si)

Tanja POVŠIČ (MZPML: Mestna Zveza Prijateljev Mladine Ljubljana / Municipal Association of Friends of Youth Ljubljana (SI), www.mzpm-ljubljana.si)

Gordana BERC, Marijana MAJDAK (UNIZG: Sveučilište u Zagrebu - Pravni fakultet - Odjel za Socialni Rad / University of Zagreb - Faculty of Law : Social Work Department (HR) www.unizg.hr)

Ana Maria MUNJAKOVIĆ (Udruga Aktivni Građani / Association Active Citizens, Zagreb (HR), <https://aktivnigradani.hr/>)

Luc HANIN, Jean-Marc GLENAT, Mikael BRUSSON (IFME: Institut de Formation aux Métiers Educatifs / Training Institute for Educational Professions (FR), www.ifme.fr)

Valeria FERRARINI, Giovanna MACIARIELLO (Aretes Societa Cooperativa: Research Laboratory (IT) www.aret.es.it)

This work is licensed under Attribution-NonCommercial-ShareAlike 4.0 International. To view a copy of this license, visit <http://creativecommons.org/licenses/by-nc-sa/4.0/>

Contents

1. Outreach approach5

 1.1. About the concept5

 1.2. Outreach Working Models6

 1.3. Who are the Hard-to-Reach?9

 1.3.1. Who will we address to?..... 10

 1.4. Why detached? Factors of (dis)engagement..... 11

 1.5. Outreach work views and its implications for practice 13

 1.5.1. Metaphors of communication 14

 1.6. Outreach methods/strategies and tasks at an intervention level 15

 1.7. Key social theories to design the YOutchReach training 20

 1.8. Outreach work evaluation..... 22

2. Policies, strategies, and/or legislation for Outreach work 23

 2.1. Common documents 23

 2.2. Youth Work 23

 2.3. Adult education 24

 2.4. Outreach practice in the countries of YOutchReach Consortium 26

 2.4.1. Outreach Work in France..... 26

 2.4.2. Outreach Work in Slovenia 27

 2.4.3. Outreach Work in Croatia 30

 2.4.4. Outreach Work in Italy..... 32

 2.4.5. Outreach Work in Spain..... 35

3. References 36

4. Additional bibliography 41

Annex 1. Dictionary: Domains of intervention addressed in YOutchReach..... 42

Annex 2. Handbooks and guidance on outreach..... 43

Annex 3. Good practices..... 44

Annex 4. Pedagogical toolkits..... 50

Annex 5. Assessment tools..... 52

IO1: YOUTHREACH FRAMEWORK

- **Creation of a policy framework and a theoretical corpus of outreach (IO1) for adult education**
- **Identify good practices, pedagogical toolkits, assessment tools, etc. of outreach for IO2 & IO3.**

1. Outreach approach

1.1. About the concept

There is no clear **definition of what constitutes ‘outreach’** (Jose et al., 2020). Research on outreach has recognized the myriad challenges and contradictions involved in the concept (Agustin, 2007). From a methodological point of view is something uninvestigated which has led to different actors pointing out the methodological deficit as problematic (Andersson, 2013) which contributes to its ineffectiveness in the field since remarkably little has been written regarding theoretical models of outreach (Kirkpatrick, 2000). Also, from a historical point of view, although outreach was there from the beginning, it is not discussed or mentioned for instance in basic teaching books¹ of social sciences methods of many university programs (Payne, 2005). Social work did not start-off with building social service offices, but with people working and making contact in the field (Svenson, 2003). Moreover, ‘outreach’ is more commonly used within the health and social sectors, which means that despite being present in many socio-educational interventions not all professionals refer or acknowledge their ‘outreach’ strategies and approaches as what they are: ‘outreach’ in nature. This complicates the identification of its practices, manifestations, and results. For instance, the lack of literature from the education sector on many services where outreach is a key strategy may explain why there is little guidance around outreach in education practice frameworks (Jose et al., 2020). One reason for this is that outreach work regularly is treated as highly dependent on context. Considerations of method and accounts of work experiences are usually kept within the respective field and related to specific target groups (Andersson, 2013). In this sense, outreach approaches are implemented in very different ways in different countries depending on the structure of social policies: from institutionalization of care or support-based on community to individual approaches. Another explanation is that it is given a subordinate importance because it is often seen as a part of something bigger such as ‘detached’, ‘street-based’, or ‘preventive’ work. However, a cross-contextual consideration of outreach work would help us to understand not just how it is affected by circumstances, but also what the method brings into the situation.

According to this, this approach requires at least three levels of action: (1) **policy planning**, (2) **institutional organization**, and (3) **professional intervention**, to be able to respond to the growing complexity of needs and the growing hyper-specialization of socio-educational care. It is the articulation of these three dimensions which makes effective implementation difficult. This difficulty is visible by regular questioning of specialized associations in countries such as France who are entrusted with missions that question the basis of their intervention.

Overall, at a conceptual level, ‘outreach’ is commonly assumed that it involves the provision of a service outside the usual location of that service (Wakerman et al., 2008). At the intersection between humanitarian and social assistance, outreach practices are concerned with reaching the people who do not approach institutions (Pian & Hoyez, 2021). The concept of “outreach” has its roots in early social services work and has a long tradition as proximity strategies which enable the approach to

¹ See Annex 1 for a list of handbooks and guidance on outreach.

the person in need by link-building to facilitate his/her access to community resources. These strategies are directly connected with the pioneering experiences of Social Work in the early 20th century in England and the United States. Depending on the context, they have been called “outreach strategies” in countries of Anglo-Saxon influence, “pratiques de milieu”, “travail de rue”, “aller-vers” or “de proximité” in French-speaking countries, and “trabajo de calle o educación en medio abierto” in Spain and Latin America (Chambon, 2018; Llovet, Baillergeau, & Thiot, 2011). Outreach work is related to different interventions: clinical, support and reinforcement of family and social ties, community experiences, risk reduction, educational work, socio-ethnographic surveys, etc.

Following Andersson (2013), the concept has an almost performative character where “the ‘contact making’ is central; it is about ‘reaching out’ to people” (p.172). Thus, traditionally, outreach has been set up to target ‘hard-to-reach’ members or groups of the community such as homeless people, youth, drug users, sex workers or people experiencing mental illness and is a common approach in social work (Mackenzie et al., 2011; Mikkonen et al., 2007; Corr, 2003) who were not in contact with low-threshold services, thus, who are not possible to get in touch with by other means. On this regard, outreach work is ‘by its nature, at the front line’ dealing with people at a grassroots level (EMCDDA, 2001)

However, there are few general definitions of outreach work. Specifically, in the field of adult education, outreach work is used in order to reach out targeted groups of adults who are not involved in learning activities but who are risk of social exclusion (Hake, 2014). Following Hake’s work, outreach work “seeks to lower the thresholds of learning institutions, to ‘bring learning closer to home’, to enhance learning opportunities within the community and to convince difficult-to-reach adults that learning can enrich their lives, and that adult learning is a realistic option for themselves and their personal development” (p. 255).

Still, outreach has also been incorporated into universal services that are designed to meet the needs of the entire population (Commonwealth of Australia, 2011) and may be used to provide more specialised health services to people living in remote areas (Wakerman et al., 2008). Along with this, it is widely accepted that preventive approaches are disproportionately accessed by the more affluent in society, thus increasing (rather than reducing) inequalities in outcomes between different social strata (Marmot, 2010).

Thus, we defend that “outreach” can be overall understood as a methodology and a model of understanding the approach adopted to achieve comprehensive, integrated and continuity care of someone’s needs, both for people detached from institutional care who might be at risk of social exclusion. This necessarily requires of at least three levels of action -policy planning, institutional organization and professional intervention- to be able to respond to the increasing complexity of needs and the growing professional hyper-specialization of socio-educational care. Outreach questions the idea of universal access to social services and the relationship between the individual by postulating a goal of transforming the social offer (Lorenz, 2016). Outreach work opens opportunities for social work students and practitioners to challenge conventional social work practices. For the purpose of this study embedded in adult education we adopt this definition.

1.2. Outreach Working Models

Models of outreach work have been developing since the late nineteenth century and have been influenced by several perspectives and disciplines ranging from politics, faith-based youth serving organizations and community work, ethnography, public health, or philanthropy (Kaufman, 2001). The “proliferation of outreach models operate on a continuum of engagement and vary in the extent to which they aim to address problems at an individual or structural level” (Mackenzie et al., 2011: 351). Authors claim that services continue to implement outreach activity without clarifying what types of outreaches (with which specific mechanisms) are suited to generating positive outcomes in particular circumstances. Therefore, there is a clear need for clarification.

The earliest outreach works are connected to the Salvation Army in America who targeted at poor people, particularly migrants (Korf et al., 1999). Other historical references are made to philanthropic projects in deprived areas of London during the 1980s because of concerns that “deviant” behaviours could become a major social problem. In nature, they are part of a history of ‘rescuing people from the streets’, for instance rescuing women from prostitution (Stacey, 2009). In the United States, the focus was on youth workers following street gangs; thus, their interventions were individual-based instead of structural interventions that could encourage change. With this understanding, programmes to distribute harm-reducing items such as bleach kits, disposable needles and condoms were instituted in many countries. Similarly, in Europe, particularly in France and the UK, outreach started as a **Youth Work Model** from which workers were sent to youths’ local environments to prevent “marginalisation” and encourage social integration through target-led interventions. Much emphasis was placed on education, training, and leisure activities to steer them in the direction of traditional services who could re-engage them. Today this is the model which is frequently used in the Nordic countries, Germany, Portugal, Finland, Austria and France (Corr, 2002).

Outreach work did not occur in Belgium, Germany, Norway and the Netherlands until the mid-1960s coinciding with a moment where drug use was wide-spreading across, and in the 1970s the **Catching Client Model** was introduced. While outreach work in the UK concentrated on drawing drug users into drug-free services, outreach services in the Netherlands were more unconventional and unconditional: the prevailing view at the time was a medical model. The Catching Client Model is still practiced extensively in the Nordic countries and to a lesser extent in Italy and the UK (Corr, 2002). The main idea behind is a needs-led, client-centred approach with goals of insertion in services, training, etc. for the reduction or elimination of particular behaviours (Pitts, 2002).

A decade later, the **Self-help Model** originated, specifically in the late 1970s. Like the Youth Work Model, the approach here was based on accepting the reality of problem, such as for instance accepting drug-taking as a social reality (Korf et al., 1999). Therefore, the emphasis shifted to harm reduction activities (including information i. e. on safer drug use and safer sex) and user-friendly facilities (such as settings where drug users could take drugs in a controlled environment). This model is popular in the Netherlands where user organisations produce magazines promoting the dignity of drug users and emphasising the responsibility they have for their own lives (Corr, 2002).

By the early 1990s outreach work had been established in most EU countries (Korf et al, 1999). At that moment, the most common approach was the **Public Health Model**, following the work started by the previous model but this time assigning a greater role to professional intervention.

Another model which has also been spread is the **Service Network Model**. This one comprises of a network involving youth work and public health care and focuses on rapid help to people in crisis and on the swift resolution of their problems (Korf et al, 1999). The main aim is to encourage people to use youth and/or health care services. The intention behind is that by using a network of professionals, resources can be pooled and interventions will be more effective. In practice, then, the challenge is how to coordinate all the professionals from different disciplines under a holistic approach of intervention which is clearly aligned with common objectives.

In the 1990s, there was also the development of community outreach work which involved targeting social networks of people, which contrasted with the **Provider-Client model**. The first one, the **Community Outreach Model** relies on the fact that individual behaviour change depends on social relationships and situations in which such behaviour occurs and also relies on the values of peer groups and social networks (Korf et al, 1999). It allows for geometric progression through communities by seeking to engender changes in social norms within social communities, regardless of the service contact. Moreover, this communitarian approaches do not only focus on networks of people but also on the broader community such as the family or extended social networks such as the local community. In contrast, the Provided-Client model, involves one-to-one interventions carried out by a small number of professionals who ‘reach out’ to persons with the aim of providing

education and prevention materials in the community. This model has been shown to be effective with those who are detached from services, however at the same time it has been criticised for relying too much on individualistic methods of behaviour change, for its over-reliance on individual beliefs and intentions, and for facilitating arithmetic progression into the target population (Rhodes, 1997), compared to community outreach.

Community outreach often uses peer education working within the **Social Diffusion Model**, understood by many as “peer outreaches”. This model assumes that changing peer group behaviour is effective in changing the individual behaviour. Thus, the idea is to both have an impact in both individual and collective behaviour, which has proved to have a greater effect in hard-to-reach populations than the provider-client model. In the United States there are at least two models of peer outreach who have been extensively used: the **Indigenous Leader Model** and the **Peer-driven Intervention Model**. The aim of the first one is to generate social responsibility among the community to reduce harm by disseminating harm reduction techniques through their social networks. To do so, outreach workers identify key informants or opinion leaders who are trained as indigenous outreach workers who then target other key leaders within the target population and encourage them to do the same following a pyramidal pattern of influence. The aim of the second model is to saturate whole peer groups with an intervention message by encouraging as much as possible targeted people to act as peer educators. In this case, they are given monetary incentives to act as peer educators, although this has been criticised to be inappropriate in some cultural and economic contexts. However, this peer approaches have been read as necessary and one of the first steps towards community change and collective action. This model has been established in several countries, including Ireland.

To put it briefly, the literature characterizes these models as follows (Table 1), each of which present both opportunities and challenges:

Table 1. Outreach models summary. Source: Adapted from Bovarnick, McNeish, & Pearce (2016).

Model	Opportunities (+)	Challenges (-)	Examples
Home-based or domiciliary outreach	(+) Reaches people who are home-bound and may not have access to services/information	(-) May compromise anonymity/confidentiality if others are present in home	Going into young people's home, for instance, to reach young people with disabilities who are home-bound.
Street-based or detached outreach	(+) Reaches those that are not already using services and arguably the most vulnerable populations	(-) Work may be disrupted or discontinued due to the informal nature of working and the transient nature of street life	Going out to contact people in their spaces in and around the 'street', targeting individuals.
Travelling/mobile or peripatetic outreach	(+) Reaches broader populations (+) Draws on partner organisation's expert knowledge of the context and target group (+) Co-location with partner organisations can facilitate cross-referrals	(-) May create confusion around objectives of outreach (-) May create conflict (of interest, or fears around 'poaching clients') (-) May create logistical problems (arranging sessions, etc.)	Working with other agencies or organisations that have access to, and inside knowledge of, target populations, such as particular BME or other communities.
Satellite	(+) One-stop shop can create effective outreach and services (+) Can deliver training and services to communities that have no access to facilities (+) Can be effective for 'hard-to-reach' populations, e.g., refugees and asylum seekers	(-) Resource-intensive; requires tools and adequate staffing levels (-) Can be logistically challenging	Making a service more accessible by sending a worker from one centre into a satellite location (e.g., The 'BIG Bus Project').

Contextual	(+) Comprehensive and tailored response to people's needs and contexts	(-) Resource-intensive (-) Requires stakeholder commitment	Mapping the locations, in which people are at risk, and using outreach as one strategy to intervene in those spaces.
Peer	(+) Actively engages and trains people in awareness-raising and promoting services (+) Adds authenticity	(-) Resource-intensive as people need training and support (-) May not be appropriate for all outreach activities and people	Training people to deliver outreach services to peers.

This being said, it may be important to use different and complementary models of outreach depending on the local context and be prepared to change tactics if one approach work more or less well than others.

1.3. Who are the Hard-to-Reach?

Not all eligible people access the services designed to support them. The hard-to-reach or hard-to-engage, also known as 'care avoiders', are usually isolated, highly mobile, and are usually not in contact with any services typically by processes of social exclusion and socioeconomic deprivation. They are usually seen as non-engaged users to services because of their inability or unwillingness to engage with services that have been deemed appropriate for particular groups (Mackenzie et al., 2011). Historically, the hard-to-reach have been identified within 'classic' areas of harm-reduction (sexual health, HIV, risk-reduction, substance abuse and mental health). They also include early school leavers who have fulfilled their school obligation or adolescents who are still in education but are at risk of dropping out; a broader group of young people called NEET (neither in employment, education, training); homeless people; people involved in crime or gangs; traveller communities³; low qualified, low skilled, and increasingly elderly people; and, other people from linguistically, culturally, and socioeconomically diverse backgrounds in situations of deprivation and 'hidden' or 'invisible' populations unlikely to come into mainstream medical and social services. Thus, they are seen as in need of more targeted social work approaches, such as outreach work (Elissen, Van Raak, Derckx & Vrijhoef, 2013; Cortis, 2012).

In the present moment, they have reported an even greater deterioration in their social, economic and health situation during the pandemic, which is why we they are being targeted even more frequently through street work. Various studies (Kuhar, 2017, Slovenian Youth 2018/2019, Youth 2020) also identify the challenge of relatively low participation of young people in youth work. As a result, they have fewer opportunities for personal and social development and mental health promotion, which has been exacerbated by the Covid-19.

This being said, although convenient labels, they disguise the complexities of the lives of people and the factors which lead to their disengagement (Boag-Munroe & Evangelou, 2012). Also, the term 'hard-to-reach' as used in the literature is proved to be elusive, instead there are degrees of 'hard-to-reach'-ness. Another important aspect to acknowledge here is that the term 'defines the problem as one within the group itself, not within [the] approach to them' (Brackertz, 2007: 3). In general terms, two broad categories can be used to understand hard-to-engage people: on the one hand, people who might be understood as voluntarily isolated, perhaps because engagement might be felt by them to be threatening or stigmatising and, on the other hand, those who have restrictions about service

² See Boag-Munroe & Evangelou (2012) for a review of the literature relating to hard-to-reach people, specifically they focus on families.

³ The term 'Traveller Communities' is an overarching term to encompass multiple cultural and ethnic groups with diverse histories and customs, including: Romany Gypsies, Irish Travellers, Welsh Travellers, Scottish Travellers; Roma; New Travellers; Travelling Showpeople; Circus people and boat dwellers (Lhussier, Carr, & Forster, 2015).

intervention. These last ones are often referred to as ‘hidden populations’ (Benoit et al. 2005; Brackertz 2007), ‘in special circumstances’ (Statham 2004) or ‘invisible’ (Barrett 2008). Thus, when planning outreach work we should take into account both sides: ‘how the system sometimes views exclude people’ and ‘how excluded families sometimes view the system’.

In our immediate context (EU), given the dominance in current policies directed to increasing levels of participation in the labour market, outreach strategies tend to focus above all on two different targets (Hake, 2014: 256):

- First, young dropouts from secondary and vocational education, low-qualified workers, the unemployed, jobseekers and, increasingly, older workers. In most Member States, this tends, on the one hand, to involve closer co-operation between providers of adult education, employment and social service agencies in order to reintegrate individuals in the labour market.
- Second, Member States also focus on those groups which face severe problems of exclusion from adult learning as a result of their multiple social exclusion resulting from conditions of poverty, illiteracy, indebtedness, migration, refugee status, homelessness and alcohol and drug abuse. This leads to the involvement of adult education providers in outreach activities which are often organised together with intermediaries such as NGOs and front-line health and welfare support services including family-care workers, community nurses, social workers and the health services such as family doctors. Through consultation with those in day-to-day contact with at- risk groups, the outreach strategies of adult education providers seek to explore innovative ways of meeting specific learning needs and to fill the gaps that exist in provision ‘closer to home’. There is substantial evidence in the Member States of the development of these so called ‘hybrid’ forms for the provision of adult learning activities for adults in order to support them in learning their way out of the threatening experience of social exclusion.

Another key insight to be taken into account when working with hard-to-reach people has been defined by Arza and Carrón (2014). According to them, the different systems linked to social welfare (health system, educational system, social system, etc.) have been structured based on a certain segmented construction of the needs of the human being, as if borders could be defined within them. In addition, around them institutional and professional structures have been generated that make the delimitations between the different systems even more evident. This compartmentalized configuration of institutional responses has traditionally made it difficult to generate comprehensive and integrated actions specially for people with multiple and complex needs. Progressively, there have emerged increasingly specialized resources. This has been accompanied by a context that has gradually downplayed community practice, relegating it to a normative and more welfare level (García, Barriga, Ramírez, Zubiría, & Velasco, 2016). Paradoxically, the more complex social welfare systems in a society become, the more difficulties arise in dealing with complex phenomena that require the coordinated intervention of various care systems and levels. At the same time, the complexity of a society also implies an increase in the visibility of this type of mixed demands and needs. Meanwhile, the spaces of confluence between the health and social systems are particularly confusing, and it is not always easy to know when ‘health’ ends and ‘social’ begins.

1.3.1. Who will we address to?

The agreement we reached was that in YOUTHReach we will focus on population depending on the partner associations specialization.

	Indirect group
France	Homeless, drug-addicts, young precarious workers, youths leaving the ASE (youth social aid)
Slovenia	Dropouts and NEET:

	<ul style="list-style-type: none"> - Adolescents at risk of dropping out of school (e.g. absenteeism, running away from home, poor social conditions, children /youth from families with a fragile social network, etc.) - Adolescents, immediately after dropping out of school, - Youth in the nightlife, including internet activities (gaming, social networks etc.); it hurts their biorhythm - instead of day, they live at night, - The conventionally unemployed, the largest subgroup, which can be further subdivided into long term and short-term unemployed; - The unavailable, which includes young carers, young people with family responsibilities and young people who are sick or disabled; - The disengaged: those young people who are not seeking jobs or education and are not constrained from doing so by other obligations or incapacities (e.g. homeless people, young parents,...), and discouraged workers (precarious workers), as well as young people who are pursuing dangerous (e.g. drug abusing, hooligans) and asocial lifestyles (e.g. ICT addiction, hikikomori); - The opportunity-seekers: young people who are actively seeking work or training, but are holding out for opportunities that they see as befitting their skills and status; - The voluntary NEETs: those young people who are travelling and those constructively engaged in other activities such as art, music and self-directed learning.
Croatia	<ul style="list-style-type: none"> - Youth who are facing with different school risks (peer violence, low marks), - Youth with problems in behaviour: internal and external, - Youth who grow up in risk families, - Youth and their families who are social care users, - Youth who are in the risk of drop out, - Youth in the status dropouts, - Youth in the NEET status.
Italy	<p>In each region it will be different: migrants; women; sex-workers; poor people.</p> <ul style="list-style-type: none"> - In Napoli (Campania Region) the target are mainly marginalised young people (children, adolescents and young people between 18 and 30 years old) who live in disadvantaged territorial and socio-cultural contexts. By taking care of them, the idea is to take care of their families and people who are close to them in a proximal way (e.g. teachers, professionals who follow them, etc.). The aim is to bring young people into dialogue with their context and with the institutions and to help them bring their skills and resources into play. If the institutions are not involved in this dynamic, part of the process fails: the needs of young people are not effectively met - In Caserta (also in the Campania Region) the target are labourers, sex workers, bricklayers, etc. The age of those involved in labour exploitation ranges from 15 to 60 years, with men outnumbering women. The communities encountered are predominantly Ghanaian, Bengali and Sik. The people are victims of labour exploitation but often also have major health problems or are victims of trafficking. Not all of them are easy to contact: some see the operators as a transitory opportunity or not very interested in solving their problems and are therefore mistrustful.
Spain	Migrants, gypsies, women, refugees

1.4. Why detached? Factors of (dis)engagement

A range of factors explain this (dis)engagement and/or (dis)connection with the system. Mackenzie et al. (2011) outlined a continuum of complexity that might lead to non-engagement in preventive care services. This engagement continuum ranged from lack of knowledge of a service to multi-faceted and interrelated psychosocial and structural challenges (Doherty, Hall, & Kinder, 2003). Others say that reasons for avoiding contact with services are that they are geographically or psychologically inaccessible, fearing the consequences of contact and often feeling or perceiving that

they do not need help. Besides, service are irrelevant to their needs or are not proactive in seeking them.

The factors of (dis)engagement that must be taken into account when designing outreach approaches include **individual** (e.g. beliefs, psychosocial factors, perception of need), **service** (e.g. promotion, access, staffing skills and capacity) and **system** (e.g., scheduling, targeting) factors (Slee, 2006).

Lhussier, Carr, and Forster (2015) identified three levels of (dis)engagement: behavioural, cognitive, and emotional, which led to the outreach outcomes of **participation, behaviour change and building social capital** (Figure 1). According to these authors, building trusting relationships was identified as critical for facilitating behaviour change and social capital outcomes. In contrast, participation or 'behavioural engagement' in less complex preventive activities such as screening was less dependent on significant levels of engagement with the provider.

- **Participation:** Outreach can lead to participation without necessarily entailing a greater level of engagement. These interventions are most likely to be implemented in a context of neutral or low trust, counterbalanced by negotiation over the focus of the intervention to respond to needs or requests, such as: clothing, welfare, and problems with eviction. As a result, this triggers the mechanism of behavioural engagement in participants.
- **Behaviour change:** Outreach workers are highly trusted and often influential within the community, and negotiation over the intervention focus becomes less important. Instead, the outreach worker's position provides opportunities for social influence, triggering a cognitive engagement leading to behaviour change. An example of this is an intervention aimed at the prevention of HIV and sexually transmitted diseases in Roma men in Bulgaria. This involved the recruitment of network leaders who trained them on reducing HIV risk behaviour in the network. Outreach workers were highly trusted by the community, and as a result people became cognitively engaged with the intervention and reported a change in behaviour.
- **Social capital development.** was fostered through the work of organizations with longstanding relationships with the Communities, who had demonstrated their commitment and reliability over time and who had established a 'trusted brand' that facilitated early engagement. Their links also involved statutory services, funding bodies and educational institutions, and thus they offered opportunities to work towards longer term goals. An example of this can be found in a project aimed to empower community members to develop

their own solutions to health issues which provided opportunities for social engagement. For details of all the outcomes, see Lhussier, Carr, and Forster (2015: 5-6).

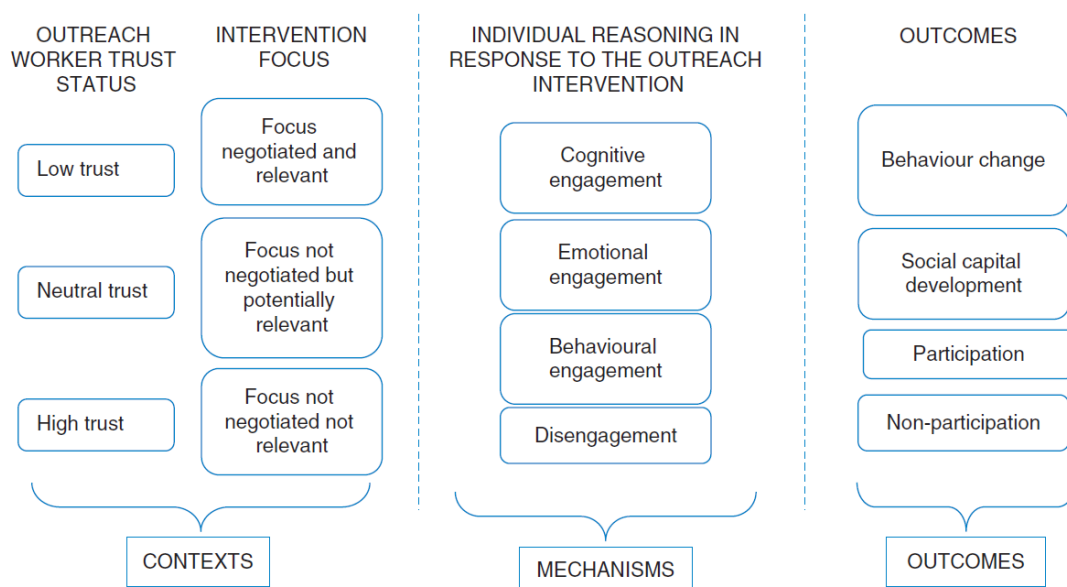


Figure 1. Explanatory framework for outreach interventions. Source: Lhussier, Carr, & Forster (2015).

As a consequence, changing behaviour or developing social capital, on the other hand, requires workers to build explicitly on long established and trusting relationships. Similarly, Boag-Munroe and Evangelou (2012) recommend that services respond to complexity by taking responsibility for reaching out to people in innovative ways, adopting flexible approaches while remaining consistent and ensuring the sustainability of services.

Examples of outreach activities to facilitate cognitive and emotional engagement for the purpose of influencing behaviour and facilitating social change are: phone calls, SMS, social media, transport, home visits and attending programs or appointments with people. Besides, services considered behavioural engagement the first step in the engagement process rather than the primary outcome of outreach activities.

1.5. Outreach work views and its implications for practice

The policies and practices of outreach work and the construction of accessibility entail a wide range of approaches in social policy and service delivery, ranging from controlling access, through enabling individuals to bridge the divisions between the periphery and the mainstream, to aiming to transform those divisions (Clarke, 2004). Actually, following Clarke’s work, the differentiation is made between two main views on access: a universalist view and a transformative view.

The **universalist view** on access is based on the idea of access for all in need (equality), assuming normative preconditions which predominantly apply only to those who share the characteristics of the universal subject (Clarke, 2004). Consequently, they are usually approached within conditional frameworks -in terms of residual-remedying approaches to specific target groups-, usually contested by economic reasoning, and expressing competing views on citizenship, rights and responsibilities (Dwyer et al., 2014). Promisingly it fits within welfare optimism based on making more people use them to permit their participation in society; however, it tends to neglect the complex relationships between social services, social rights, and welfare reforms in contexts of shifting economic and political transformations (Grymonprez, Hermans, & Rosse, 2020). As a result, social interventions cannot be characterized by the aim of inclusion, but by containment, surveillance and control. Apparently, underneath the umbrella of ‘access for all’ the socially constructed divisions between us

(the mainstream) and them (the periphery) seem to be intensified, at least for those individuals perceived as very reluctant to change (Grymonprez, Hermans, & Rosse, 2020). In this sense, concerns arise about designing and planning outreach interventions to change behaviours instead of addressing organizational, institutional, and structural problems (Whiteford, 2010). As a result, structural factors remain unchallenged.

Meanwhile, the **transformative view** on access questions not the principle of universality but the 'us' in universalism moving forwards to a more democratic practice (Clark, 2004) that engage in the analysis of the patterns of socioeconomic inequality and its production. This implies involving the society in a public debate on the meaning of access (Grymonprez, Roose, & Roets, 2017). Here, reflexivity and proximity are seen as key-features of outreach work to both address needs at an individual level, but also by informing and engaging social policy in the web of access relations (Grymonprez, Hermans, & Rosse, 2020).

These views are open for debate, so that it raises questions on the position actors in the field take in that web of access relations and how the role of outreach work in relation to access is perceived (Grymonprez, Hermans, & Rosse 2020). Thus, depending on this, its characteristics condition the effect and transformative potential of outreach work.

As seen, a central dilemma of outreach work is that its core principles of reaching out to people frequently runs counter to policy and funding requirements. As the context in which projects work has become increasingly target driven, there has been much pressure on projects to focus on specific outcomes for target populations. Thus, outreach encounters the following challenges (Bovarnick, McNeish, & Pearche, 2016: 17):

- Policy agendas can restrict workers' freedom to work as they see fit.
- Funding pressures emphasise individualised outcomes on specific issues.
- Lack of long-term funding commitment undermines workers' ability to establish trust and relationships with people, which takes time, and to offer people continuity.

1.5.1. Metaphors of communication

Similarly, metaphors of communication also play an important role in all discussions of the social relationships between adult learning activities and the target groups, audiences and publics addressed by socially organised learning activities. Hake (2014: 258-) describes three distinct metaphors which influence outreach work:

- a) The **transmission metaphor**: this has been the dominant theoretical perspective in research seeking. This metaphor assumes that the providers of adult learning, both public and private agencies, are responsible for the supply of information for those who are regarded as in need of knowledge, skills and sensitivities. Such assumptions encourage providers of adult learning to ensure the smooth, effective and successful transmission of information via outreaching activities to target groups, audiences and potential publics. Specific attention is often paid to technical factors in unsuccessful communication. Moreover, 'opinion leaders' and 'intermediary agencies' may be introduced in outreach work who function as a feedback loop and enable the source to attune the message to the reactions of the intended receivers.
- b) The **signification metaphor**: it is informed by a hermeneutic understanding of the interpretation and reinterpretation of outreach messages by senders and intended audiences. Communication is understood as reiterative processes of interpretative activities. In this perspective, the signification metaphor recognises that potential audiences may evaluate adult learning opportunities in terms of their own cultural capital, codes and meanings. Furthermore, adult learning programmes may provide individuals and social groups with the cultural resources to develop their own cultural meanings and *critical cultural awareness*. The world of 'messaging' produces an almost unbridled pluralism in the

dissemination and acquisition of cultural meanings together with the differentiation of social relations in the public and private spheres. The signification metaphor suggests that target audiences can produce their own definitions of problems and possible solutions in the form of adult learning.

- c) The **argumentation metaphor**: The ‘argumentation’ metaphor shifts the focus of analysis to understandings of the social organisation of communication and learning in terms of the articulation between adult learning and these broader social and cultural forces. The argumentation by target groups of their own situation is based upon their own countercultural systems of meaning which can easily conflict with the arguments promoted by the providers of the adult learning programmes that are intended to help them. More often than not, adult learning programmes are ridden by different ‘arguments’ with regard to the reasons why the social situations of target groups are regarded as problematic and thus ‘in need’ of interventions to stimulate their participation in adult learning programme. This means that communication processes cannot be divorced from the social relationships in society which are reflected in these different argumentations about adult learning activities. These social relations involve those who are organised by others, or organise themselves, for the purposes of communicating and acquiring knowledge, skills and sensitivities and the struggle for cultural resources to these often differing purposes of adult learning.

This analysis suggests that it is indeed necessary to understand focusses on the formation of ‘subject’ positions in communicative practices and the force of social and cultural meanings. Outreach work may be better understood in terms of the capacities of social actors, indeed collective cultural agents, who are actively involved in the creation of the social and cultural meanings of ‘subject’ positions in social communication processes.

1.6. Outreach methods and tasks at an intervention level

Outreach has a long tradition in many areas of work in social care, health, education, etc., where it takes place outside offices, in the community. The starting point is the contemporary doctrinal principles of social work, which are **broadly based on systems theory and the constructivist paradigm** in the social sciences, applied to the field of social work. This includes **participatory approaches, ethnographic methods, and action research principles**. This is very well connected with the key concept of “disaffiliation”. Compared to the recognition of the static nature of the condition of exclusion, disaffiliation focuses on the social fabric that hooks the subjects through various threads, which are then the actors or the places where the knots that hold the young people to the social context can be strengthened (Castel, 2008). This approach combines well with the relational approach, which focuses on relationships and not on subjects, focusing once again on the context and not only on the subject. The subject is always situated and immersed in a specific field, with its own habitus. It is a question of acting by entering the field, trying to understand the forces in the field and the trajectories that are determined and offered to subjects in the context.

To intervene and break the cycle of disadvantage, **outreach approaches are aimed at ensuring that people are thriving in strong, connected communities**. Outreach is based on exploring the lifeworld of users in direct interactions with them in their everyday environment. Through outreach, we intervene in the environment and learn about the lifeworld of the users, who are experts in this context from their everyday experience. In this way, social workers learn about people’s needs, interests, goals, social networks, relationships with others, protective factors, and risk factors in relation to their life context. Outreach enables the exploration of desired outcomes in relation to everyday life in the community.

To do so, interpersonal relationships between the workers and people embody outreach interventions (Čačinovič Vogrinčič, 2005; Lhussier, Carr, & Forster, 2015;). Principles of effective

outreach are centred around equity, inclusiveness, cultural appropriateness, and positive goal-oriented relationships. Others defend that the key focus areas are quality, equity, and partnerships. Therefore, workers strengthen social cohesion, communication between community organisations and cross-sectoral networking, the involvement of the individual in community organisations and the expansion of the individual's social networks.

Outreach takes place in institutional spaces, private and public areas (Figure 1):

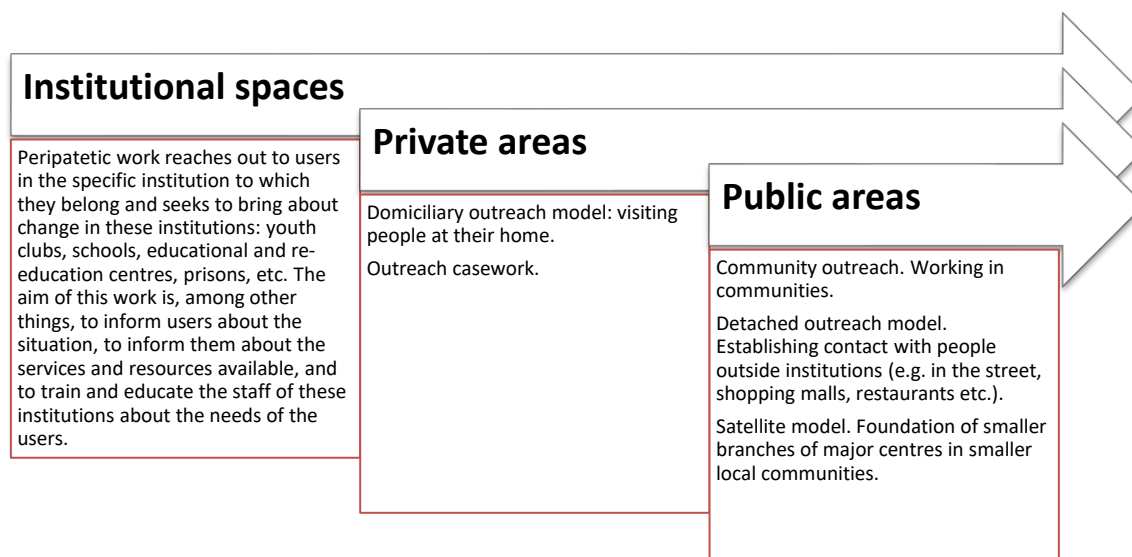


Figure 1. Spaces where outreach takes place. Source: Own elaboration.

In social sciences (social work, social pedagogy, etc.), outreach is considered a **non-linear process** that focuses on **three main tasks** (Andersson, 2013; Korf et al., 1999) which merge into one another and may be difficult to separate in practice:

- (1) First on the **establishment of trusting relationships**. The first of these is the contact making, which of course is the basis for justification of the method as such. The fundamental idea of outreach work is to start a process of social interaction between people in need, on the one hand, and some kind of support-oriented organizational body on the other. The contact making is undertaken in a variety of settings: in public, at certain meeting places or in people's homes. According to Hake (2014), it takes place at a considerable distance from formal institutions: families, households, streets, neighbourhoods, communities, trade unions, political parties, churches, voluntary associations, and social movements at the regional and local levels. Also, the proliferation of people's online activity suggests that outreach can, and perhaps should, extend into people's virtual spaces⁴. Whatever the case, outreach work is underpinned by the principle that it is necessary to reach people 'where they are at' -in their own 'places and spaces' (Bovarnick, McNeish, & Pearce, 2016). The implication of this is that outreach workers must acquire competence in at least two different areas:

⁴ In terms of the provision of information about learning opportunities, country studies refer to the development of virtual information systems about the learning opportunities available to adults. These comprise national and institutional virtual portals providing information about providers and their courses at the national, regional and local levels. Current developments in outreach work now include experiments with broadband communication and the potential of social networking software to reach targeted groups and make learning more accessible in user-friendly formats (Hake, 2014).

- a. **sociability**: outreach workers must have skills to initiate and maintain communication also under conditions that do not stimulate reciprocity and relational actions. Successful outreach work usually depends on values such as respect, hope, and kindness, as well as other personal characteristics such as commitment, altruism, and creativity (Tommasello, et al., 1999).
- b. **spatial orientation**: they must know about local meeting places, group movements, and how to bring about desired encounters.

Here it is important to understand that just by establishing trust-worthy relationships does not make them outreach. There must be a purposeful attempt at getting in touch with members of a target group, and structured trials to connect them to social support systems, which led us to the second main task of outreach practices. The idea behind this is to reduce the physical and ideological gap between the user and the service, and as such are likely to improve service uptake.

Trust between outreach workers and some people can be enhanced by working with and through groups and organizations who are already trusted. Along with this, **working in partnership with other agencies or individuals with expert or 'inside' knowledge and access to specific groups**, such as particular faith groups, disability or LGBTQ+ organizations, or ethnic communities, can be particularly effective (Bovarnick, McNeish, & Pearce, 2016). Also, giving people a **choice** to engage with an outreach service, and letting them **control** and lead on how they want to engage helps building trust. The key feature for trust is that the way of working is determined by the person, rather than following an established protocol or programme of work that is promoted by the worker or service. In summary, three key principles at this stage are:

- **'trust'**: establishing trusting relationships with people but also with the local area⁵ to add credibility and facilitate cross-referrals of people targeted through outreach to other agencies.
- **'choice'**: people engage voluntarily
- **'control'**: people co-produce activities and interventions. This involves agency.

Another crucial strategy to further develop appropriate outreach responses is to **engage relevant stakeholders** in the identification of needs, building trust and drawing on established relationships and networks in order to raise awareness of service amongst populations and communities.

- (2) Second, **linking people with (or providing) the services** and/or support they need, by employing 'linkage' strategies (Olivet et al., 2010) to facilitate access to societal resources. This second main task of outreach work implies initiating social change processes for the target group. Making contact is never an end in itself; it is always the first step in a process aiming at the improvement of life conditions and social situations for people in need. Basically, outreach workers have two ways to go: either they connect people to accessible help resources and support systems, or they may organize and carry through the effort themselves. There is a difference in the initiating process depending on how outreach work is integrated and connected to other tasks that the workers must perform. Important in this context is to come to an agreement with the people contacted on what personal or structural conditions constitute a 'problem' and should be changed. Outreach workers also need extensive networks and good knowledge about possible change agents to make the initiating process work.

⁵ Outreach needs to be supported by a good understanding across the organisation of why the work is important, an appreciation of what outreach entails and how it should be supported.

In so doing, the improvement of people's life conditions is a central goal for the outreach endeavour, and meeting outreach workers may have huge impact on people's lives. Outreach concerns creating the prerequisites for a process of social change. Following Ribot and Peluso (2003), by access we refer to the right to benefit from things (which they call rights-based mechanisms of access) but are also taking into account the abilities and constraints to benefit from objects, persons, institutions, and symbols.

- (3) Finally, by the **provision of ongoing support** embedding engagement strategies within systems and programs. This third main task which depends mainly on the building of 'a web of access relations' (Grymonprez, Hermans, & Rosse, 2020) is thus centred to establish and maintain social support. For one thing, this has to do with the effort to facilitate social change processes. Target groups are provided with accessible information, often printed, on what to do and where to go. Outreach workers also spend a lot of time on motivational work. They talk to people about possible ways to change their situation. Sometimes this part of the work has a very practical character which is done in a very inventive mood, at times in the borderlands of what professional rules and regulations would allow. A second part of this social support has a temporary character, such as arranging a bed for the night or organizing instant backup in critical situations to meet immediate needs. Other activities which are encouraged are known as 'harm reduction' and counterproductive in relation to change efforts, concentrating on more long-term solutions. Thirdly, social support is given to sustain social change efforts such as participating in treatment programs or group sessions. Outreach workers often follow up people they have been working with, partly because they continue to meet them in the streets.

One main cross-skill axis of outreach practice is **reflexivity** (Gardella, 2017; Le Goff, 2014). Outreach work is a highly reflexive activity with a working day often filled with discussions on methodological issues. Consequently, our perspective, voluntarily critical, thinks of accompaniment and reflexivity as two inseparably linked activities under the same process of standardization (and formalization) of practices. From the philosophical perspective of care, which prompts consideration of how assistance is received, a reflective care-giver adjusts the help provided to the recipient's experience of care. This adjustment varies according to the legitimacy of the case and the time allocated by the welfare systems to this experience, which implies reflexivity (Gardella, 2017).

1.6.1. Outreach strategies

One paradox of outreach work is that despite its focus, **no specific methods of implementing have been specifically detailed**, although the request for more knowledge of methods has been ever-present for a more solid professional basis to build their work upon. This reality contrasts with other logics named as 'romantic ethic' that defend the need to place a strong emphasis on informality and moral commitment as the defining elements of this occupational role (Henningsen, 2010) and which overcomplicates the methodological development. This combines as well with the fact that differences between outreach approaches have been overemphasized at the cost of a more generalized account.

In fact, the complex nature of the outreach task requires more than a method, since although there is no standard way to carry out outreach work, but it is rather a commitment to responding to issues raised by the target group in a holistic way (EMCDDA, 2001). According to several, outreach work acts as an umbrella term that covers a wide range of activities designed to bridge both physical and ideological gaps between users and services (Mackenzie et al., 2011). In general, using a range of approaches flexibly can highly increase the change of engaging target populations. Outreach may include work with families, carers, the wider community, etc. (Bovarnick, McNeish, & Pearche, 2016). Usually, it consists of time-limited, targeted and problem-oriented interventions focusing on achieving specified outcomes (Crimmens et al., 2004), which adopt a case-work approach or a group-work approach (Jefferies & Smith, 2002).

Arza and Carrón (2014) defend that outreach approaches must incorporate structural, organizational and professional strategies. Thus, they identify and prioritize five strategies to do so: case management, on-going social support, assertive community programs, peer support and other outreach strategies. For them, all of them have two essential elements which are key: they are people-centered and proximity-designed.

- **Case management.** It consists of the follow-up of the case allowing the management figure to readapt the application of the plan to the evolution of the user and his/her environment. This methodology is seen as a strategy that can be useful for achieving continuity in care and has its origins in Mary E. Richmon, Carl Rogers, etc. According to this concept, case management can facilitate the proper flow of information about the case between the different services and professionals that intervene (*continuity in information*), can contribute to the complementarity between the services that intervene in the case, anticipating overlaps, gaps in care or other types of dysfunctions (*continuity in management*) and can allow the person to user has a single interlocutor in the system (*relational continuity*). It is necessary that the plan foresees a moment for the integral reassessment of the case (apart from the follow-up). The re-assessment allows observing the results of the plan and the changes that have been experienced in the subject and his/her environment. In this way, it will be possible to assess whether it is necessary to define a new intervention plan and what factors it must consider.
- **On-going social support.** This strategy is used especially in the field of intervention with people or groups affected by social exclusion. Its main characteristics are the following: it is highly focused on the needs perceived by the user; it develops personalized support processes; it tries to detect and reinforce the strengths of the users; and facilitates their access to community resources. It is about developing a methodology alternative to the bureaucratic relationship between public administration and citizenship. In social accompaniment, proximity must be built from the first contact to the end of the process, creating bonds of closeness and trust between the user and the professional. In many cases, the strong demand for services, their volume of work, the lack of professionals and the rigidity of schedules prevent the correct development of accompaniment actions (Aguilar, Llobet & Pérez, 2012).
- **Empowering and assertive community programs.** This strategy arises from the movements in defence of human rights and, especially, from the feminist movement. It posits that every oppressed and/or socially disempowered group (as may be the case of hard-to-reach people), needs to strengthen its resources and feel that it has the capacity to promote positive changes in its life. It is important to keep in mind that, according to this approach to empowerment, no one can empower anyone, but each person ultimately empowers himself or herself. However, and for this to happen, the person needs spaces of security and respect, as well as people who accompany him/her in his/her process and trust in his/her ability to empower himself/herself.
- **Peer support:** Peer support seeks to make intentional and planned what occurs naturally and informally in any group or community, that is, the dynamics of influence and mutual help among its members. The incorporation of peer support within the social and health care processes can improve access to the target population (especially those suffering from more complex situations) and increase the comprehensive nature of the interventions. Peer support may be able to influence the acquisition of new knowledge, the modification of attitudes and the strengthening or creation of new capacities. Example: 'Mutual aid groups', 'interest/pressure groups', 'peer education', 'peer workers'. For a detailed description of all of them, please see Arza and Carrón (2014).
- **Other outreach strategies:** They include other traditional strategies which have been used in outreach approaches, such as the distribution of preventive information and/or condoms

in spaces with greater presence of people with risky practices; mobile devices for performing analytics; etc.

For outreach workers, also concepts like empowerment and self-esteem provide rationales and tools for doing their job (Agustín, 2007). The practices of action in the field, the non-formal practices are the ones that best allow to overcome the barrier that usually rises between institutional actors and subjects at risk of exclusion, that is, they allow to play the role of glue between the services, towards which the requests can be routed, and the person, who is supported to give shape to his own request, which is not necessarily a request for help, as it can often be framed in terms of a legitimate legal claim. Giving voice and reinforcing the ability to reflect on one's own skills and expectations, in order to achieve greater effectiveness in the construction of one's own life trajectory, as well as the constant reflective practice of the practitioner, permeated by the practice of ethical respect for the subjectivities involved in the paths, not overriding the subjects' right to speak and not acting as a mere enforcer for the institutions, is definitely the key principle.

1.7. Key social theories to design the YOuthtReach training

The key social theories mentioned by all partners to be part of the content of the YOuthtReach training are the following:

- Community social work
- Field work (outreach)
- Street work
- Co-creative social work working relationship
- Individual work aid project
- Inclusion
- Users' perspective concept
- Empowerment (individual and collective empowerment)
- Participatory practice with children and youth
- Active citizenship
- Protective and risk factors
- Anti-discriminatory practice
- Advocacy
- Raising awareness of children rights
- Educational guidance
- Dialog oriented learning
- Community practice
- Bronfenbrenner's ecological model of human development
- Family Stress Model
- Coercion theory
- Labelling theory
- Theories of social support
- Theory of resilience (Family resilience, Individual resilience)
- Learning by doing
- Modeling (A. Bandura)
- Ecological Theory in Social Work
- Social Network Analysis
- Ethnography in Social Work
- Discourse and Reflexivity in Social Work

Other key concepts and theories supporting “outreach” approach in social intervention. The content of the training courses and their characteristics will be framed on this basis.

- The other key concepts that we will put attention on supporting outreach approach will include interdisciplinary approach and teamwork. The high priority on planning social interventions will be on inter institutional collaboration because of planning timely and efficient activities oriented to the aimed population. All these mentioned approaches are important in work with the youth at risk because of getting the “wider picture” of life circumstances of the youth individuals and in order to apply a holistic approach in work on reducing risk factors of social exclusion. Individual approach, group work, community-based approach we find useful in social interventions supporting “outreach” approach.
- Jelenc Kraševc (2003) has developed the concept of **andragogic guidance** work in Slovenia. They defined the theoretical concept of guidance, which is an integral part of the strategy for the development of adult education. The fundamental aim of guidance is to help the individual to successfully complete his/her education or learning, and two parallel aims are: (a) optimum personal development and personal life path of the individual, and, (b) the achievement of his/her vocational or professional goal or career path.
- **Social pedagogy**, as a theory and practice of the educating society, i.e. the systematic and related study of and correlated study of the structures and modes of functioning of groups aimed at human formative processes of man is the definition proposed by Agazzi. Mencarelli considers it a science of development designed to promote and coordinate an educational policy that can enable society to present itself as educating. For Volpi, social pedagogy is the study of the educational relationships possible in a given community, i.e. reflection on the structures of education. Volpi sees social pedagogy as the study of possible educational relations in a given community, i.e. reflection on the structures and processes associated with the socialisation of the individual, the growth of the human personality in the various contexts in which it is gradually inserted and the influences on the formation of its attitudes. For Tramma, social pedagogy can be understood as an area of reflection that is by definition uncertain, whose scope varies with the rapid change of economic, political and cultural variables.

Izzo identifies **four areas of research in social pedagogy**, such as: reflection on education in general; education in society, through and for society; education in cases of need, in the sense of both relief and prevention; and finally, education as an aid to forming man in sociality, in a sense of belonging, in civic responsibility and in service to others. Santelli Beccegato considers the object of study of social pedagogy to be the educational significance of the various social institutions and the operational design to foster the lifelong learning of the people who belong to them.

For L. Pati, the areas of social pedagogical reflection can be defined through the study of the ways in which the individual is enabled by the social system to contribute to its humanisation process. In practice, pedagogical-educational guidelines are drawn up to form man as a citizen, spouse, parent, worker, etc. (adult education, parenting schools, etc.). In practice, pedagogical-educational guidelines are drawn up to form man as a citizen, spouse, parent, worker, etc. (adult education, schools for parents, projects with specific educational aims to be implemented in schools of all levels), ways are studied to encourage the best adaptation of institutions to the humanisation needs of the individuals who are part of them, and the various institutions (family, school, out-of-school, government, local authorities, social services, workplaces, associations, voluntary work) are also studied in relation to what they can do to encourage the training processes of the people who are present in them (such as family advice centres, family mediation centres, family centres).

1.8. Outreach work evaluation

Outreach has been described as eclectic in its purpose, client group and specific mode of practice and, as a result of this heterogeneity, little is known about its effectiveness over time (Mackenzie et al., 2011). However, there is some evidence that outreach can act as a catalyst for positive change in people's lives (Bovarnick, McNeish, & Pearche, 2016). Also, one often-discussed problem with outreach efforts is **how the effects should be measured** (Dickey, 2000). In this line, some defend that if outreach approaches are not better theorised, little can be done to underly mechanisms to assess its effectiveness (Craig, et al, 2008). Is the contact making to be in focus, or is outcome dependent on verifiable changes in the life conditions of target groups? The argument made here is that the potential success of outreach should be measured according to the following criteria: the capacity to create and maintain contacts, and the ability to link and support people in a continuing help process. Otherwise, the estimation of outreach would, to a large extent, be totally dependent on the achievements of other organizational bodies and units (Andersson, 2013).

Besides, following Bovarnick, McNeish, and Pearche's work (2016: 18-21), there is some research which helps to identify the elements of effective outreach:

1. **Scoping needs and resources.** The starting point of an effective outreach strategy should be a scoping stage to fully identify the needs and issues of the target area and/or group, assess the range of approaches that are most likely to work and match these needs and planned activities against the available skills and resources. Scoping should include considerations around diversity and inform thinking around how to make outreach accessible to all vulnerable people. It can inform strategic decisions relating to make outreach team's own capacity to reach diverse target groups and to set realistic boundaries around goals and expectations of what the planned outreach activity is likely to achieve. It may highlight the need to link up with specialist agencies or to delegate/outsource outreach services to organisations that are better suited to reach and deliver services to particular groups or in specific communities.
2. **Understanding and responding to context.** Within people's social environments, contextual safeguarding approach (Firmin, 2015) involves mapping the spaces and locations, in which people are at risk, using outreach as one strategy to intervene in those spaces. It may entail making those spaces safer. It typically includes elements of detached work, either in groups or on an individual basis, encouraging people to think about their own safety in different environments. Workers may engage a young person within their peer groups and neighbourhoods and focus on the individual's resilience to risk.
3. **Framing clear guidelines along the process.** These should include regular supervision, peer support, staff meetings and access to counselling over time. It is necessary to set goals, as well as increased confidence, assertiveness, level of awareness around issues relating to people and staying safe, in order to guide and track the progress being made during an outreach intervention.

2. Policies, strategies, and/or legislation for Outreach work

2.1. Common documents

There are several policy declarations, strategies, and legislations both at a European and national levels that define social workers' and other interventionists' outreach practices. Among them, the following ones are highlighted:

[Towards a Sustainable Europe. 2030 strategy](#) - is one of the most important documents aimed at defining strategic orientations and development. It comprises 5 strategic directions, 12 development goals and, in particular, 17 sustainable development goals. Two development goals are linked to the project content and enable outreach actions: Goal 2 - Knowledge and Skills for Quality Life and Work and Goal 3 - A Decent Life for all.

[Cohesion Policy 2021-2027](#). EU Cohesion Policy contributes to strengthening economic, social and territorial cohesion in the European Union. It aims to correct imbalances between countries and regions. It delivers on the Union's political priorities, especially the green and digital transition.

[Active Labour Market Policies: Connecting People with Jobs](#). The objective of an effective activation policy is to give more people access to the labour force and good jobs. This requires:

- Enhancing motivation and incentives to seek employment.
- Improving job readiness and help in finding suitable employment.
- Expanding employment opportunities.

The implementation of these key elements needs to be managed by effective and well-coordinated labour market and social institutions and policies. Continuous monitoring and evaluation of the impact of policies and programmes are necessary to strengthen policy effectiveness and efficiency in responding to the needs of different groups. The OECD is carrying out a range of activities to help countries strengthen their policies and make good-quality employment attainable for jobseekers and other groups outside of the labour force.

As a result, in Slovenia, for example, there is the [Active employment policy](#) (Action 1 - Training and Education), a set of labour market measures aimed at increasing employment and reducing unemployment, improving the employability of people in the labour market and increasing the competitiveness and flexibility of employers.

2.2. Youth Work

[EU Youth Strategy 2019–2027](#). Building on the experiences and decisions of the cooperation in the youth field in the past years, the European Union Youth Strategy 2019–2027 aims at tackling existing and upcoming challenges young people are facing all over Europe. The EU Youth Strategy provides a framework of objectives, principles, priorities, core areas and measures for youth policy cooperation for all relevant stakeholders with due regard for their respective competences and the principle of subsidiarity. Inside European Youth Goals is one of them **inclusive societies**, with specific goal: Enable and ensure the inclusion of all young people in society with one of the targets: (1) provide legal protection and enforce international legal instruments to fight against all kinds of discrimination and hate speech, (2) recognising that young people are subjected to multiple forms of discrimination.

[European Pillar of Social Rights](#) (European Commission, 2018)

[Public Interest in the Youth Sector Act \(ZJIMS\)](#). This law defines the youth sector and sets out the public interest and the way in which the public interest in the youth sector is pursued. The areas of youth sector relate to the areas of work of the project, including: youth autonomy, non-formal learning and training and the development of young people's competences, access of young people

to labour market and the development of young people's entrepreneurship, care for young people with fewer opportunities in society, healthy lifestyles and the prevention of various forms of youth dependence, access of young people to cultural goods and the promotion of young people's creativity and innovation.

[Stratégie nationale de prévention et de lutte contre la pauvreté: Investir dans les solidarités pour l'émancipation de tous](#) (National strategy for preventing and combating poverty: Investing in solidarity in order to emancipate everyone) (Ministry of Solidarity and Health, 2018, in France)

[Strategy to prevent and combat poverty and social exclusion in Spain](#) (2019-2023) (EAPN, 2019, in Spain). The National Strategy for the Prevention and Fight against Poverty and Social Exclusion responds to the Spanish Government's commitment to cohesion and social progress, providing coverage adequate to the needs of citizens and paying special attention to the most vulnerable people in situations of poverty or social exclusion. It is inspired by the Europe 2020 Strategy. It is directly linked to the Sustainable Development Goals and the 2030 Agenda of the United Nations, and participates in the execution of the Spanish Action Plan of the 2030 Agenda, as a priority of Goal 1 "To end the poverty in all its forms and throughout the world" and Goal 10 "Reduce inequality within and between countries".

[Youth Councils Act](#). The law regulates the operation of the Youth Council of Slovenia (www.mss.si), an umbrella organisation linking all national youth organisations irrespective of their various interests, ideological or political orientations. As a non-profit and non-governmental organisation, it represents the opinions of Slovenian youth at the national and international level. Its members are various youth organisations that carry out different forms of youth work. They also have an umbrella programme document, which regulates the field of youth work and organising in Slovenia: [The Programme Document of the Youth Council of Slovenia "Youth Organising"](#). The purpose of this programme document is to define youth organising, to highlight some of the inconsistencies within youth organising and to propose measures to improve the conditions in which it takes place.

[Resolution on the National Youth Programme 2017-2023 identifies priorities and actions of public interest](#) in youth sector. The National Programme covers the following areas: education, employment and entrepreneurship, young people's living conditions, health and well-being, young people and society and the importance of the youth sector, and culture, creativity, heritage and media.

[Youth: The situation of young people in Slovenia](#)

Report on a broader national survey on the situation of young people in Slovenia in 2020. The survey was conducted on behalf of the Office of the Republic of Slovenia for Youth at the Ministry of Education, Science and Sport by an expert group of the University of Maribor and the University of Ljubljana.

2.3. Adult education

Within the prevailing patterns of participation and non-participation in adult learning, the potential effectiveness of different **mobilisation strategies** such as outreach has been highly contested.

The field of adult education (AE) is very broad. It covers both the development and implementation of various non-formal education programmes, as well as the counselling and monitoring of adults in the education process. The scope of the outreach is very wide, ranging from public institutions (e.g. school, employment, health, culture), shopping malls and public spaces, businesses to urban ghettos, Roma settlements, rural areas or other deprived areas.

Since the mid-1990s, there have been a raising number of policy documents, journal articles, and books dealing with the concept of lifelong learning from different perspectives. OECD's publication

Lifelong Learning for All (1996), UNESCO's Report Learning – The Treasure Within (1996), and Commission's Memorandum on Lifelong Learning (European Commission, 2000) are major policy documents that launched a worldwide debate on lifelong learning. The overarching policy priority in the adult learning sector was **the urgent need to identify strategies to raise levels of participation in adult learning activities and to widen participation to those traditionally excluded from adult learning**. EU Policy Framework for 'Bringing Learning Closer to Home' (Key Message 6 of the Memorandum) was regarded as a more specific set of policy measures and practices which could potentially widen participation to excluded individuals and social groups who were identified as 'target groups' (Hake, 2014). The goal of making the EU the most competitive and dynamic knowledge-based economy in the world was set in 2000 in the Lisbon European Council. Subsequently there was a long drawn-out policy discussion to increase the participation of adults in education and training with the main idea of stressing their role in learning and its contribution to personal development and fulfilment by enhancing economic growth and social inclusion.

This commitment continued through the following years. The European political agenda adopted in 2006 the Communication on adult learning 'It is never too late to learn' (European Commission 2006), followed by the Communication in 2007 on the adult learning Action Plan 'It is always a good time to learn' (European Commission, 2007). As part of the Action Plan, a study was commissioned (Impact of ongoing reforms in education and training on the adult learning sector), which argued that different policy measures and specific instruments can be deployed at national, regional and local levels in order to lower barriers to all kinds of formal, non-formal and informal learning activities for specific social groups. Herein, outreach work is understood as a mobilisation strategy to specific target groups and the development of community-based nonformal and informal learning environments at regional and local levels.

When researchers study lifelong learning, they often point to the education policy dimension, or to historical, social, and economical aspects (cf. Istance et al. 2002; Field 2006; Hake 2008). However, matters concerning the worldwide dissemination of lifelong learning and the influence of supra- and international organizations on the governance of lifelong learning have not been sufficiently examined.

[Council Resolution on a new European agenda for adult learning 2021-2030](#)

The aim of resolution is to increase and improve the provision, promotion and take-up of formal, non-formal and informal learning opportunities for all. They have refined 5 five main priority areas, one of them is **accessibility and flexibility** of time, place, resources, forms of organisation and implementation, as well as a variety of approaches and measures to increase participation, inclusion and motivation for learning because, to fit in with their life and work responsibilities, flexibility is essential to increase the number of adults in learning

[Adult Education Act \(2018\)](#): The law sets out the objectives of adult education, defines public services for adult education, defines and enables the development of new public and non-formal programmes for adults. It provides the basis for further forms and methods of work, such as outreach etc.

Master Plan for Adult Education in the Republic of Slovenia (ReNPIO) 2022–2030 (awaiting approval in Parliament) is a strategic document under the ZIO-1. It defines public interest in adult education, including objectives and indicators of the national programme, priority areas of adult education, measures for the provision and implementation of adult education, indicative volume of public funding for adult education, ministries responsible for the individual measures, method of coordination in the implementation of the objectives, and the of monitoring the implementation of the national programme. ReNPIO also identifies young adults who leave school early as one of the target groups to which the programme pays particular attention. It identifies the area of Guidance in Adult Education and, within it, in particular: developing new approaches to guidance in adult

education (outreach and other), new tools, instruments and other materials. Also identified under non-formal educational programmes for adults is the measure developing and introducing new educational approaches and animations for the less educated; for example, personal tutoring, for older adults and vulnerable groups (e.g. migrants, people serving sentences, people with special needs, school leavers etc).

[Guidelines For Implementing Adult Education Guidance As A Public Service](#)

Guidelines are the official document governing the adult education guidance as a public service. It defines content and organisation of guidance in adult education. An important part is place and space of implementation of guidance in AE, which can be implemented in different ways, outside the offices too, as outreach.

In many European countries, outreach efforts are rooted in a ‘third sector’ (DeVerteuil et al., 2020) of private non-profit actors recognised by public institutions and working on their behalf. In comparison, outreach work and its equivalents in the countries of the ‘South’ are part of public policy, which suggests an exploration of the political and social dimensions of interventions with ‘hard-to-reach’ people (Gondim-Oliveira, 2018). A further analysis of the dynamics between the volunteer sector and the state as well as an examination of the various facets of social and spatial justice would allow us to define the outlines of policy involvement more clearly. This would include examining moral distinctions about vulnerable populations, the actors funded to take care of ‘targeted populations’, and the distinctions between conditional and unconditional aid.

The development of outreach guidelines or an outreach framework would make the outreach work currently undertaken more visible and assist in identifying the resources and skills required to undertake this work. **Outreach guidelines need not be prescriptive** but could emphasise the different elements and purposes of outreach and include the key principles that have been identified across (i.e. flexible, responsive, persistent) (Jose et al., 2020). **Staff training, and resources** are also critical if outreach work is to be incorporated into service delivery models. Case studies reflecting best practice and different strategies could be incorporated which would also help to encourage the process of transforming singular work experiences into a body of collective professional understanding (Andersson, 2013). Making outreach work more visible would assist with determining when to adopt outreach and with whom, making it easier to capture the impact of outreach. Capturing more accurate outreach data would also provide evidence of the financial and human resources required to perform outreach which could then be used to advocate for additional funds to address unmet need.

2.4. Outreach practice in the countries of YOUTHREACH Consortium

The following sections summarize and highlight the main characteristics of outreach work within the countries which are part of the consortium of YouthReach. They will be useful to design and test the training-action module for this project.

2.4.1. Outreach Work in France

In France outreach practices are well known by the concept ‘aller-vers’. On the national level, outreach efforts are usually organised by various local, national and international humanitarian organisations (Médecins du Monde, the Red Cross, and sometimes religious groups), and they are located at the intersection between emergency action and the questioning of public institutions (Pian, & Hoyez, 2021).

In the beginning of the 1990s, outreach practices were part of a unique model of social intervention that differed from traditional institutional methods. These new measures, conceived as mobile strategies, were designed and implemented in order to cope with an increasing people being referred to in public policy as ‘extreme exclusion’ (Duvoux, 2011) who were not longer approaching

institutions. This means that aid relationships had to be rethought based on their temporality of urgency as well as their spatiality, because, at least in principle, it is no longer the people supported who move around, but the mobile outreach teams.

Some pioneers in this area were the *Équipes mobiles psychiatrie précarité* (mobile teams for precarity and psychiatry) and the SAMU Social. 'Proactive' and 'flexible' approaches (Mercuel, 2018) to the most vulnerable aroused to establish 'permanent ties that go beyond permanent places' (Chambon, 2018). Marking a new register of action, outreach practices (mostly in the form of roaming visits) developed on the local scene just as public service tasks were increasingly being delegated at the national level to the parts of the voluntary sector engaged in the fight against precarity. This context has increased the challenges for the professionalisation of mobile outreach efforts, as well as to the modalities of the aid relationship.

The idea of building links with people excluded from services—and of going beyond just giving them emergency assistance but also referring them to appropriate institutions—quickly raised the debate about how far the provided aid can be imposed. Far from being insignificant, this has hardened the tensions between the supporters of individual liberty and those who see aid as a duty (Cefai & Gardella, 2011).

2.4.2. Outreach Work in Slovenia

Outreach work has a relatively long history in Slovenia that began around the beginning of the second world war. During its existence, it has undergone various transformative phases, both in terms of the legal-formal regulation itself and in the way it works with its users.

Its history starts connected with the use and misuse of heroin, cannabis and other illegal drugs which have been present in Slovenia since 1960s, although until 1990s it was believed that illegal drug use is not a considerable problem in Slovenia (Kostnapfel, 2001). This coincides as well with the fact that out of a desire for higher professional recognition and a status comparable to some other professions (e.g. psychology), social workers started to focus on institutionalized approaches and forgot about outreach (Milošević & Urh, 2009). However, during Slovenia's transition to independence in the early 90's, rising HIV epidemic in some neighbouring countries among intravenous drug users resulted in reconsideration of existing policies. In 1996 outreach, as a method of work with harm reduction activities, was discussed at the meeting at Otočec, cosponsored by the Pompidou Group (Gajić, 2017). Another conference where the country was involved is the 3rd European Methadone Conference together with the Regional meeting of Central and Eastern European Countries on Therapeutic Programmes for Drug Addicts and European Conference on Outreach and Open Community Approach (September, 1997). This conference was organised by the Coordination of Centres for the Prevention and Treatment of Drug Addiction at the Ministry of Health and EUROPAD (European Opiate Addiction Treatment Association).

At the beginning the initiative for outreach activities was coming from the governmental structures, but soon Non-governmental organizations (NGO) started to get involved. NGOs as Piramida in Maribor, Stigma in Ljubljana and Komet in Koper have been executing some outreach activities since 1990 (Furlan, 2009). Also, the Republic of Slovenia was included in WHO pilot project "HIV related harm reduction programme among injecting drug users in Slovenia". The Cooperation with WHO Regional Office resulted in Slovenia-Czech Republic Collaborative Project in which Slovenian experience in methadone maintenance had been exchanged for Czech experiences in outreach work. Overall, there were some practices of outreach work done by organizations in the health and social domains (e.g. Kralji ulice working with homeless people, Stigma working with drug users⁶).

⁶ To learn more about Kralji ulice, please visit <http://www.kraljiulice.org/>. For more on Stigma, see <https://drustvo-stigma.si/o-nas/>

Later, until the 2000s Prevention, targeting lifestyle and better health were key axis of outreach work in Slovenia, as part of the strategy presented in the document Health for all. For instance, in 2012, the Municipality of Ljubljana detected a situation when a specific public space became a regular gathering place for big groups of young people at nights. Instead of implementing security measures, the Municipality of Ljubljana decided to tackle this challenge through youth work⁷ which resulted into the establishment of the **Network Youth Street** (Vodeb & Spruk, 2020). This is a network of 6 organizations working in the field of youth work that were ready to address situations alike and develop new approaches. Over the next three years, this Network carried out a variety of support activities (e.g. street work trainings, public events, dialogue with decision makers) with different organizations in Ljubljana and beyond. In 2015 they also carrying out international activities in the field of street work and in 2019 became a representative for Slovenia in Dynamo International Network of Social Street Workers which is leading to further development and growth of practices all around Slovenia.

In summary, for the last 15 years, there have been a number of public (established by the state or municipalities) and non-governmental organisations operating in Slovenia, whose purpose and goal has been to inform young people about issues important to them, to enable them to spend their free time in a quality way, to connect them with each other, to strengthen and develop active and responsible citizenship and lifelong learning, solidarity, non-violence, to develop mutual respect, to prevent discrimination, to strengthen peer learning, and to enable the acquisition of functional skills. At the same time, their aim is to identify, respond to and intervene in young people's difficulties and to empower them to handle their own challenges independently.

At the national level, a network of outreach projects has been established to ensure better position of outreach projects in the country. The **Ministry of Labour, Family and Social Affairs** is responsible for social rehabilitation and integration. Under its domain is the cooperation with International Labour Organisation regarding prevention at the work place. Supporting outreach work and other harm reduction activities is one of its responsibilities.

In Ljubljana, for example, in 2009 the Municipality of Ljubljana set up the public institution/organisation Mladi zmaji (Young dragons). The organisation has its premises at eight locations in Ljubljana and runs activities for and with young people. It is interesting to note that the initiative for the establishment of this youth organisation was given by primary school children participating in the Children's Parliament programme (a programme run by the Association of Friends of Youth for 32 years), as a response to their needs for spending their free time.

Over the last ten years, street youth work has become increasingly developed and present, with the street taking on an important part of the educational function that traditionally belonged to the family and the school. In Slovenia, street work is a way of providing ongoing activities for young people in public spaces where young people gather (streets, parks, playgrounds and sports grounds). It aims to respond to the current needs, interests and talents of young people. Street work usually reaches individuals and groups that are not reached by other (common, public, non-formal) youth programmes, or addresses topics that are not addressed by other institutions. Delivering youth work on the street means connecting with young people, building and maintaining trusting relationships and working on issues that are important to young people. Young people are not organised in formal groups and are usually excluded from the public social discourse on youth. This is mainly an approach that in Slovenia mainly extends to the fields of youth work, social work, social pedagogy, prevention, etc. Youth organisations thus offer young people, through informal street work activities, a wide range of interesting events that enrich their everyday lives, including the necessary life information, dialogue, socialising, listening, support, and advice that young people need on their life journey.

⁷ The contribution of youth work to preventing marginalisation and violent radicalisation, 2017 http://www.injuve.es/sites/default/files/informe_coe.pdf

Especially recently, more and more youth street work practices have been emerging in Slovenia - mainly in the form of outreach (various youth centres, etc.) and mobile youth centres. However, the funding of youth street work practices is still largely based on the application of projects to calls for tenders from various institutions (public, private), which is reflected in particular in the lower sustainability of the practices/projects.

There are a number of youth organisations or centres operating in Slovenia, which are organised in different networks, the most prominent of which are the MaMa Network (which brings together 50 youth organisations or centres) and the Mlada ulica (Young street) Network (which brings together organisations in Ljubljana (and beyond) that carry out street work. The purpose of these networks is to support each other in the design of work with young people and in the non-formal education of their volunteers or youth workers.

The activities carried out by the organisations or centres take place either in their premises or on the street or in locations where young people gather. For example, some organisations have acquired buses for this purpose, which they have converted into an inviting and youth-friendly space. Young people recognise their mobile units as a place for them and are happy to take part in the activities available to them: e.g. sports games, circus pedagogy, pancake baking, various social games, etc.

In addition to the youth centres or organisations, it is important to highlight:

- a) The PUM-O (Projected Youth Learning) programme, which is aimed at NEETs, especially for youth aged 15 to 26 who have not acquired basic education or a profession and are at risk of social exclusion. The programme creates a lifelong learning environment through personalised and pedagogical attention and cohesive group dynamics, involving not only the participants and the mentors but also various actors from the environment. The programme is based on the principles of community project work;
- b) Study Circles, which are small informal groups of adult learners (6 to 12) who spontaneously come together around a common interest and goals to influence the environment. The objectives of the SCs have different topical emphases over the periods, which can be summarised in a few key words: democratisation, making learning accessible to the less educated and socially vulnerable, and promoting their participation. Particular emphasis is placed on the intergenerational design of study circles and on transformative learning to adapt to climate and societal change.
- c) Outreach in guidance in adult education (already implemented) meet the educational needs of young adults and other adults, helping them to integrate into society in different areas. The programmes are based on dialogue, i.e. negotiated curriculum - the participants are the creators of the curriculum and as such are already a form of social inclusion. This is carried out in three ways:
 - at an outside location: guidance is carried out outside the AE public service provider' offices, in a different organisation (these can be other educational organisations, libraries, social work centres and others). The alternative location (one or more) is pre-planned and recorded in the annual work plan. Guidance is always provided at the same place and space, according to a pre-determined schedule (agreed at least one year in advance). The space must allow the implementation of both individual and group types of guidance in adult education;
 - through mobile service: this is organised in cases of occasional needs for guidance in chosen organisations or in public spaces (at the library, shopping centre, public event in the local/regional environment outdoors and other suitable venues). Mobile service can also be carried out in the context of organisations with activities for individual groups of adults, such as occupational activity organisations, the Employment Service, social work centres and others;

- with an information (info) point: informing adults is the main purpose of an info point. There can either be an AE counsellor present who will personally provide information from the prepared materials, or this can simply be a place that offers information materials without an AE counsellor present. The info point can be provided at various locations ranging from public spaces (library, primary care centre, social work centre and others) to various organisations that get many adult visitors (educational organisations for adults, companies, and others).

Counselling in AE is well developed in Slovenia and is also embedded in stable public funding from 2021 onwards. Slovenia wants it to be accessible to all adults, regardless of the type of education. The primary focus is on vulnerable groups e.g. NEETs, less educated, less literate adults, i.e. people with less opportunities.

2.4.3. Outreach Work in Croatia

In Croatia, the legislation and policy framework that protects children and youth interests is, on the one hand, the Convention on the Rights of the Child (UN, 1989⁸) and, on the other hand, the National strategy on children's rights (Nacionalna strategija o pravima djeteta RH 2016-2021).

Also, it was implemented EU Youth Strategy – investment and empowerment (Strategija za mlade – ulaganje i osnaživanje⁹) (2009) and National program for youth in RH (Nacionalni program za mlade RH¹⁰) (2014-2017) as well as the Directive 2016/800/EU of European Parliament and the European Council on procedural safeguards for children who are suspects or accused persons in criminal proceedings (Direktiva 2016/800/EU Europskog parlamenta i Vijeća od 11. svibnja 2016.) (SL L 132, 21. 5. 2016).

In addition, there are the laws that define procedures in situations of the juveniles' breaking the law such as:

- Law about implementation of sanction for youth in conflict with the law (Zakon o izvršavanju sankcija izrečenih maloljetnicima za kaznena djela i prekršaje) (NN133/12)
- Misdemeanor Law (Prekršajni zakon) (NN 107/07, 39/13, 157/13, 110/15)
- Youth Law (Zakon o sudovima za mladež) (NN 84/11, 143/12, 148/13, 56/15, 126/19)
- Law about police work and police jurisdiction (Zakonom o policijskim poslovima i ovlastima) (NN76/09, 92/14).

Also, Family Law and Social care Law include in their paragraphs include protection of children and youth status in the context of family violence, child abuse and neglect, children in alternative housing and other situations where social workers are involved as professionals in order to protect children's rights.

Regarding the reduction of the NEET population share, Croatia adopted the Operational Plan-Effective Human Resources (2014-2020) which is a national programme aimed at improving the quality and rate of employment, reducing poverty and promotion of social inclusion and modernisation of public policies. Also it adopted the Implementation Plan for the Youth Guarantee (PIGzM) in 2013 (Operational Program-Effective Human Resources 2014-2020, 2014). In accordance with the Youth Guarantee Recommendation, all persons under 25 should receive a quality job offer, continuing education, and internship within four months. The Croatian employment bureau is the

⁸ <https://www.unicef.org/child-rights-convention/convention-text>

⁹ http://arhiva.mobilnost.hr/prilozi/05_1364290092_ulaganje_i_osnaz_za_web.pdf

¹⁰ The goal of the National Program is to create a stimulating environment for developing the potential of young people to raise their quality of life and their optimal social integration.
<https://demografijaimladi.gov.hr/istaknute-teme/mladi-4064/nacionalni-program-za-mlade-4072/4072>

institution that is responsible for providing support to youth in job seeking situations where social workers are the most often resources of professional support.

Because of this, like other countries in South-eastern Europe, Croatia also counts with a few outreach experiences aimed at providing support to the at-risk youth, and mostly in urban areas. However, in general terms, **a profound debate about its concept and implementation is non-existent nowadays** since outreach work is absent from the discourse and activity plans of the authorities both at a national and local levels.

Nowadays, field interventions on outreach in Croatia are based on particular projects' activities focused on youth at risk (NEET or dropout) which are clearly aligned with the policies and legislations mentioned. They are usually provided by non-government organizations on local community level. Based on these projects some activities oriented on the support of this population have been organized mainly in urban areas as well as research studies that include youth at risk and professionals that work with this population.

Besides that, professional interventions that social workers and other professionals in Centres of social welfare provide in work with youth and their families are part of their basic professional work. These interventions usually include different social interventions and psychosocial support. Interventions of psychosocial support and educational measures are applied in the school system as part of the professional support provided by psychologists and social pedagogues.

In addition, in Croatia there are a few research studies on youth in the risk of social exclusion such as the NEET population (age 15-29), and the population of dropouts. The interest for this population is growing but still there is no strategic methodology of monitoring this population on the state level - ministry of education nor social welfare has no exact data on this population.

Some example of outreach practices which have been identified in the literature are HIV prevention among FSWs, which started in 1999 in Split, the largest urban centre in the coastal region, while a second civil society organization (CSO) targeting FSW was formed in Zagreb in 2003. According to Štulhofer, Landripet, Božić, & Božičević (2015), programs in Split combine in-house and outreach services that deliver free condoms and provide HIV-related information, as well as HIV testing and counselling. Outreach activities in the region are focused on nearby coastal towns and islands. In a typical month during 2013, more than 200 FSWs used their services. In Zagreb, where prevention is done exclusively through outreach, the program has been cut nearly in half since 2012, but two workers still visit six locations in the city twice a week. There are approximately 200 registered FSWs who receive information about HIV testing and, occasionally, vouchers for free gynaecological exams. The experiences identified point out that by including a community empowerment component in the existing harm reduction programs in Croatia remains necessary (Štulhofer, Landripet, Božić, & Božičević, 2015).

The University of Zagreb highlights that considering their context it would be important to stress outreach strategies in the planning of professional activities which guide professionals in work with the youth at risk on the ground of the EU evidence-based approach. A proposal of strategic activities could be:

- Education of professional community about the youth at social risks: causes and consequences
- Development of communication and collaboration with the key institutions in order to prevent social risks' effects. Key institutions: schools, centres for social welfare, Croatian employment office to provide data to reach the youth (individuals) at risk.
- Development of the one-semester program for youth to support their personal potentials and reduce the social risk effects (help them to improve social skills and increase self-esteem...)

- Encourage and the youth to join to the program and to develop the new, supportive peer network in the program
- Inspire the youth to participate in special (additional) activities that are focused on their individual interests
- Monitoring, and evaluating the individual and group results
- Invite the participants of the group with the most positive outcome in the recruiting process for the new group in the program activity.

In the context of outreach training modules **there is no specific program at the academic or professional level**. But there are a few civil organizations that provide brief trainings and seminars on reaching out youth as well as the Croatian employment office. As a part of social work academic education, students of social work are taught about youth needs and challenges that they are facing during their maternity period, and with the importance of cooperation between school, centres for social welfare, family, police, medical doctors, and other subjects in order to provide needed professional support.

2.4.4. Outreach Work in Italy

In Italy Outreach interventions are usually referred as **Street Work (*Lavoro di Strada or Educativa di Strada*)**. This means that it is no longer the person who goes to the service, but the service goes towards the person, meeting them in their places of life, whether they are places of expression of discomfort, deviance or marginality.

In Italy, a strong but recent stimulus to street work has been given by some points of break with the past, which have given a new approach to the service-user relationship. In particular:

- the shift of attention from services to the person, the problems he/she expresses and the resources he/she already has to face them;
- the shift from social work that for too long has been concentrated only within institutions and structures to work on the ground;
- the shift from the street, perceived only as a dangerous, risky place, to the street as a privileged meeting and aggregation space for many adolescents and young people considered 'normal', who spend much of their free time in non-institutional settings, such as squares, gardens, bars, etc...

These shifts away from traditional operational practices have been significantly contributed to by people and groups from the world of voluntary work, whose activities have introduced a new sensitivity and attention to social work, giving rise to the need for different methods of intervention, closer to people and their needs.

Moreover, thanks to the commitment of some **Schools for Educators** (e.g. those of Turin and Milan), street work has become an opportunity for educators in training to work outside normal structures (such as residential communities, family homes, educational centres...). These apprenticeship experiences gave rise to the first attempts at "territorial education", i.e. support actions by professional educators for minors referred by the public social service, with the aim of helping them overcome difficult situations without necessarily having to break away from their families and the environment in which they live.

A further impetus for street work was given by the approval of the 2011 ***Municipal resolution of the City of Turin***, an institutional recognition that particularly concerns the educational approach to adolescents. The document, based on fifteen years of work and experience, outlines the objectives and operational methodologies to be adopted in educational and welfare interventions aimed at minors, in areas outside the structures. The importance of the resolution is linked to the fact that it is the first national measure to legitimise, at an administrative level, work with minors on the territory, including interventions with informal groups of adolescents.

For several years there have been many conferences and seminars on street work, all of which have undoubtedly contributed to building a culture of street work. They represent an important attempt to produce culture from the daily practices of street workers and this is why they are briefly presented. As far as documents produced are concerned, the following should be mentioned:

- The **Carta di Certaldo**, written in 1994 at the end of a meeting promoted by the municipality of Certaldo between Italian street workers representing about twenty associations and cooperatives. The document immediately became a guide for public administrations and private bodies interested in this working model, as it took into consideration aspects such as the basic assumptions, the methodological dimension, the essential contents of street work, the professionalism of the operator;
- The **Carta di Candia**, written in 1997 at the end of a North-South exchange seminar (lasting a year in total), promoted by the Associazione Mais of Turin, in which more than forty Italian and foreign operators (from Africa, Asia, Central and South America) participated. Compared to the first document, this one has a more cultural slant that highlights the elements of closeness and diversity between the experiences of the street in the various countries with regard to aspects such as: the purpose, the meaning of the street, the knowledge expressed, the educational relationship and networking, the protagonism of street children and young people, the male and female dimension in street work, the relationship with the institutions and the issue of conflict, the training of operators and the evaluation of interventions;
- The **Carta di Bologna**, written in 1999 at the end of a conference promoted by the Municipality of Bologna in relation to the drug addiction project in Emilia-Romagna. In the conference, in particular, the participants explored three themes: the relationship between street work and new needs to be addressed, public-private partnerships and the evaluation of effectiveness in street work.

Street work/street education and outreach are also mentioned in the **National Plan for Interventions and Social Services 2021- 2023**, which identifies the priorities linked to the National Social Policy Fund and its programming, distinguishing between broader system actions and interventions aimed at younger people. Similarly, the Plan for social interventions and services to combat poverty also identifies the main interventions to combat poverty to be carried out on the territory, and in the relevant technical sheets it sets out their objectives and characteristics. In addition, the approved Plan is characterized by the fact that it is the result of extensive and shared work with the social partners and the Third Sector bodies responsible for the matters included in the Plan.

According to this, in Italy, street work can be divided into three general macro-areas: (1) harm reduction interventions; (2) street and/or community education interventions; and, (3) street and community animation interventions.

- DAMAGE REDUCTION is aimed at people in a serious state of marginalisation who have no relationship with the social and health services (drug addicts, homeless people, prostitutes, violent gangs, delinquent groups, etc.). The aim is to respond immediately to health, food and housing needs; to prevent and/or reduce pathologies related to living conditions on the street.
- STREET EDUCATION is aimed at individual minors or minors in informal groups, who do not participate in institutional areas of aggregation and training, individuals at risk of maladjustment and deviance, individuals in situations of severe marginalisation.
- TERRITORIAL EDUCATION has as its users: subjects at risk, especially minors, reported by the Social Service and/or the Juvenile Court; the families of the subjects concerned, agencies, services, social groups in the territory.

- STREET ANIMATION is aimed at the general population, minors on their own or in informal groups, people at risk of maladjustment and deviance, people in situations of severe marginalisation.
- TERRITORIAL OR COMMUNITY ANIMATION. This model has as its users: the general population, privileged witnesses, institutions, agencies, services, associations and social groups in the area.

Some training modules that already exist in Italy are:

1. The **Università della Strada** (*or Street University*) promoted by the national ONG Gruppo Abele, is the first organisation in Italy dedicated to social training and is a reference point for social workers (psychologists, educators, social workers, mediators, etc.), youth workers, teachers and volunteers. It provides consultancy and training both for external (public and private) bodies and for the association's teams. It promotes courses and conferences on topics related to social work. It also provides tailor-made training and supervision for multidisciplinary work groups, such as social, health and educational teams. Themes (classic for students' growth and teachers' work) are brought up to date: use of technology, prevention of substance use, relationships and conflict management, gender issues and stereotypes, educational poverty, interculturalism and citizenship). Substances and addictions, social vulnerability, immigration, organisational well-being, leadership, group management, burnout, conflict and aggression, street work, are some of the topics dealt with by the Università della Strada with the aim of providing social workers with adequate tools to meet the needs of the people they meet.
2. University of Bologna: **Advanced training course in Design, development and evaluation of street work**. The course developed jointly by the University of Bologna and the Università della Strada - Gruppo Abele aims to develop knowledge, skills and operational strategies essential for street work, as a practice of proximity and harm reduction. The course - which can be followed in person or remotely - includes more than 60 hours of training, with modules designed to develop the participants' skills starting from the dialogue between the theoretical approach and the direct experiences of trainers working in different street services. They will discuss the promotion of well-being and social inclusion, youth policies and community empowerment, harm reduction and risk limitation strategies in addictions, design and evaluation of the effectiveness of services, management of conflict dynamics in contexts of exclusion and marginality, and more.
3. **Training Course for street workers**: organised by Coop21 cooperativa sociale. The course consists of 45 hours, 30 of which are classroom hours and 15 of internship to be carried out alongside the teams already operating on the territory. The aim of the course is the training and selection of Street Workers to be employed in the service managed by Coop21 for more than twenty years in the south-east Florentine area. The Street Worker is a figure who works in contact with young people, meeting them directly in the meeting places, carrying out activities aimed at creating paths and activities to promote youth welfare, as an antidote to the discomfort that is often associated with this age group, working in a network with the subjects of the territory engaged in social and educational activities and promoting more generally the empowerment of the local community. It is a dynamic, stimulating job, where you can use your skills and acquire new ones.
4. **Regione Campania "Corso Operatore Sociale di Strada"** (Standard Professionale approvato con D.D. n.49 del 18/03/2016 - pubblicato sul BURC n.23 del 11/04/2016); The course has a duration of 600 hours divided between lectures, workshops and internships; topics deal with: activating the territorial network for the implementation of social prevention activities; carrying out an analysis of the risks of youth desocialisation; implementing socio-educational interventions for the prevention of youth discomfort; digital competences; to communicate in a foreign language.

2.4.5. Outreach Work in Spain

The history of outreach work in Spain involves a progression from early developments to a more formalized profession, with a focus on addressing the diverse and evolving needs of the population. Social workers and social educators have played key roles in outreach, engaging with vulnerable populations and adapting their approaches to meet the changing social landscape.

The roots of social work in Spain can be traced back to the early 20th century, with a focus on addressing social issues arising from industrialization and urbanization. However, the formalization of social work as a profession, and later the formalization of social education as a profession, gained momentum in subsequent decades.

The end of Francisco Franco's dictatorship marked a turning point for Spain. With the restoration of democracy, there was a renewed emphasis on social justice, welfare, and the recognition of social work as a profession. Since then, Spain underwent a period of social and economic transformation in the 1980s. This era saw an expansion of social services, and social work, including outreach work, played a crucial role in addressing the evolving needs of the population. By the 1990s, Spanish services were seeing a dramatic increase in culturally different migrants with whom standard procedures did not work (Agustín, 2007). These included patients with non-western ideas of hygiene, accustomed to herbal remedies or to self-injecting cures bought in pharmacies, who didn't want to deal with doctors, who had been taught different theories of AIDS and sexually transmitted illnesses and who spoke unfamiliar languages (Cuadros Riobó, 1997).

Over the years, outreach work became an integral part of social work practice in Spain. Social workers and social educators engaged in proactive outreach strategies to connect with vulnerable populations, ensuring their access to essential services and support.

Outreach efforts in Spain often targeted vulnerable populations, including immigrants, refugees, individuals facing economic hardships, and those with specific social and educational needs. A review of Spanish research demonstrates that the social characteristics thought to matter in hegemonic projects are: nationality, gender, age, level of education, drug use, reproductive status, housing, and work and incarceration histories (Belza, 2000). Both social workers and social educators played roles in developing and implementing programs tailored to the unique challenges faced by these communities.

Changes in legislation and social policies influenced the landscape of social work and outreach in Spain. Policies aimed at promoting social inclusion, combating poverty, and addressing educational inequalities have shaped the direction of outreach initiatives.

Both social workers and social educators have been involved in collaborative efforts. Interdisciplinary approaches have been employed to address complex social issues, combining the expertise of professionals from various fields to provide comprehensive support.

In recent years, Spain has faced modern challenges such as economic crises, the impact of the COVID-19 pandemic, and evolving demographics. Outreach work has adapted to address these contemporary issues, emphasizing the importance of adaptability and innovation in social work and social education practice.

For the most recent developments, it's advisable to consult updated sources or recent publications.

3. References

- Agustin, L. M. (2007). Questioning Solidarity: Outreach with Migrants Who Sell Sex. *Sexualities*, 10(4), 519–534. <http://dx.doi.org/10.1177/1363460707080992>
- Aguilar, M., Llobet, M., & Pérez, B. (2012). Los servicios sociales frente a la exclusión. *Zerbitzuan*, 51, 9-26.
- Arza, J., & Carron, J. (2014). Las estrategias de proximidad y centradas en la persona como alternativa a la fragmentación en la atención. *Documentos de Trabajo Social*, 54, 7-25.
- Andersson, B. (2013). Finding ways to the hard to reach-considerations on the content and concept of outreach work. *European Journal of Social Work*, 16(2), 171–186. <http://dx.doi.org/10.1080/13691457.2011.618118>
- Barrett, H. (2008). *Hard-to-reach families: Engagement in the voluntary and community sector*. Family and Parenting Institute.
- Belza, M. J. (2000). Características sociales y conductas de riesgo para el VIH en un grupo de travestis y transexuales masculinos que ejercen la prostitución en la calle. *Gaceta Sanitaria*, 14(5), 330–7. [https://doi.org/10.1016/S0213-9111\(00\)71490-7](https://doi.org/10.1016/S0213-9111(00)71490-7)
- Benoit, C., Jansson, M., Millar, A., & Phillips, R. (2005). Community academic research on hard-to-reach populations: Benefits and challenges. *Qualitative Health Research*, 15, 263–82.
- Boag-Munroe, G., & Evangelou, M. (2012). From hard to reach to how to reach: A systematic review of the literature on hard-to-reach families. *Research Papers in Education*, 27(2), 209–239. <http://dx.doi.org/10.1080/02671522.2010.509515>
- Bovarnick, S., McNeish, D., & Pearce, J. (2016). *Outreach work: Child sexual exploitation. A rapid evidence assessment*. University of Bedfordshire. <https://www.dmss.co.uk/pdfs/outreach-work-cse-rea.pdf>
- Brackertz, N. (2007). *Who is hard-to-reach and why?* ISR Working Paper. <http://hdl.handle.net/1959.3/23213>
- Callén, P. (2017). Las estrategias de proximidad y centradas en la persona como alternativa a la fragmentación en la atención. *Revista de Educación Social*, 24.
- Čačinovič Vogrinčič, G. (2005). Teaching concepts of help in social work: the working relationship. *European Journal of Social Work*, 8(3), 335-341. <https://doi.org/10.1080/13691450500210707>
- Castel, R. (2008). La citoyenneté sociale menacée. *Cités, Presses Universitaires de France*, 3(35), 133-141.
- Cefai, D., & Gardella, E. (2011). L'urgence sociale en action. *Ethnographie du samusocial de Paris. La découverte*.
- Chambon, N. (2018). Edito. 'Aller vers'...d'autres pratiques? *Rhizome*, 68, 1–3. http://www.ch-le-vinatier.fr/documents/Publications/RHIZOME_Orspere-Samdarra/RHIZOME-68.pdf
- Clarke, J. (2004). Access for all? The promise and problems of universalism. *Social Work and Society*, 2(2), 216–224.
- Commonwealth of Australia. (2011). National Framework for Universal Child and Family Health Services. Retrieved from [https://www.health.gov.au/internet/main/publishing.nsf/Content/AFF3C1C460BA5300CA257BF0001A8D86/\\$File/NFUCFHS.PDF](https://www.health.gov.au/internet/main/publishing.nsf/Content/AFF3C1C460BA5300CA257BF0001A8D86/$File/NFUCFHS.PDF)

- Corr, C. (2003). *Engaging the hard-to-reach: an evaluation of an outreach service*. Merchants Quay Ireland. <https://www.drugsandalcohol.ie/4331/>
- Cortis, N. (2012). Overlooked and under-served? Promoting service use and engagement among 'hard-to-reach' populations. *International Journal of Social Welfare*, 21, 351-360.
- Craig, P., Dieppe, P., Macintyre, S., Michie, S., Nazareth, I., Petticrew, M. (2008). *Developing and evaluating complex interventions: new guidance*. Medical Research Council.
- Crimmens, D., Factor, F., Jeffs, T., Pitts, J., Pugh, C., Spence, J. & Turner, P. (2004). Reaching socially excluded young people: a national study of street-based youth work. The National Youth Agency.
- Cuadros Riobó, A. (1997). Salud e inmigraciones: La experiencia del programa de atención sociosanitaria a inmigrantes de Médicos del Mundo de Madrid. *Migraciones. Publicación Del Instituto Universitario De Estudios Sobre Migraciones*, 2, 237-248. <https://revistas.comillas.edu/index.php/revistamigraciones/article/view/4892>
- Delors, J., et al. (1996). *Learning: The treasure within: Report to UNESCO of the international commission on education for the twenty-first century*. UNESCO Publication.
- DeVerteuil, G., Power, A., & Trudeau, D. (2020). The relational geographies of the voluntary sector: Disentangling the ballast of strangers. *Progress in Human Geography*, 44(5), 919-937. <https://doi.org/10.1177/0309132519869461>
- Dickey, B. (2000). Review of programs for persons who are homeless and mentally ill. *Harvard Review of Psychiatry*, 8, 242-250.
- Doherty, P., Hall, M., & Kinder, K. (2003). *On track thematic report: Assessment, referral and hard-to-reach groups. Research Report 475*. Department for Education and Skills. <https://core.ac.uk/display/40675515?msclid=0c3cc8c0a5ce11ec84397ea194b4abb0>
- Domínguez, J. (2021). El paradigma constructorista y su aplicación en el Trabajo Social Comunitario. *Itinerarios de Trabajo Social*, 1, 31-35. <https://doi.org/10.1344/its.v0i1.32477>
- Duvoux, N. (2011). Nouveaux pauvres, nouvelles politiques. *Revue des Politiques Sociales et Familiales*, 104, 7-17. <https://doi.org/10.3406/caf.2011.2592>
- Dwyer, P., Bowpitt, G., Sundin, E. & Weinstein, M. (2014). Rights, responsibilities and refusals: Homelessness policy and the exclusion of single homeless people with complex needs. *Critical Social Policy*, 35(1), 3-23.
- Elissen, A., Van Raak, A., Derckx, E. & Vrijhoef, H. (2013). Improving homeless persons' utilization of primary care: lessons to be learned from an outreach program in The Netherlands. *International Journal of Social Welfare*, 22(1), 80-89.
- European Commission. (2000). *Commission staff working paper. A memorandum on lifelong learning (SEC (2000) 1832)*. https://arhiv.acs.si/dokumenti/Memorandum_on_Lifelong_Learning.pdf
- European Commission. (2006). *Communication from the commission. Adult learning: It is never too late to learn (COM (2006) 614 final)*. <https://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=COM:2006:0614:FIN:EN:PDF>
- European Commission. (2007). *Communication from the commission. Action plan on adult learning: It is always a good time to learn (COM (2007) 558 final)*. <https://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=COM:2007:0558:FIN:EN:PDF>
- European Commission (2019). Towards a sustainable Europe by 2030: reflection paper. Publications Office, <https://data.europa.eu/doi/10.2775/647859>

- European Monitoring Centre for Drugs and Drug Addiction (EMCDDA). (2001). *Guidelines for the evaluation of outreach work: a manual for practitioners*. https://www.emcdda.europa.eu/publications/manuals/outreach_en
- Field, J. (2006). *Lifelong learning and the new educational order*. Trentham Books.
- Firmin, C. (2015). *Peer-on-peer abuse: Safeguarding implications of contextualising abuse between young people within social fields*. University of Bedfordshire.
- Fomiatti, R., Farrugia, A., Fraser, S., & Hocking, S. (2021). Improving the effectiveness and inclusiveness of alcohol and other drug outreach models for young people: A literature review. *Drugs: Education, Prevention and Policy*. <http://dx.doi.org/10.1080/09687637.2021.1975652>
- Furlan, M. (2009). Assertive outreach in slovenia; identification of target group and goals of treatment in a new program. *Psychiatria Danubina*, 21(SUPPL. 1), 29-30.
- Gajić, M. (2017). *Izzivi mladinskega uličnega dela v Sloveniji* (Master thesis). Pedagoška fakulteta of the University of Ljubljana.
- García, G., Barriga, L., Ramírez, J. M., Zubiría, A. & Velasco, L. (2016). *Valoración del desarrollo de los servicios sociales por comunidades autónomas 2015*. Asociación Estatal de Directores y Gerentes de Servicios Sociales.
- Gardella, E. (2017). Sociologie de la réflexivité dans la relation d'assistance. Le cas de l'urgence sociale. *Sociologie du travail*, 59(3). <http://dx.doi.org/10.4000/sdt.853>
- Gasbarrini, N., Dubravić, D., Combs, L., Dišković, A., Ankersztejn-Bartczak, M., Colaiaco, F., Wawer, I., Wysocki, P., Rosińska, M., Marzec-Boguslawska, A., Collins, B., Simões, D., Jakobsen, M. L., Raben, D. (2021). Increasing integrated testing in community settings through interventions for change, including the spring european testing week. *BMC Infectious Diseases*, 21 <http://dx.doi.org/10.1186/s12879-021-06555-0>
- Gimeno-Monterde, Ch. y Álamo-Candelaria, J.M. (2018). Trabajo Social Comunitario: hacia unas políticas públicas sostenibles. *Trabajo Social Global – Global Social Work*, 8(14), 167-194. <http://dx.doi.org/10.30827/tsg-gsw.v8i14.6457>
- Gondim-Oliveira, R. (2018). Práticas de saúde em contextos de vulnerabilização e negligência de doenças, sujeitos e territórios: potencialidades e contradições na atenção à saúde de pessoas em situação de rua. *Saude e Sociedade*, 27(1), 37-50. <https://doi.org/10.1590/s0104-12902018170915>
- Gosselin, A., Coulibaly, K., Ravalihasy, A., Carillon, S., Ridde, V., Derche, N., Mbiribindi, R., & Desgreés Du Loû, A. (2020). Finding the missing link: When community-based outreach in public space is key to engage migrants in health prevention programmes in paris, france. *Journal of Epidemiology and Community Health*, 74(8), 668-675. <http://dx.doi.org/10.1136/jech-2019-213394>
- Grymonprez, H. A. N. S., Hermans, K., & Roose, R. (2020). The discursive construction of accessibility and its implications for outreach work. *Journal of Social Policy*, 49(3), 643-660. <http://dx.doi.org/10.1017/S0047279419000801>
- Grymonprez, H., Roose, R. and Roets, G. (2017). Outreach social work: From managing access to practices of accessibility. *European Journal of Social Work*, 20(4), 461-471.
- Hake B. J. (2014). 'Bringing Learning Closer to Home': Understanding 'Outreach Work' as a Mobilisation Strategy to Increase Participation in Adult Learning. In: Zarifis G., Gravani M. (eds.), *Challenging the 'European Area of Lifelong Learning'* (pp.251-264). Lifelong Learning Book Series, vol 19. Springer. https://doi-org.are.uab.cat/10.1007/978-94-007-7299-1_22

- Henningsen, E. (2010). The romantic ethic in outreach work. *Sociétés et jeunesses en difficulté. Special number*. <http://journals.openedition.org/sejed/6615>
- Istance, D., Schuetze, H. G., & Schuller, T. (Eds.). (2002). International perspectives on lifelong learning. From recurrent education to the knowledge society. The Society for Research into Higher Education/Open University Press.
- Jean, R., Tuquerres, P., & Salamanca, L. (2020). Acercar la periferia al centro desde el trabajo de calle con jóvenes en situación de riesgo y/o de exclusion. *Revista de Educación Social*, 30.
- Jeffs, T. & Smith, M. K. (2002). Individualization and youth work. *Youth and Policy*, 76, 39-65.
- Jelenc-Krašovec, S. (2003). *Andragoško svetovalno delo*. Filozofska fakulteta Univerze v Ljubljani.
- Jose, K.; Taylor, C. L.; Venn, A.; Jones, R.; Preen, D.; Wyndow, P.; Stubbs, M.; Hansen, E. (2020). How outreach facilitates family engagement with universal early childhood health and education services in Tasmania, Australia: An ethnographic study. *Early Childhood Research Quarterly*, 53, 391-402. <http://dx.doi.org/10.1016/j.ecresq.2020.05.006>
- Kaufman, S. (2001). Detached Youth Work. In, F. Factor, V. Chauhan & J. Pitts (Eds.), *The Russell House Companion to Working with Young People*. Russell House Publishing.
- Kirkpatrick, K. (2000). Provider-client models of individual outreach and collective behavioural change: the delivery of sexual health promotion among sex workers. *Health Education Journal*, 59, 39-49.
- Korf, D.J., Riper, H., Freeman, M., Lewis, R., Grant, I., Jacob, E., Mougín, C. & Nilson, M. (1999). *Outreach Work among Drug Users in Europe: Concepts, Practice and Terminology*. European Monitoring Centre for Drug and Drug Addiction.
- Kostnapfel, T. (2001). The Republic of Slovenia. National Report for the Informational Unit for Drugs. https://www.nijz.si/sites/www.nijz.si/files/publikacije-datoteke/nacionalno_porocilo_o_stanju_drog_2001.pdf
- Le Goff J.-L. (2014). La réflexivité dans les dispositifs d'accompagnement: implication, engagement ou injonction?. ¿ Interrogations ?, 19. <https://www.revue-interrogations.org/La-reflexivite-dans-les#:~:text=Dans%20le%20dispositif%20VAE%2C%20la,qui%20ouvrirait%20sur%20une%20%E2%80%9Cbienveillance>
- Llovet, M., Baillergeau, E., & Thiroit, M. (2011). Los “peer workers” como actores que activan la participación con personas y colectivos en situación de exclusión social. In, *Actas del III Congreso Anual de la REPS. Universidad de Navarra*. http://www.unavarra.es/digitalAssets/159/159638_7_p-Llobet_Peer-workers-como-actores.pdf
- Lhussier, M., Carr, S. M., & Forster, N. (2015). A realist synthesis of the evidence on outreach programmes for health improvement of Traveller Communities. *Journal of Public Health*, 38(2), e125-e132. <http://dx.doi.org/10.1093/pubmed/fdv093>
- Mackenzie, M., Turner, F., Platt, S., Reid, M., Wang, Y., Clark, J., & O'Donnell, C. A. (2011). What is the ‘problem’ that outreach work seeks to address and how might it be tackled? Seeking theory in a primary health prevention programme. *BMC Health Services Research*, 11(1), 350. <http://dx.doi.org/10.1186/1472-6963-11-350>
- Marmot, M. (2010). *Fair Society, Health Lives: The Marmot Review. Strategic review of health inequalities in England post-2010*. University College London.

- Mercuel, A. (2018). 'Aller vers...' en psychiatrie et précarité: L'opposé du 'voir venir...'! *Rhizome*, 68, 3-4. http://www.ch-le-vinatier.fr/documents/Publications/RHIZOME_Orspere-Samdarra/RHIZOME-68.pdf
- Milošević Arnold, V. & Urh, Š. (2009). *Terensko delo: institucionalni, javni in zasebni prostori socialnega dela*. Univerza v Ljubljani.
- Mikkonen, M., Kauppinen, J., Houvinen, M. & Aalto, E. (eds) (2007). *Outreach Work among Marginalised Populations in Europe*. <https://www.drugsandalcohol.ie/11925/>
- OECD. (1996). *Lifelong learning for all*. OECD Publishing.
- Olivet, J., Bassuk, E., Elstad, E., Kenney, R. & Jassil, L. (2010). Outreach and engagement in homeless services: A review of the literature. *Open Health Services and Policy Journal*, 3, 103-121.
- Park, S., & Park, J. (2021). Identifying the knowledge structure and trends of outreach in public health care: A text network analysis and topic modeling. *International Journal of Environmental Research and Public Health*, 18(17). <https://doi.org/10.3390/ijerph18179309>
- Payne, M. (2005). *Modern Social Work Theory*. Palgrave Macmillan.
- Pitts, J., Pugh, C. and Turner, P. (2002). Community safety and detached and outreach youth work. *Safer Communities*, 1(2), 9-18. <https://doi.org/10.1108/17578043200200013>
- Pian, A., & Hoyez, A.-C. (2022). Balancing local justice and spatial justice: Mobile outreach and refused asylum seekers. *Population, Space and Place*, 28(1). <https://doi.org/10.1002/psp.2500>
- Priebe, S., Matanov, A., Schor, R., Straßmayr, C., Barros, H., Barry, M. M., Díaz-Olalla, J. M., Gabor, E., Greacen, T., Holcnerová, P., Kluge, U., Lorant, V., Moskalewicz, J., Schene, A. H., MacAssa, G., & Gaddini, A. (2012). Good practice in mental health care for socially marginalised groups in europe: A qualitative study of expert views in 14 countries. *BMC Public Health*, 12(1) <https://doi.org/10.1186/1471-2458-12-248>
- Rhodes, T. (1996). *Outreach Work with Drug Users: Principles and Practice*. Council of Europe.
- Rhodes, T. (1997). *Models of Outreach among Injecting Drug Users*. Executive Summary, No. 56. The Centre for Research on Drugs and Health Behaviour.
- Roy, M., Lavoie-Trudeau, É., Roy, M. A., Clapperton, I., Couturier, Y., Lane, J., Bibeau, L., Ouellette, M., Benkhalti, M., & Camden, C. (2020). Barriers and facilitators to implementing community outreach work, and inter-professional collaboration with regional partners. *Journal of Community Health*, 45(5), 979-986. <https://doi.org/10.1007/s10900-020-00816-w>
- Rowe, M., Styron, T., & David, D. H. (2016). Mental health outreach to persons who are homeless: Implications for practice from a statewide study. *Community Mental Health Journal*, 52(1), 56-65. <https://doi.org/10.1007/s10597-015-9963-4>
- Santos-Olmo, A. B., Ausín, B., & Muñoz, M. (2022). People over 65 years old in social isolation: Description of an effective community intervention in the city of madrid (spain). *International Journal of Environmental Research and Public Health*, 19(5). <http://dx.doi.org/10.3390/ijerph19052665>
- Slee, P. (2006). *Families at risk: The effects of chronic and multiple disadvantage*. <http://ehlt.flinders.edu.au/education/FamilyNeeds/families%20at%20risk%20online.pdf>
- Stacey, L. (2009). *Whose children now? Fifteen years of working to prevent the sexual exploitation of children in the UK*. Barnardos.
- Statham, J. (2004). Effective services to support children in special circumstances. *Child: Care, Health and Development*, 30(6), 589-98.

- Štulhofer, A., Landripet, I., Božić, J., & Božičević, I. (2015). HIV risks and HIV prevention among female sex workers in two largest urban settings in Croatia, 2008-2014. *AIDS Care - Psychological and Socio-Medical Aspects of AIDS/HIV*, 27(6), 767-771. <http://dx.doi.org/10.1080/09540121.2014.996519>
- Svenson, N. P. (2003). *Outreach Work with Young People, Young Drug Users and Young People at Risk*. Pampidou Group, Council of Europe.
- Szeintuch, S. (2015). Street work and outreach: A social work method? *British Journal of Social Work*, 45(6), 1923-1934. <http://dx.doi.org/10.1093/bjsw/bcu103>
- Tommasello, A., Myers, P., Gillis, L., Treherne, L. and Plumhoff, M. (1999). Effectiveness of outreach to homeless substance abusers. *Evaluation and Program Planning*, 22(3), 295 - 303. [http://dx.doi.org/10.1016/s0149-7189\(99\)00019-1](http://dx.doi.org/10.1016/s0149-7189(99)00019-1)
- Vega, C. (2019). La educación de calle a través de la educación social: la importancia de reivindicar el desarrollo comunitario. In, El Homrani, M., Báez, D. E. & Ávalos, I., *Inclusión y diversidad: Intervenciones socioeducativas*. Wolters Kluwer PRAXIS.
- Vodeb, N. A., & Spruk, T. (2020). Theoretical basis of street-based youth work. MOviT. European Commission. http://www.alfa-albona.hr/wp-content/uploads/2020/10/IO1_web.pdf
- Wakerman, J., Humphreys, J. S., Wells, R., Kuipers, P., Entwistle, P., & Jones, J. (2008). Primary health care delivery models in rural and remote Australia – A systematic review. *BMC Health Services Research*, 8(1), 276. <http://dx.doi.org/10.1186/1472-6963-8-276>
- Whiteford, M. (2010). Hot Tea, Dry Toast and the Responsibilisation of Homeless People. *Social Policy and Society*, 9(2), 193–205.

4. Additional bibliography

- Bogataj, N. (ur). (2005). Študijski krožki: od zamisli do sadov v prvem desetletju. Andragoški center Slovenije.
- Flaker, V. (2003). Oris metod socialnega dela: Uvod v katalog nalog centrov za socialno delo. Fakulteta za socialno delo Univerze v Ljubljani in Skupnost centrov za socialno delo Slovenije.
- Freire, P. (2019). Pedagogika zatiranih. Krtina.
- Mijoč, N., Krajnc, A., & Findeisen, D. (1993). Študijski krožki. Andragoški center Slovenije.
- Wenger, E. (1998). *Communities of Practice: Learning, Meaning, and Identity*. Cambridge University Press.
- Žalec, N., Klemenčič, S., Možina, T., Vilič Klenovšek, T., Velikonja, M., Jelenc, E.N., ..., & Dobrovoljc, A. (2004). Osebni izobraževalni načrt. Andragoški center Slovenije.

Annex 1. Dictionary: Domains of intervention addressed in YouthReach

a) Croatia

Risk behaviours: behaviours which represent developmental risk for youth who behave risky, but can also represent a risk for their family members. These behaviours are dangerous for youth and their families (health, physical and psychical integrity). The consequences of this behaviour are of small intensity at the moment but represent a base for bad results in future. Therefore, this behaviour requires reaction from family, professionals from specific areas. Examples of risky behaviours: running from school, no learning, breaking rules in school and home, experimenting with cigarettes, drugs, periodically alcohol drinking, opposing authority, some forms of promiscuous behaviour, not allowed late going out...

Problem in behaviour: behaviours which represent direct or indirect threatening, harmful, dangerous situations for the child/youth and the surrounding and point out clear indicators for future unfavourable child development in case of not intervening, because of the necessity for additional professional help.

- External problem in behaviour – behaviour forwarded to the external surrounding (peer violence, aggressive behaviour, stilling...). Children and youth make problems for others in their surroundings. Research shows that this happens if parents do not control enough child behaviour.
- Internalizing problem in behaviour – behaviour forwarded to self (anxiety, depression, social withdrawal). Research shows that this happens if parents control children too much.

Difficulties in behaviour: children and youth break social and law norms in different surroundings through some period of time or suddenly. The consequences of these behaviours seek professional intervention, although the level of dangerousness now doesn't need to be of high intensity but can represent a serious threat for future development. Examples of these behaviours: stilling, running, strolling, leaving school, driving without permission, violence, high discipline offenses in school....

Difficulties in learning and developing adequate relations in school as well as unacceptable forms of behaviour can be caused by specific personality of the child, as well as educational, social, economic, cultural, and linguistic factors, but without detected intellectual, sensor or other health difficulties as a basis of the problem.

Family risk: not enough parental control, not efficient educational procedures, abuse, high level of conflict between parents, poverty, criminal behaviour of parents, problems with psychical health, unemployment, alcohol, and drug abuse.

Annex 2. Handbooks and guidance on outreach

- Barnardo's (2014). Guidance on Child Sexual Exploitation. A Practitioners' Resource Pack. <http://www.cnesiar.gov.uk/childprotectioncommittee/documents/guidance%20on%20child%20sexual%20exploitation.pdf>
- CWVY (2014). Detached and Outreach Youth Work Method and Resource Handbook for Youth Work Practitioners in Wales. <http://www.cwvys.org.uk/wp-content/uploads/2014/06/HB-Detached-andOutreach-Youth-Work.pdf>
- International HIV/AIDS Alliance (2013). A Toolkit for Outreach Services. http://www.aidsalliance.org/assets/000/000/380/90629-Reaching-drug-users-A-toolkit-foroutreach-services_original.pdf?1405520658
- McGivney, V. (2000). Working with excluded groups: Guidelines on good practice for providers and policymakers in working with groups under-represented in adult learning. NIACE.
- Smeaton, E., Franklin, A., & Raws, P. (2015). Practice Guide: Supporting professionals to meet the needs of young people with learning disabilities who experience, or are at risk of, child sexual exploitation. Barnardos. https://socialwelfare.bl.uk/subject-areas/services-clientgroups/children-mental-health/barnardos/176120cse_ld_practice_guide.pdf
- Rhodes, T. (1996). Outreach Work with Drug Users: Principles and Practice. Council of Europe.

Annex 3. Good practices

- Ministère des Affaires sociales et de la Solidarité, 2016, «Kit Participation citoyenne aux politiques de solidarités» [en ligne]. **France**.
<https://solidarites-sante.gouv.fr/ministere/acteurs/instances-rattachees/haut-conseil-du-travail-social-hcts/rapports-et-publications-du-hcts/guides-et-fiches/article/kit-participation-citoyenne-aux-politiques-de-solidarites>
 - Actions d'«aller-vers» auprès des personnes en situation de grande précarité - Référentiel régional. **France**.
<https://www.iledefrance.ars.sante.fr/actions-d-aller-vers-aupres-des-personnes-en-situation-de-grande-precarite-referentiel-regional>
 - Fédération des acteurs de la solidarité, 2016, «Aller vers les personnes en matière de santé. Guide Accompagnement. **France**.
https://www.captifs.fr/wp-content/uploads/2015/11/GuideAccompagnementSant%C3%A9_Fiche_AllerVers.pdf
 - Deux exemples en Ontario francophone. **Canada**.
<http://www.carrieresensante.info/carrieres/travailleuseuse-de-rue/>
<https://fc.cmaisonneuve.qc.ca/repertoire/intervention-sociale/aec/travail-de-rue-institutions-organismes>
- In Canada, there are a growing number of community organizations grounded in traditional indigenous cultures who incorporate indigenous paradigms and cultural practices into their work. One can be found in Oshki Giizhig <http://oshki-giizhig.org> an indigenous-based organization that does outreach work with young adults affected by Fetal Alcohol Spectrum Disorder. Another example is Ogijiita Pimatiswin Kinamatwin (OPK), an indigenous organization that aims to nurture and support marginalized, at-risk Indigenous young adults and their families.
- Un microprogramme de formation en travail de rue élaboré à l'Université du Québec dans le cadre de «l'Université de la rue». La formation initiée au début des années 2010 a été interrompue. **Canada**.
https://oraprdnt.uqtr.quebec.ca/pls/apex/f?p=PGMA000:10:::NO:RP,10:P10_CD_PGM:0573
 - Un document produit en 2010 à la suite d'une rencontre du réseau international des travailleurs sociaux de rue à Québec sur le thème «Le travail de rue: tout un monde de liens et de savoirs» où certains enjeux de formation ont été abordés. **Canada**.
<http://www.rapjeunesse.com/wp-content/uploads/2013/03/Actes-de-la-Rencontre-internationale-desprofessionnels-en-travail-de-rue-Juin-20091.pdf>
 - The **Makasi project (France)** consists of organizing and evaluating an innovative intervention set up in the street, in places of passage (station, metro exits, etc.) to help people from Sub-Saharan Africa or the Caribbean who are in a precarious situation know and use available social and health resources. The aim is to help them take better care of their health, in particular their sexual health, by facilitating knowledge of their rights and access to care and prevention. Details of its effectiveness can be found in Gosselin, et al. (2020). <https://www.projet-makasi.fr/Qu-est-ce-que-le-projet-Makasi>
 - **Homeless programme** of the Médecins du Monde (Mdm, **France**) which has been operating since 2003 in the Strasbourg area as part of its Mobile Mission for Local Healthcare. It is

considered one of the two primary mobile outreach activities of MdM-Strasbourg in 2017. <https://www.medecinsdumonde.org/fr/tags/homelessc>

Médecins du Monde (MdM) is an international solidarity organisation formed under France's non-profit association law of 1 July 1901. Since its creation in 1980, the organisation has concentrated on going towards people in vulnerable and precarious situations. The idea of 'allervers' (mobile outreach) is at the centre of its philosophy, informing the daily actions of the volunteers and employees both abroad and on French soil. With the opening of their first Care and Orientation Centre (CASO) in Paris in 1986, the founders declared that local assistance is just as important in health care as it is for social support. In the years following its creation, other mobile outreach programmes were created at the national level. In particular, these have included the Slums programmes working with 'Roma' populations, the Homeless programmes for people on the streets, the Squats programmes for people living in substandard housing, and educational programmes about health and disease prevention for sex workers or drug addicts. More details can be found in Pian & Hoyez (2020).

- **Database of national practices on European employment policies and measures. EU.** Database of National Labour Market Practices of the Mutual Learning Programme (MLP). This database gathers practices in the field of employment submitted by **European countries** for the purposes of mutual learning. These practices have proven to be successful in the country concerned, according to its national administration. The European Commission does not have a position on the policies or measures mentioned in the database.

Database of national labour market practices - Step-by-Step Guide

Database of national labour market practices - Summary fiche template

<https://ec.europa.eu/social/main.jsp?catId=1080&langId=en>

- **Theoretical basis of street-based youth work.** Erasmus KA2+ project: Magic Wand for Street Work financed by Erasmus+. **Slovenia.** This project is an ongoing collaboration between five organizations from five different countries (Portugal, Slovenia, Czech Republic, Croatia, and Netherlands) with the goal of establishing support elements for quality implementation of street work in different local environments across Europe.

http://www.alfa-albona.hr/wp-content/uploads/2020/10/IO1_web.pdf

Among the activities, the Network Youth Street organises a basic training for street based youth work, aimed at new street-based youth workers. The training consists of a theoretical and a practical part of the training. The theoretical part addresses the following topics: general information about youth work; youth, leisure time and public spaces; definitions of street-based youth work; different approaches (detached, mobile, outreach, peer, professional, thematic, etc.); phases of street-based youth work, competences of street-based youth workers, etc. The practical part addresses the following topics: Code of ethics; standards of youth street work; first contact and greeting exercise; presentation of different practices and concrete activities; interview and clarification of any open questions. After the training, new street-based youth workers are also offered longer-term mentoring support from more experienced street-based youth workers. According to the expressed need of organisations for training for youth street work, we also organise individual training(s) for organisations (about street based youth work, developing implementation plan and further mentoring support in implementation).

Network Young Street also every year organises up to four thematic training(s) linked to the needs of the network's street based youth workers and specific to street work. Topics include training on legislation, concrete activities, standards of street based youth work, youth subcultures, mental health, etc.

For the purpose of training and learning about good practices from abroad, the Network Young Street also organises a study visit abroad every year (so far the Netherlands, Austria, the Czech Republic, Estonia).

Network Young Street also organises the annual Streetstival - Festival of Street- based youth workers, where mainly the professional part offers various educational contents on youth street work or specific addressing working on street work for the professional public.

Initial Training for counsellors in Adult Education: module 2 The Organisation Of Guidance Activities In Adult Education, topic: Characteristics of Outreach in Guidance in Adult Education: The reasons for outreach in guidance; Theoretical basis (V. McGiveny); Definitions of outreach; Conditions for outreach; Planning, implementing and evaluation of outreach.

Basic training for mentors in the PUM-O programme (TUM PUM-O), with particular attention to socio-cultural animation - both of the participants to join the programme and of the environment to engage with PUM-O. There is also annual inservice training for PUM-O mentors organised where actual themes and problems are explored; i.e they are proposed by mentors themselves.

Basic training for Study Circle facilitators - Study Circles are an informal and voluntary form of bringing together a small group of people who want to make a difference in their environment. They are initiated by mentors who receive specific training in a specific programme developed by the ACS.

- In **Croatia**, there are quite a few **projects for NEET as the target population**. The problem with all of them is their limited duration after which the activities stop. There are no established and permanent programs without time duration that will be able to adequately respond to the needs of the population. Below are few examples:
 - “NeetWork- Identification and activation of persons in NEET status” is a project whose goal is to identify and motivate young persons in NEET status for the purpose of active participation and preparation for the labour market. By participating in project activities, participants will be entitled to mentoring and individual counselling. They will also be included in verified education programs. <https://www.sos.hr/novi-projekt-udruga-spiritus-os-neetwork/>
 - “Get active!- Build a career in Croatia” is a project that, with the help of a mobile team of streetworkers, wants to reach up to 15 NEET young people who will have access to the labour market. Individual plans will be made for participants, they will go through a program for strengthening soft skills and they will be able to participate in sports activities with the aim of strengthening self- confidence. They will also be informed about labour market trends and will participate in well-verified education programs. <https://www.obnova.com.hr/eu-projekti/eu-projekti/projekt-aktiviraj-se-izgradi-karijeru-u-hrvatskoj/17-projekt-aktiviraj-se-izgradi-karijeru-u-hrvatskoj>
 - “Young people can do anything- Trust to Work” is a project that aims to pilot an approach to reach and educate NEET people. The project wants to include 45 participants who will develop their competencies through activities and education programs. They will be provided with career counselling, social mentoring, and psycho-social support. Also, three NEET centres will be established for the implementation of the project in order to adequately respond to their specific needs. <https://irtr.hr/HR/About/Work/>
- **Collective Damage Reduction** (Napoli – Campania Region). **Italy**. One of our strategies, for example, to contact and bring marginalised young people back into social circuits, where legality and legal elements that give people citizenship are valid, is to recover degraded urban SPACES. Moving from destroyed Spaces to aggregative Spaces in abandoned urban contexts, often

managed by local authorities only interested in economic speculation, means for us giving back to citizens spaces of autonomy and responsibility (spaces where they take care of a collective good). These activities also allow marginalised young people to emerge and speak out, in a protected place in which they recognise themselves.

- **Project Outreach Pescara. Italy.** It's a project promoted by the Municipality of Pescara in collaboration with the Cooperativa Sociale On the Road, aimed at promoting a reorganisation of proximity territorial services and urban welfare starting from the suburbs. The project aims to improve the quality of life of the local community and of the residents of the Rancitelli neighbourhood by trying to meet the needs of citizens who find themselves in situations of extreme vulnerability, putting them in direct contact with the network of services, through an important work of territorial outreach. The desk is aimed at all Italian and foreign citizens resident, domiciled or assiduously working in the neighbourhood, offering a space for listening and support that is always active and practical support in reaching the various services. The project is part of the EXTRAORDINARY PROGRAMME OF INTERVENTION FOR URBAN REHABILITATION AND SAFETY IN THE PERIPHERAL AREAS OF THE METROPOLITAN CITIES AND THE PROVINCE HEAD TOWN HOMES.
- **Progetto "Come out - Intercettare, orientare ed includere adolescenti difficili nel processo di cura"** (*Lit: Intercepting, guiding and including difficult adolescents in the care process*). **Italy.** As a result of the work carried out in the Piano di Zona of the Parma District and of a positive inter-institutional collaboration, the 'Come out' project aims to raise awareness of the social network as an interceptor of hardship, to support its function of welcoming, listening, guidance and direct help and therefore, as a whole, to develop social forms and presences more attentive to the younger generations in order to improve opportunities, self-help and, if necessary, access to care interventions.
- **Project NOMIS (New Opportunities for Foreign Minors). Italy.** The NOMiS Project (New Opportunities for Foreign Minors) is a project launched and supported by the Social Policies of the Compagnia di San Paolo in the winter of 2006, to experiment new ways of intervening and taking care of foreign minors with judicial problems. The initial objective was to increase the possibilities of an adequate care of foreign minors with deviant lifestyles who had entered the criminal circuit and/or young people, not yet formally entered the criminal circuit, but with compromised biographies. This objective was pursued by implementing new methods of contact and relations with the minors, creating, for each of them, a different and customised project, tailored to their specific needs. Numerous activities have been carried out. Today, NOMiS covers a variety of important aspects in the lives of young people such as: housing, training and work, school guidance and the fight against drop out, psychological support and treatment, family support, community work, street education, leisure time and aggregation.
- **Project "LA FINESTRA SULLA PIAZZA" Municipality of TORINO** (*lit: The window on the square*) **Italy.** The project, which started in September 2003, after a period of team training and "mapping" of the area, provides educational support for the discomfort of immigrant minors and young people in the Porta Palazzo area and surrounding areas. The actions are aimed at young people who, for different reasons, frequent the neighbourhood streets, gardens and informal gathering places. The educational paths proposed are individual and/or group, with particular attention to the educational accompaniment of subjects involved in criminal cases. Promoting access to information, resources and services, in order to get to know and create opportunities to meet minors and young people who otherwise would not approach institutions spontaneously, is the approach that guides the work of street education. The multicultural and multi-professional team contacted about eighty migrant minors in the first year of activity, some of whom were included in the activities proposed by the project, others involved in educational programmes shared with the team, or kept in contact through "light" links.

- The **Psychological Support Service for Socially Isolated Elderly People (PSIE)**. **Spain**. A community intervention based on an outreach strategy to combat situations of social isolation in the elderly population of the city of Madrid (Spain). They concluded that outreach processes are not sufficient as the only element of the intervention but can be very useful if they are combined with engagement and intervention strategies. In addition, the high-quality selection, training and support for intervention facilitators and coordinators is one of the most important factors underpinning successful interventions. On the contrary, two factors are noted that make interventions more likely to be successful. On the one hand, interventions are more effective if the older person is involved in all steps: the planning, implementation and evaluation of the intervention. On the other hand, interventions are more likely to be successful if they use community resources and provide the community with tools and the capacity to help.

The three PSIE action protocols included (Details can be found in <https://www.mdpi.com/1660-4601/19/5/2665/htm>):

- a) Contact and engagement protocol
 - b) Assessment Protocol: clinical (physical health); functional (global functioning and disability); psychological, cognitive and social functioning; and needs assessment were performed.
 - c) Intervention Protocol
- **The Tassie Kids project** > (Jose, et al., 2020) The Tassie Kids project was established in partnership with the Tasmanian Departments of Health and Human Services, Education and Premier and Cabinet to investigate the uptake and reach of ECS and to explore how ECS are engaging with Tasmanian families. The Tasmanian Government has established a comprehensive free universal early childhood health and education service system. These services include the Child Health and Parenting Service (CHaPS), Launching into Learning (LiL), Child and Family Centres (CFCs) and are available to Tasmanian families with children aged 0–5 years of age. Despite services being free policy makers and practitioners from ECS expressed concern about the low uptake of services, particularly among more vulnerable families ([Tasmanian Department of Education, 2018](#)).

Outreach strategies varied according to the needs of families and service capacity and could be categorised as focusing on: (1) engagement, (2) connecting families with services and (3) provision of ongoing support. The specific strategies used included home visits, phone calls, attending services with families, Facebook and other social media, transport and connecting with the community. The strategies, who offered them, their category along with examples are provided in [Table 3](#) and described in more detail below.

Table 4
Impact of outreach activities.

Outreach activity	Experience and outcome	
	Parent and/or child	Service provider
Home visit	[CHaPS nurse] got assigned to these guys (twins)... a nurse was able to – had to come out to my house and thankfully for her, she was able to come out weekly and just give me advice and check on them as well as – sometimes she'd have to go a little bit out of her way to give me that extra help with them... she did the usual things that nurses have to do, like weigh them and check their feeding and make sure that they're ok. But a couple of times, she'd just sit there with me and listen to me. (Mother, twins)	I had another little one... They didn't attend the clinic for this little one's eight-week check and I went and did a home visit after the two missed appointments at 11 weeks and I unwrapped the baby and the baby was physically starving and just had – yeah – in very poor shape but mum had been breast feeding quite successfully up until four weeks. (CHaPS) Most of them I do are the ones that don't have transport and they just can't come. So if I didn't go out and sit down with the children – so the families with kinder age children, I'll go out. We'll do some counting activities and I'll say, "Right. This week we're concentrating on counting to five." (LiL) Just to make the people who are not attending any early years programs, to get them into the centre. I've worked with one family for twelve months in the home, home visits every week, and then finally get them into here, and then to the school. It's a really big process... (CFC)
Phone calls	Well that was really good because it was like they (CHaPS) contacted me and that's really good. If it was left up to me I'd probably procrastinate or not have time to look up, who do I have to get in touch with? ... it was really good that they rang me, text me as well, came out to my house then made the next appointment to be in here so that was good... it made it so much easier. (Mother, one child)	How are we going to engage them? And we'll give them a phone call, another phone call, another phone call, and then we'll start to text them as well when things are on and just hope that the regular contact might – and you know, some we can't engage and that's OK. (CFC)
Attending service with family	If I have a problem with anything... they almost go out of their way to try to solve it, either talk to a teacher or work it around how we feel... They think outside the square and they've got everything sorted... And they sorted it out for [child] about okay what time, they watch him. (Mother, two children)	So next week she'll be taking them to pre-kinder and hopefully that will be enough to get them connected. But it's really challenging and it's not just let's try once and see how it goes, it's being for that family I think we've tried about 10 times. (CFC)
Transport	Transport's always the issue living out here without a car... (Father, one child) Transport, they've (CFC) helped me out with heaps. (Father, five children)	It might be picking them up to take them to [service] for their [session] and then taking them straight home, they might not even come in here, which we do for one family. So it's connecting on their terms at the time that they... need it most. (CFC)
Facebook	I check out the [CFC] Facebook page, and see what's going on down here, we don't always make it down here, but sometimes we do, we try to. (Mother, one child)	I know there's something sitting in our inbox (Facebook)... I need to follow that up. So "hello I've just seen your post regarding First Aid, I would like to register to attend". So now I need to follow that up. (CFC)
Community activities	[At the CFC] we talked about things around the community. I didn't even know anything about the community health. And I found out a lot about that, which is fantastic, I didn't even know existed. Didn't even know there was a [service] up here, an actual – which is good. (Mother, two children)	And a parent in the pre-kinder – she goes to some of the LiL programs, and also comes to pre-kinder, said 'I'm going along to the library in town'. And what a wonderful thing. (LiL)

The project: [https://www.aedc.gov.au/researchers/resources-for-data-users/research-projects/research-project/pathways-to-better-health-and-education-outcomes-for-tasmanian-children-\(tassie-kids\)](https://www.aedc.gov.au/researchers/resources-for-data-users/research-projects/research-project/pathways-to-better-health-and-education-outcomes-for-tasmanian-children-(tassie-kids))

The website: <https://www.telethonkids.org.au/projects/tassiekids/>

Annex 4. Pedagogical toolkits

List of pedagogical toolkits identified by the YYouthReach consortium to equip social actors (social workers, social educators, volunteers, etc.) working with people in situations of social exclusion. These references will be useful to create our own methodological tools for a systemic approach to the outreach and the training module.

In Italy, the Outreaching intervention strategy of the AgriColtura project (against labour exploitation of migrants) foresees the presence of a mobile unit in territories with a high rate of presence of migrants at risk of labour exploitation: San Cipriano, Giugliano, Casal di Principe, Castelvoturno, Villa Literno, Mondragone (towns in the province of Caserta). The street unit is active every day and stops at pre-established locations for about 3 hours every day. At the moment, 6 months after the start of the project, we have about 300 users. On the mobile unit there are three operators: the street operator, the mediator and the legal operator. The mediator is chosen according to the community most present in the area (ghana, bengalese-sik). The organization of the activity is flexible and the team has experience in first reception and contact with migrants of different nationalities. The mediators come from shorter routes but are trained in multidisciplinary teams. The street activities are mainly related to the first contact, reading the needs, and taking charge of the legal part of the migrants. Depending on where we go we have a different approach: previous experiences (negative or positive) with the street unit determine a lesser or greater willingness of the recipients of the intervention (pre-judgment). Our unit is in network with territorial services related to health, training, housing.

Carpentieri, J. D., idr. (January 2018). GOAL Cross-country Report. UCL Institute of Education.

https://adultguidance.eu/images/Reports/GOAL_final_cross-country_evaluation_report.pdf

Dobrovoljc, A., idr. (2017). GOAL National Evaluation Report Slovenija. Ljubljana: Andragoški center Slovenije, Center RS za poklicno izobraževanje in Ministrstvo za izobraževanje, znanost in šport. https://arhiv.acs.si/porocila/Projekt_GOAL-nacionalno_evalvacijsko_porocilo_za_Slovenijo.pdf

Flaker, V., Ficko, K., Grebenc, V., Mali, J., Nagode, M., Rafaelič, A. (2019). Hitra ocena potreb in storitev. Fakulteta za socialno delo.

Grebenc, V., Kvaternik, I., Kodele, T., Rihter, L. (2010). Pogovarjajmo se. Skupnostni pristop v šoli. Fakulteta za socialno delo.

Grebenc, V., Šabić, A. (ur.) (2020). Odprta scena: Zmanjševanje škode med brezdomnimi uporabniki drog v Ljubljani. Fakulteta za socialno delo.

Javno veljavni program Projektno učenje za mlajše odrasle (PUM) in Program Temeljno usposabljanje za mentorje (TUM PUM). Evalvacijska študija.(2010). Razvoj pismenosti ter ugotavljanje in priznavanje neformalnega učenja od 2009 do 2011. Andragoški center Slovenije. https://arhiv.acs.si/dokumenti/Evalvacija_IVP-PUM_TUM_PUM.pdf

Javrh P. (ur.) (2011). Obrazi pismenosti. Spoznanja o razvoju pismenosti odraslih, Andragoški center Slovenije, Ljubljana.

Javrh, P. (2021). Doseganje in osveščanje ranljivih skupin. Strokovne podlage. Andragoški center Slovenije. <https://www.acs.si/digitalna-bralnica/doseganje-in-osvescanje-ranljivih-skupin/>

Kodele, T., Mešl, N. (ur.) (2013). Otrokov glas v procesu učenja in pomoči. Priročnik za vrtce, šole in starše. Zavod RS za šolstvo.

- Kvaternik, I. (2013). Terensko delo – metoda raziskovanja in odzivanja na potrebe ciljne skupine. Učno gradivo. Andragoški center Slovenije. <http://isio.acs.si/doc/N-452-1.pdf>
- McGivney, V. (2002). Spreading the word: Reaching Out to New Learners. NIACE. <https://library.ncirl.ie/items/9737>
- Milošević-Arnold Vida et. A. (2009). Terensko delo: institucionalni, javni in zasebni prostori socialnega dela. FSD.
- Mrgole, A. (2003). Kam z mularijo? Načela kakovosti neformalnega dela z mladimi. Aristej.
- Poštrak M, (2019). Socialno delo z ranljivimi mladostniki v njihovem prostem času v Sloveniji v obdobju 1975 – 1990. *Socialno delo*, 58(3-4), 125 – 144.
- Poštrak M. (2011a). Prispevek socialnega dela pri preprečevanju opuščanja šolanja. V: Javrh P. (ur.). *Obrazi pismenosti. Spoznanja o razvoju pismenosti odraslih (202 – 218)*. Andragoški center Slovenije.
- Poštrak M. (2011b). Refleksija metod dela z mladimi z vidika socialnega dela. V: Kuhar M., Razpotnik Š. (ur.). *Okviri in izzivi mladinskega dela v Sloveniji*. Pedagoška fakulteta, Ljubljana.
- Poštrak Miloslav, Žalec Natalija, Berc Gordana (2020). Socijalna integracija mladih u riziku od ispadanja iz sustava obrazovanja: rezultati slovenskog programa Projektno učenje mladih odraslih. *Revija za socialnu politiku*.
- Projektno učenje za mlajše odrasle (2000), Izobraževalni programi. Izobraževanje odraslih. Ljubljana. Ministrstvo za šolstvo in šport.
- Vilič Klenovšek, T. (2018). Terensko delo v svetovanju odraslim v izobraževanju. Andragoški center Slovenije. https://adultguidance.eu/images/Other_downloads/GOAL_Slovenia_Terensko_delo_brosura_koncna.pdf
- Vrednotenje uspešnosti programa Projektno učenje mlajših odraslih (PUM-O). (2019). Vključevanje mladih, ki niso v delovnem razmerju, v izobraževalnem procesu, v procesu nadaljnega izobraževanja in priprave za vstop na trg dela. https://www.eu-skladi.si/sl/dokumenti/studije-in-vrednotenja/pumo_koncno-porocilo-final-14032019.pdf
- Žalec N. (2016). Sodobne andragoške doktrine dela z ranljivimi skupinami odraslih in njihovo vključevanje v družbo. V: Možina, E. (Ur.) *Osnovna šola za odrasle. Podoba in poslanstvo*. Ljubljana. Andragoški center Slovenije, (184-210). https://pismenost.acs.si/wp-content/uploads/2017/10/Osnovna_sola_za_odrasle_Podoba_in_poslanstvo.pdf
- Žalec N., (2018). Program Projektno učenje mlajših odraslih (PUM-O). Andragoški center Slovenije: <https://arhiv.acs.si/programi/PUM-O.pdf>
- Žalec N., Klemenčič, S., Možina, T., Vilič Klenovšek, T., Velikonja, M., Jelenc, N.E., ... , Dobrovoljc, A. (2004). Osebni izobraževalni načrt. Andragoški center Slovenije.
- Žalec, N. in Krajnc, A. (1994). Vzgojnoizobraževalni program centrov za mlajše odrasle. Andragoški center Slovenije.

Annex 5. Assessment tools

<https://www.childwelfare.gov/topics/systemwide/assessment/family-assess/parentalneeds/strengthsandconnections/>

- Assessment questionnaire for evaluation of parental strength (Lista za procjenu roditeljskih snaga)
- Assessment questionnaire for evaluation of parental risk (Lista za procjenu roditeljskih rizika)
- Risk questionnaire for abusing children (lista rizika za zlostavljanje djeteta)
- Kemps inventory of parental stressors (Kempeov inventar obiteljskih stresora)
- The Scale of sustainability of the household (Skala održavanost domaćinstva)
- The Questionnaire of stress events (Upitnik stresnih događaja)
- The Questionnaire of attachment to the partner (Upitnik privrženosti partneru/partnerici)
- The Questionnaire of strengths and difficulties (Upitnik snaga i poteškoća)
- Questionnaire of expression of child feelings (Izražavanje osjećaja djeteta)
- The Questionnaire for the assessment of attachment (Lista za procjenu privrženosti)
- The Questionnaire of the influence of child on the family (Upitnik utjecaja djeteta na obitelj)
- The Scale of parental stress (Skala roditeljskog stresa)
- The Questionnaire of everyday worries of the parents (Svakodnevne brige roditelja)
- The Assessment of parental capacities and fulfillment of parental tasks (Procjena roditeljskih sposobnosti i izvršavanja roditeljskih zadaća)
- The Scale of welfare of the parents /carers (Skala dobrobiti roditelja/skrbnika)
- The Scale of parental resources (Skala obiteljskih resursa)
- Involvement of the family and the child in the surrounding (Uključenost obitelji i djeteta u zajednicu)
- Common relations with the family (Sadašnji odnosi među članovima obitelji)