

Social Inclusion Strategy 2021–2030



3rd updated edition
Prague, 2023

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1. Introduction and description of the current situation

The Social Inclusion Strategy 2021–2030 (hereinafter the “Strategy”) is a national document covering within the territory of the Czech Republic the main areas important for the social inclusion of socially excluded people and those at risk of social exclusion; the document also covers the areas of combating poverty and social exclusion and sets out priority topics for social inclusion and its financing from national sources and sources of the European Union (hereinafter the “EU”).

The Strategy was created in cooperation between the Ministry of Labour and Social Affairs (hereinafter “MoLSA”) and the Department (Agency) for Social Inclusion of the Ministry for Regional Development (hereinafter the “Agency”), which is responsible for coordinating the conceptual approach to social exclusion on both the regional and national levels. Following the approval of the proposal for integration with the Agency-coordinated Strategy to Combat Social Exclusion,¹ the Strategy has recently been expanded to include topics previously addressed by the Strategy for Combating Social Exclusion. The Agency will also be involved in the preparation of follow-up documents to this Strategy.

On the basis of Government Resolution No 1315 of 14 December 2020 on the schedule of non-legislative work, it was decided to extend the Strategy to include other strategic objectives and topics in the area of homelessness, which were addressed until 2020 in the Concept of Preventing and Tackling Homelessness Issues in the Czech Republic until 2020.

The basic starting points for the creation of the Strategy are the following documents:

- Strategic Framework Czech Republic 2030 (Government Resolution No 292 of 19 April 2017), in particular its specific objectives 3.1, 3.2, 3.4, 4.1, 5.2 and 5.4 and, more generally, implementation of the 2030 Agenda for Sustainable Development in the Czech Republic (Government Resolution No 670 of 17 October 2018), in particular the sustainable development objectives 1, 3, 4 and 10.
- National Concept of Cohesion Policy Implementation in the Czech Republic after 2020 (Government Resolution No 562 of 30 July 2019)

The Strategy takes into account the experience with the implementation of measures contained in the partial thematic strategy documents, in particular:

- Action Plan for Inclusive Education 2019–2020.
- Action Plan for the Prevention of Domestic and Gender-Based Violence for 2019–2023 (Government Resolution No 318 of 6 May 2019).
- Action Plan of the Strategy to Combat Social Exclusion for 2016–2020 (Government Resolution No 1067 of 28 November 2016).
- Action Plan of the Regional Development Strategy of the Czech Republic 2017–2018 (Government Resolution No 32 of 16 January 2017).
- Update of the Employment Policy Strategy until 2020 in the context of ongoing changes in the labour market.

¹ The integration was approved by the Prime Minister of the Czech Republic by letter No 6536/2019-UVCR.

- Updated Concept of Integration of Foreigners – In Mutual Respect and Procedure for Implementation of the Updated Concept of Integration of Foreigners in 2016 and Procedure for Implementation of the Updated Concept of Integration of Foreigners – In Mutual Respect (Government Resolution No 6 of 7 January 2019).
- Long-term Plan for Education and Development of the Educational System of the Czech Republic 2015–2020 (Government Resolution No 277 of 15 April 2015).
- Long-term Plan for Education and Development of the Educational System of the Czech Republic 2019–2023 (Government Resolution No 489 of 08 July 2019).
- Partnership Agreement with the Czech Republic for the 2014–2020 programming period (Government Resolution No 242 of 2014).
- Strategy for Combating Extremism in the Czech Republic for 2016–2020.
- Housing Policy Concept of the Czech Republic until 2020 (Government Resolution No 673 of 27 July 2016).
- Concept of Preventing and Tackling Homelessness Issues in the Czech Republic until 2020 (Government Resolution No 366 of 21 May 2014).
- Family Policy Concept (Government Resolution No 654 of 18 September 2017).
- Probation and Mediation Development Concept Until 2025 (Government Resolution No 733 of 11 October 2017).
- Social Housing Concept of the Czech Republic 2015–2025 (Government Resolution No 153 of 12 March 2014).
- Prison Service Concept until 2025 (by Resolution No 79 of 3 February 2016).
- National Action Plan Supporting Positive Ageing 2013–2017 – strategic document on ageing policy.
- National Plan for the Creation of Equal Opportunities for Persons with Disabilities.
- National Reform Programme of the Czech Republic 2018 (Approved by Resolution of the Government Committee for the European Union on the level of its members No 14 of 30 April 2018).
- National Strategy for the Prevention and Reduction of Damage Associated with Addictive Behaviour 2019–2027 (Government Resolution No 329 of 13 May 2019).
- National Strategy for Primary Prevention of Risk Behaviour of Children and Youth for the Period 2019–2027 and Action Plan for Implementation of the National Strategy for Primary Prevention of Risk Behaviour of Children and Youth for the Period 2019–2021 (Government Resolution No 190 of 18 March 2019).
- National Strategy for the Development of Social Services for 2016–2025 (Government Resolution No 245 of 21 March 2016).
- Plan of measures to enforce the judgment of the European Court of Human Rights in the case of D.H. and others v. Czech Republic “EQUAL OPPORTUNITIES” (Ministry of Education, Youth and Sport of the Czech Republic, 2012).
- Strategy for Combating Social Exclusion for the period 2016–2020 (Government Resolution No 134 of 17 February 2016).
- Employment Policy Strategy until 2020 (Resolution No 835 of 15 October 2014).
- Crime Prevention Strategy in the Czech Republic for 2016 to 2020 (Government Resolution No 66 of 25 January 2016).
- Crime Prevention Strategy in the Czech Republic for 2022-2027 (Government Resolution No. 276 of 6 April 2022).

- Strategy for the Work of the Police of the Czech Republic in relation to National and Ethnic Minorities until 2020 (2019), approved by the Minister of the Interior in January 2019.
- Regional Development Strategy of the Czech Republic 2014–2020 (Government Resolution No 344 of 15 May 2013).
- Roma Integration Strategy until 2020 (Government Resolution No 127 of 23 February 2015).
- Social Inclusion Strategy 2014–2020 (Government Resolution No 24 of 8 January 2014).
- Education Policy Strategy of the Czech Republic until 2020 (Government Resolution No 538 of 9 July 2014).
- Government Strategy for Equality of Women and Men in the Czech Republic for 2014–2020 (by Government Resolution No 931 of 12 November 2014).

The implementation and control of the implementation of the measures of these conceptual and strategic documents are, due to their thematic connection with the Strategy, important for the implementation of the whole Strategy. In the future, Government measures in the field of social inclusion should reflect and be in line with the Strategy, which is its purpose and goal.

In the field of social inclusion, the MoLSA mainly creates conceptual and strategic materials (social housing and social inclusion agendas) and monitors the implementation of these materials; participates in the implementation of programmes/projects in the field of social inclusion and social housing financed from the State budget or EU funds; cooperates in the creation and implementation of other concepts and strategies related to the field of social inclusion in cooperation with other ministries and the Office of the Government; prepares fundamental comprehensive opinions on these concepts and strategies in terms of social inclusion and social housing, including foreign programmes of national or regional importance for the Ministry; prepares factual intentions or supporting documents for legal regulations in the field of social inclusion and social housing; cooperates with non-governmental non-profit organisations, social partners, libraries and academic and professional departments and ensures the coordination and institutional side of this cooperation in the field of social inclusion and social housing.

The permanent advisory and coordinating body of the MoLSA in the field of social policy, with a focus on combating poverty and social exclusion, is the Social Inclusion Committee, which actively participated in the preparation of the Strategy.

The Agency is a key player in the field of social inclusion;² it was established in 2008 as an expert instrument of the Government of the Czech Republic for solving social exclusion (Government Resolution No 85 of 23 January 2008) and it ensures the comprehensive coordination of the public authorities' approach to solving the problem of social exclusion at the level of the central State administration, public administration on the issue of social inclusion of the population of socially excluded localities at the local

² To fulfil this basic purpose in the field of social inclusion (i.e. prevention and mitigation of social exclusion), the Agency conducts research and analytical activities, maps the phenomena and processes of social exclusion and their forms, shares data, evaluates trends and impacts, provides feedback on the effectiveness of public policies and strategies, initiates evidence-based policies and public strategies, ensures the sharing of expert know-how, coordinates the establishment and operation of territorial and expert networks, coordinates the efforts of public administration, non-governmental and expert sectors, supports local self-governments, identifies and promotes good practice, carries out information and awareness campaigns, carries out short- and long-term interventions, contributes to reducing social tension, in cooperation with persons at risk of social exclusion or socially excluded and with relevant actors introduces effective measures, mechanisms, innovations and methodologies, formulates proposals in the field of legislation, subsidy titles and public policies and coordinates national and European funds in the field of social inclusion.

level and cooperation between public administration bodies and other institutions at the local level in the field of social inclusion of the population of socially excluded localities and integration of socially excluded Roma. The Agency is a key partner for the implementation of the Strategy; among other matters, it provides support to local self-governments in addressing social exclusion within the framework of the Coordinated Approach to Socially Excluded Localities and the related set of interventions in the next programming period.

In the international context, the Strategy contributes, among others, to the fulfilment of the Sustainable Development Goals (SDGs). These are, in particular, SDG 10 “Reduced inequalities” (10.2 – “empower and promote social, economic and political inclusion” and 10.3 “ensure equal opportunity and reduce inequalities”) and SDG 1 “Eradicate poverty in all its forms”. At the same time, the Strategy contributes to the fulfilment of obligations arising from the International Covenant on Economic, Social and Cultural Rights (CESCR), to which the Czech Republic acceded in 1993.

The Strategy also takes into account the “15 measures to combat poverty and social exclusion” resulting from the round table discussion held on 10 September 2018 at the Ministry of Labour and Social Affairs with the participation of the Prime Minister of the Czech Republic, representatives of relevant governmental departments (MoLSA, MoRD, Office of the Government of the Czech Republic (OG CR)), affected municipalities and the non-profit sector on the topic, “Problems of socially excluded localities including housing benefits”.

At the same time, the Strategy also fulfils the Enabling Condition for drawing financial resources from EU funds in the programming period 2021–2027 – this is similar to the Enabling Condition of the European Commission valid for the period 2014–2020. This thematic Enabling Condition is: 4.4 National Strategic Policy Framework for Social Inclusion and Reduction of Poverty.³

The above-mentioned basic condition is also relevant for the formulation of state policies for social inclusion, as they are based on the European legislation for EU funds and define the content framework of the Strategy in terms of the objectives to be achieved and the basic principles described below. The use of EU funds is directly dependent on the fulfilment of the basic condition and must therefore be given due attention. At the same time, it must be added that activities supported by EU funds have played and will certainly continue to play a significant role in the practice of social inclusion in individual regions and localities. As these activities must be in line with the above-mentioned basic condition, the same applies to the Social Inclusion Strategy 2021-2030. This condition is based on the constitutional principles and international obligations of the Czech Republic and defines the content framework of the Strategy in terms of the objectives to be achieved and the basic principles described below (protection of human rights, minority rights, equality of women and men).

In its content, the Strategy also takes into account other commitments and recommendations of the European Commission, the European Parliament and the EU Council in the field of social policy, which are the following:

- European Pillar of Social Rights
- Action Plan for the European Pillar of Social Rights
- Council Recommendation establishing a European guarantee for children

³ The wording of the thematic enabling conditions is governed by Annex IV to the Regulation (EU) 2021/1060 of the European Parliament and of the Council (general regulation for EU funds).

- Council Recommendation on early childhood education and care: the Barcelona targets for 2030.
- EU Strategy on the Rights of the Child
- Directive of the European Parliament and of the Council on work-life balance for parents and carers
- Council Recommendation on access to affordable high-quality long-term care
- Council Recommendation on an adequate minimum income for active inclusion

The Strategy also sets out basic guidelines for other strategic documents addressing issues of social inclusion and its target groups. The Strategy will be relevant in terms of vertical coordination, for example for local and regional social inclusion strategies that are developed with the support of the Agency. It is necessary for the Strategy to respect the State aid rules; in relevant cases, exception(s) to the general incompatibility of State aid with the internal market may be applied. The Strategy promotes a holistic view and approach to social inclusion and a conceptual approach to the prevention and solution of social exclusion.

The basic instrument for the promotion of social inclusion of persons is social work. In addition to areas focused on the development of social work, the Strategy will focus on the following topics:

- access to and retention of employment;
- social services;
- family support;
- support for national minorities, especially the Roma;
- equal access to education;
- access to housing, prevention of loss of housing and retention of housing;
- access to healthcare;
- equal opportunities for women and men;
- ensuring decent living conditions;
- support for other services provided to enhance social inclusion and prevent social exclusion.

The Strategy's material is divided into two main parts. The first is the analytical part, which is followed by the content. In the analytical part, Chapter 1: "Introduction and description of the current situation", the Strategy mainly deals with a general description of the state and development of poverty and social exclusion in the Czech Republic. Next is the content part of the Strategy, which in the following chapters focuses more on social issues and the limits of social inclusion in the Czech Republic; however, even this part sometimes includes a piece of analytical knowledge or a definition of a term, if it is recognised as beneficial for understanding the issue. Chapter 2 deals with the specific form of guarantees of equal opportunities in the Czech Republic, social inclusion at the regional level and the mainstreaming of social inclusion and social cohesion. Chapter 3 emphasises the importance of the role of social work as one of the main instruments for social inclusion. Chapter 4 outlines the following main areas in which social inclusion needs to be promoted: the issue of debt and over-indebtedness,⁴ access to employment, social services, family support, education, housing and health care; finally, there are three chapters describing other specific topics, the promotion of decent living conditions and ensuring public order; finally, there is a chapter on the prevention of substance abuse and addictive behaviour.

⁴ The term "over-indebtedness" in this text is not identical with the term used by Act No 182/2006, the Insolvency Act, as amended.

Within the Strategy, the individual chapters describe the issues of each of the above topics. Based on an agreement between the main processors of the Strategy, each of the chapters is designed analogously; the first part of each chapter contains a general description of the issue in the Czech Republic. Some of the chapters where it is considered beneficial continue with the “risk” part, where the main limits of the issue are outlined. The final part of the chapter always contains one to four objectives.⁵ The objectives for the individual chapters are supplemented by a short text, a summary of the most important areas in which change should be pursued in the future. It should be noted that all chapters are considered equal and their order is given by an analogous order to the Social Inclusion Strategy 2014–2020, i.e. the previous document. Likewise, there are only one to four objectives in each individual chapter because for some of them it was not possible to thematically contain different areas of one issue into one objective. However, this does not mean that the objectives are of differing importance due to their differing numbers: they are simply divided into one to three thematic areas. The objectives will be further developed with the same importance and weight according to the following scheme: Action Plans will be drawn up on the basis of the objectives during the entire implementation period of the Strategy; these plans will cover a period of three years, in which the objectives will be specified to create individual measures. The measures will then be complemented by clear progress indicators, and specific managers will be assigned to them, which will be responsible for their implementation.⁶ The Strategy should be updated at mid-term.

The basic instruments for the effective prevention and weakening of social exclusion processes and reduction in the territorial concentration of social exclusion include the application of the informed-based approach (i.e. an approach based on relevant information) and an evidence-based approach (based on data), especially in the creation of legislation and public strategies consisting of, among other things, the systematic study and dissemination of knowledge on the phenomena and processes of social exclusion and the possibilities of influencing them, as well as the evaluation of the impact of public policies. Furthermore, effective coordination and cooperation of individual actors at all levels of public administration and in the civil sector is necessary in order to increase the coherence of public policies and vertical and horizontal synergies of interventions (i.e. the activities of public administration and the State should not contradict each other; one strategy should not seek to achieve the opposite of the other). When creating the Strategy and implementing the measures, all participating entities pay attention to the application of cross-cutting principles; mainly respect for fundamental rights and freedoms, equal opportunities, promotion of social inclusion at the local level (especially for marginalised groups – e.g. Roma), strengthening social cohesion and mainstreaming social inclusion; all principles are concerned with achieving gender equality, as it is one of the fundamental values of a democratic society.

⁵ In connection with the expansion of the Strategy to include the issues of homelessness, the number of these objectives had to be increased for selected chapters so that these objectives cover all relevant topics.

⁶ The managers of the individual tasks in the Action Plans will be the individual government departments responsible. The Action Plans will not assign tasks to self-governments.

1.1 Poverty and social exclusion in the Czech Republic

1.1.1 Definition and summary of main findings

The aim of this chapter is to map the current state and development of social exclusion in the Czech Republic, i.e. the process *"during which individuals or entire groups are marginalized and their access to resources that are otherwise available to other members of society is restricted or denied"* (Růžička & Toušek, 2014. p. 121)⁷. The concept of social exclusion, unlike the concept of poverty, encompasses not only the economic dimension but also other dimensions of the issue, whether it be exclusion from the labour market, (quality) housing, education, health care, a safe environment, or participation in civic and political life. Therefore, on the basis of the most recent research and data, where available, the sub-chapters also describe the situation in the individual dimensions of social exclusion.

The aim of the text is not to describe in detail and systematically all the aspects of poverty and social exclusion (which is not possible at present due to limited data sources in some areas), but to help navigate the fundamental aspects of these phenomena in the Czech Republic and to deepen, if possible, the analytical view of the problems that pose challenges to social inclusion in the Czech Republic. However, this chapter of the Strategy is not an exhaustive list of the issues that should guide social inclusion policy, which are identified in more detail in its content section. Similarly, its primary aim is not to analyse the situation in socially excluded localities or to identify all vulnerable groups of the population, but rather to examine poverty and social exclusion in the population of the Czech Republic in general. These findings represent an important source of data for the content of the Strategy, which further develops and responds to many of them in the proposed objectives and measures.

It is possible to summarise the key findings presented in this text as follows:

- 12% of the Czech population, i.e. 1 232 000 people, were at risk of income poverty or social exclusion in 2022.
- The at risk of poverty or social exclusion rate increased between 2021 and 2022, reversing the trend towards a lower proportion of people at risk in the population.
- Those most at risk of income poverty or social exclusion were the unemployed, single parents, persons aged 65 and over living alone, persons with disabilities, and Roma people.
- The absolute poverty rate, as measured by the internationally comparable indicator Material and Social Deprivation, was 2.1% of the population in 2022. This is a total of 211 thousand inhabitants of the Czech Republic.
- In 2022, 40.2% of Czech households, i.e. 1,807,000 households, struggled to manage with their total monthly income.
- In the last quarter of 2022, the general unemployment rate was 2.2%. The regions with the highest levels of social exclusion have long had higher unemployment rates, in particular the Ústí nad Labem, Moravian-Silesian and Karlovy Vary regions.
- In 2022, the number of long-term (12 months or more) unemployed persons was 86,044, a reversal of the trend of significantly declining long-term unemployment until 2019.

⁷ Another possible (and complementary) definition would be: *"A condition in which an individual or group of people does not participate fully in the economic and social life of society and/or their access to income and other resources does not enable them to achieve a standard of living that is considered acceptable in the society in which they live"* (European Commission, 2001, p. 9)

- The national share of people 15+ with executions in 2022 was 7.6%, with the highest share in the Ústí nad Labem (14.1%) and Karlovy Vary (13.0%) regions, that is, regions with a higher incidence of socially excluded localities.
- According to the Census of Persons from Selected Categories of the ETHOS Classification, 29,000 people were living in accommodation facilities and inadequate housing in 2022, of which 8,000 were children under the age of 15.
- In 2022, the early school leaving rate from secondary education was 6.2%, with roughly two-thirds of pupils in socially excluded localities dropping out of secondary education. In regions with the highest levels of social exclusion, drop-out rates are significantly higher in the long term, even at primary level.
- Among those who rated their health as poor, the unemployed and those with incomes below the income poverty line dominated.
- People at risk of poverty or social exclusion are less likely to participate in informal social activities, less likely to trust public institutions and much less likely to participate in the political life of society than the population as a whole.

1.1.2 Income poverty, material deprivation and very low work intensity

The main indicators of poverty and social exclusion at European level are: the risk of income poverty, the level of material and social deprivation, very low work intensity and the aggregate indicator of the risk of poverty or social exclusion (AROPE). The data source for these indicators is the international survey Statistics on Income and Living Conditions (EU-SILC), which has been conducted in the Czech Republic by the Czech Statistical Office since 2005 under the name Income and Living Conditions (see Box 1 for more information). We define the indicators in line with Eurostat terminology (2023a) and the EU 2030 targets for poverty and social exclusion defined in the European Pillar of Social Rights Action Plan (European Commission, 2021):

- *income poverty* as the proportion of people living in households whose incomes fall below 60% of the median net equivalised disposable income,
- *material and social deprivation* as the proportion of people living in households that cannot afford 7 of the 13 items monitored by the questionnaire for financial reasons,
- *very low labour intensity* as the share of people aged 0-64 living in households where the participation of working-age people (excluding students and early retirees) in the labour force is below 20% of the potential labour force,
- aggregate indicator of *the risk of poverty or social exclusion* as the proportion of people who fall into at least one of the three groups mentioned above (income poverty, materially and socially deprived, very low work intensity).

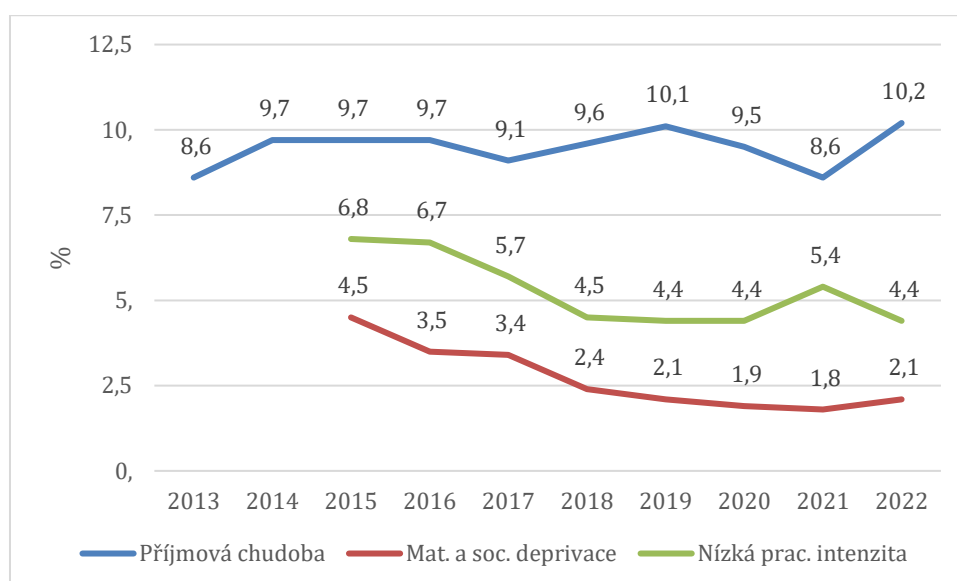
Box 1: Statistics on Income and Living Conditions (EU-SILC)

The international EU-SILC survey in the Czech Republic conducted by the CZSO monitors approximately 10 000 households each year, of which 6 000 are apartment buildings (repeatedly interviewed) and 4 000 are newly interviewed households. The selection of households is based on a two-stage random sampling, the basis for the selection being the Census District Register. Using weighting, the results of the survey are adapted to the Czech population. Only residential households are included in the survey - i.e. persons living in hostels, bachelor's quarters, retirement homes or other collective and institutional households are excluded.

According to the above-mentioned indicator, 10.2% of the population of the Czech Republic, i.e. 1 046 000 people, lived in income poverty in 2022. According to the time series (see Figure 1), this is the highest value in the last decade, an increase of 1.6 percentage points compared to 2021. The value of this indicator stagnated in previous years.

Material and social deprivation in the Czech Republic has never shown high values. From a 4.5% share of the population in 2015, deprivation has fallen to 2.1% in 2022 (see Figure 1). This equates to 211 000 people in absolute poverty. The very low work intensity indicator stagnated between 4 and 5% in the EU-SILC data, identifying 359,000 people in 2022.

Chart 1: Income poverty, material and social deprivation, very low work intensity, Czech Republic, time series



Source: CZSO, own calculation

Příjmová chudoba
Mat. a soc. deprivace
Nízká prac. intenzita

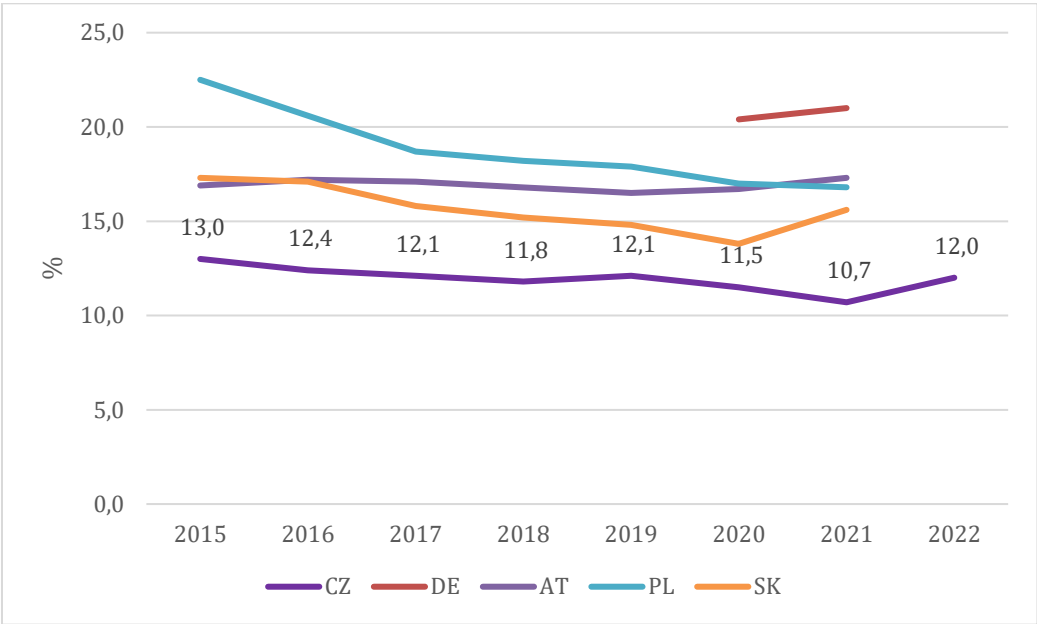
Income poverty
Material and social deprivation
Low work intensity

Income poverty, material and social deprivation, and very low work intensity largely overlap - 69% of the materially and socially deprived were in income poverty, 63% of those with very low work intensity were in income poverty, and 48% of the materially and socially deprived had very low work intensity. The resulting aggregate indicator of risk of poverty or social exclusion was "driven" by the indicator that identified the most people, income poverty.

According to this aggregate indicator, 12% of the population of the Czech Republic, i.e. 1 232 000 people, were at risk of poverty or social exclusion in 2022. Compared to previous years, when the risk of poverty or social exclusion rate was decreasing, an increase of 1.3 percentage points was recorded in 2021 (see Chart 2).

Chart 2 compares the time series of the Czech Republic and neighbouring countries (only the Czech Republic is available for 2022). The Czech Republic has the lowest long-term risk of poverty or social exclusion rate among its neighbouring countries, while in Poland the proportion of those at risk has been declining for a long time, and in Austria it has been stagnating. In general, the Czech Republic has the lowest level of risk of poverty or social exclusion among EU Member States.

Chart 2: Risk of poverty or social exclusion, Czech Republic and neighbouring countries, time series⁸



Source: CZSO, own calculation

As can be seen from the CZSO data, the risk of income poverty and general poverty or social exclusion increased between 2021 and 2022, reversing the trend towards a lower share of people at risk in the population. A more detailed view of the years 2021 and 2022 is offered by the data from the survey within the framework of the joint project of Czech Radio and PAQ Research (2023) Life during a pandemic / A priceless life.

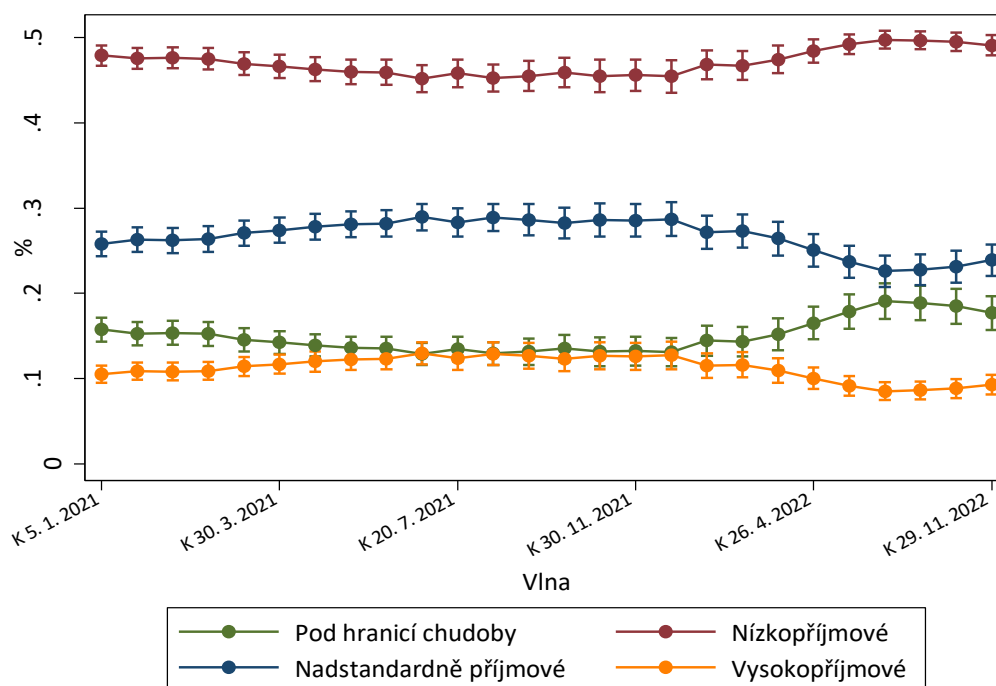
Although there is no indicator for the risk of poverty or social exclusion in this survey, there is an indicator for income poverty that is identical to the one used in the CZSO survey. The evolution of income poverty monitored on the basis of these data in 2021 and 2022 is shown in Figure 3. In addition to the category "below the poverty line", it also shows other income groups, i.e. persons with income below the median income of the Czech Republic, above-standard income, i.e. persons between the median income of the

⁸ Data for Germany are only comparable from 2020 onwards, as the country's data collection methodology changed between 2019 and 2020 (see Eurostat, 2023b).

Czech Republic and 1.5 times the median, and high-income, i.e. above 1.5 times the median. In the case of income poverty, this is the same as in the EU-SILC, only adjusted for average monthly inflation (0.3%).

According to Chart 3, income poverty worsened significantly in May and June 2022, with an increase in the number of persons below the income poverty line, while the number of persons in the low-income category increased, and the number of persons in the upper-income and high-income groups decreased. Towards the end of 2022, there is an indication of a return to previous values.

Chart 3: Income poverty in 2021 and 2022, Czech Republic



Source: PAQ Research, Life during a pandemic/A priceless life, N (pers.) = 43 341, 95% confidence intervals.

Pod hranicí chudoby
Nízkopříjmové
Nadstandardně příjmové
Vysokopříjmové

Below the income poverty line
Low-income category
Upper-income category
High-income category

Even indicators of income poverty and risk of poverty or social exclusion have their limits.⁹ The income poverty indicator takes into account only the income side of the household economy and leaves out the expenditure side; even those above the income poverty line can have serious financial problems. International comparisons of income poverty levels between countries based on this indicator may be biased by the use of national median incomes, as they do not take into account the different prices (purchasing power parity) in different EU countries (Prokop, 2019).

The risk of poverty or social exclusion indicator refers to two different populations (income poverty and material and social deprivation refers to the whole population, very low labour intensity refers only to the population aged 0-64) and to two different time periods (income poverty and very low labour intensity refer to the year before the survey year, material and social deprivation refers to the survey year). Thus,

⁹ See e.g. Szukielojc-Bienkunska & Piasecki (2022), Večerník & Mysíková (2015).

changes in the risk of poverty or social exclusion may not always have the same determinants, as different components of the indicator measure different aspects of the problem at any given time.

For these reasons, it is advisable to supplement the "objective" indicators of income poverty and social exclusion with subjective measurements that will help us to gain a more comprehensive picture of the phenomenon.

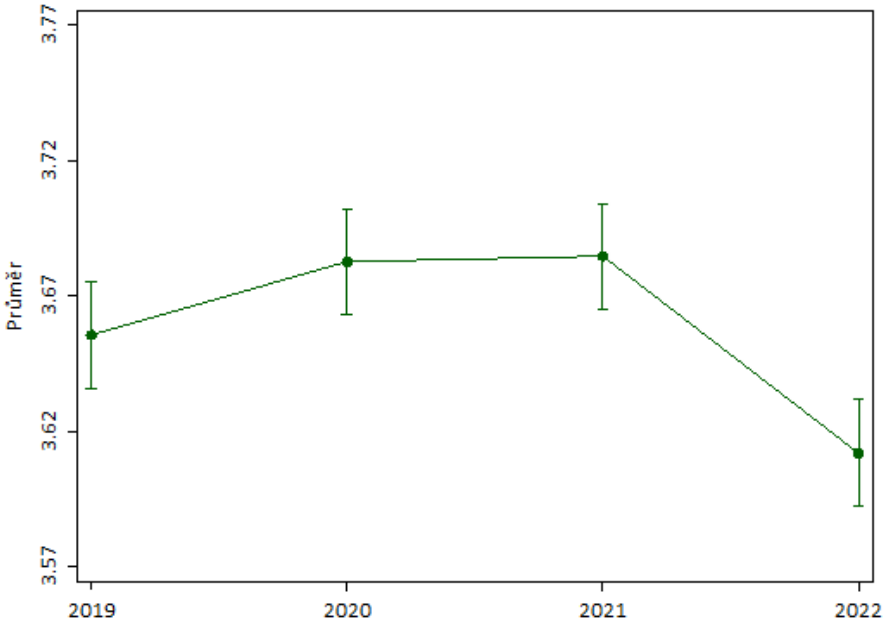
1.1.3 Subjective measurements of poverty and social exclusion

The CZSO (2023a) Income and Living Conditions Survey measures, among other things, subjective perceptions of income poverty and social exclusion. One of the indicators used for this purpose is an indicator measuring how households manage their money.¹⁰

The evolution of the average value of how households managed between 2019 and 2022 is shown in Chart 4, with a higher value indicating a better financial situation. Between 2019 and 2021, the situation improved slightly, but in 2022, households' management with income deteriorated significantly. The subjective indicator thus confirms the findings from the "objective" indicators.

In 2022, 40.2% of Czech households, i.e. 1,807,000 households, struggled to manage with their total monthly income. This number represented an increase of 59,000 households compared to 2021.

Chart 4: How households manage with their monthly income, 2019-2022, Czech Republic



Source: CZSO, own calculations, 95% confidence intervals

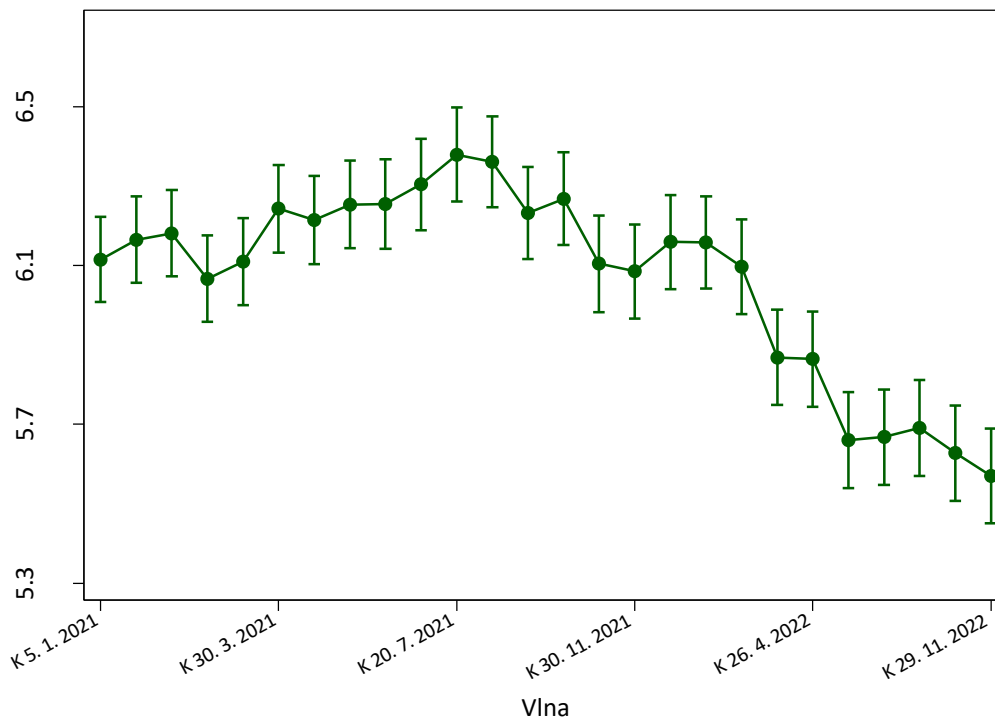
Similarly to income poverty, we can complement the EU-SILC data on subjective coping with money with the results from the Life during a pandemic/A priceless life research. This sample includes a similar

¹⁰ It is measured by the question "How does your household manage with your total monthly income?", the response field is a five-point scale ranging from "With great difficulty" to "Very easily".

indicator of the financial situation, which is measured by the question: *"How would you assess your financial situation in the past two weeks?"*¹¹

Chart 5 shows the average values of the subjectively perceived financial situation by time of data collection. The deterioration in the financial situation of households occurred between March and May 2022, with no improvement by the end of the year. Again, the subjective indicator confirms the findings of the income poverty indicator.

Chart 5: Financial situation assessment, 2021-2022, Czech Republic



Source: PAQ Research, Life during a pandemic/A priceless life, N (pers.) = 43 341, 95% confidence intervals

1.1.4 Who is at risk of poverty and social exclusion?

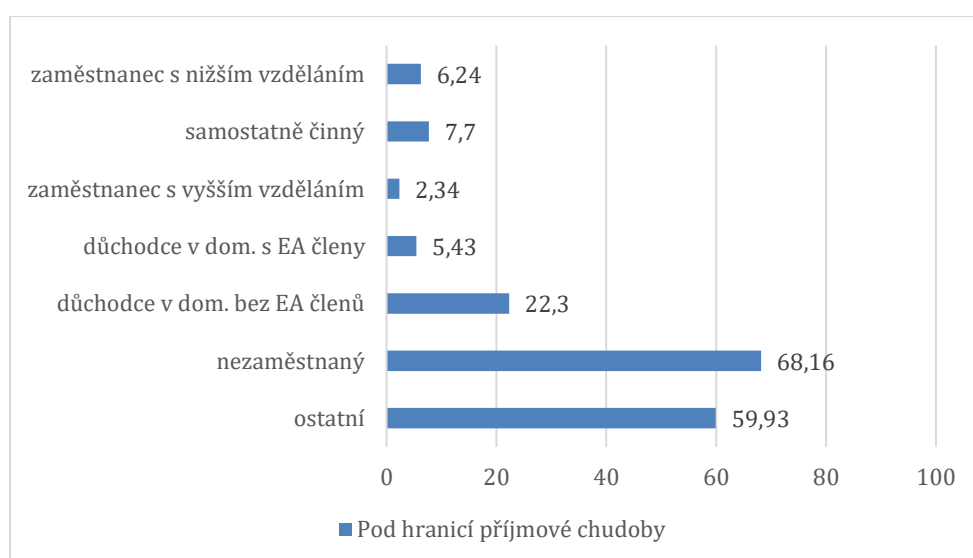
According to data from the CZSO sample survey (2023a) Income and Living Conditions, the following groups are particularly at risk of poverty or social exclusion: the unemployed, single-parent households with one or more children, individuals aged 65 and older living alone, and persons with disabilities. At this point it is necessary to mention one of the important shortcomings of the data used, namely that it does not identify the ethnicity of the respondents. The aspect of ethnicity is therefore further investigated in the text using other data sources.

The income poverty indicator is a suitable indicator for comparing the level of social exclusion by economic activity, as the aggregate indicator of the risk of poverty or social exclusion includes an indicator of very low labour force participation, which is directly related to unemployment. Chart 6 shows the share of people below or above the income poverty line according to the position of the head of the household.

¹¹ The response field is an eleven-point scale, from 0 (Very difficult) to 10 (Very good).

Persons living in households where the head of the household (usually - or more often - the man in complete families, or the highest earner in incomplete families) was economically active were rarely at risk of income poverty. This was not the case for people living in households where the head of the household was unemployed - 68% of people in this category were below the income poverty line. The category "other" in Chart 6 refers to persons living in households where the head of the household was neither economically active nor in receipt of a pension; these are e.g. persons receiving parental allowance, students, persons living off of assets. 60% of people living in this type of household were below the income poverty line. Another category significantly more likely to be below the income poverty line was persons in households headed by a pensioner and with no economically active persons - within this category there is a significant difference between one-person and two-person households (see below).

Chart 6: Inhabitants of the Czech Republic below the income poverty line by position of the head of the household, 2022



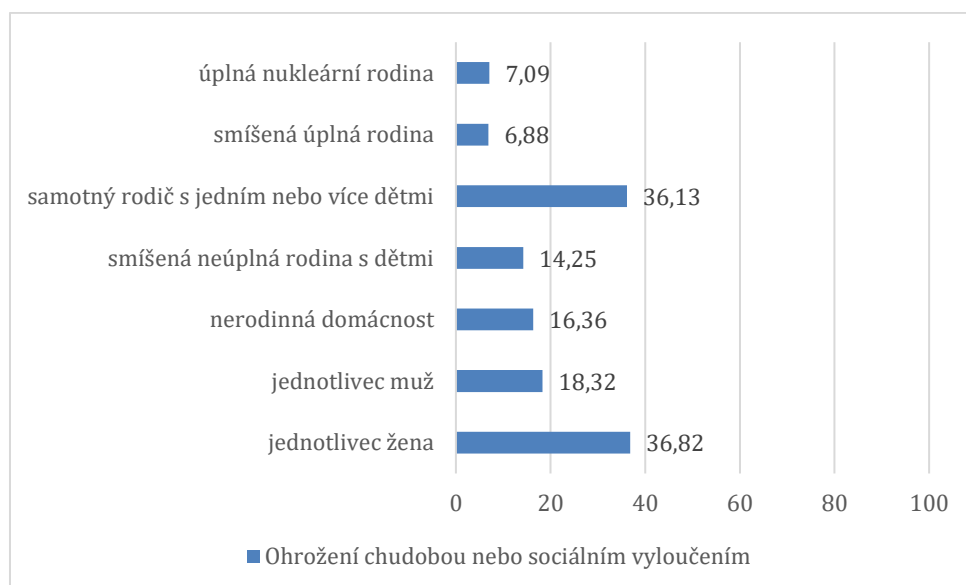
Source: CZSO, own calculations

Pod hranicí příjmové chudoby
zaměstnanec s nižším vzděláním
samostatně činný
důchodce v dom. s EA členy
důchodce v dom. bez EA členů
nezaměstnaný
ostatní

Below the income poverty line
Employee with low levels of education
Self-employed person
A pensioner in a household with economically active members
A pensioner in a household without economically active members
Unemployed
Other

Another group at significant risk of income poverty are single-parent households with one or more children. Only 7.1% of persons living in a complete nuclear family (two adults without children/two parents with children) were at risk of poverty or social exclusion (see Figure 7). By contrast, the proportion of people at risk of poverty or social exclusion among single parent households was 36%. These households had very low incomes even after recalculating the number of consumption units (taking into account the number of adults and children in the household). According to Chart 7, women living alone were similarly at risk – this category was largely made up of elderly women living alone (see below). The reason for the higher risk of poverty for women in old age is mainly due to the difference in the amount of old-age pensions compared to men, which is approximately 17% (OG CR, 2021).

Chart 7: Inhabitants of the Czech Republic at risk of poverty or social exclusion by household type, 2022



Source: CZSO, own calculations

Ohrožení chudobou nebo sociálním vyloučením

úplná nukleární rodina

smíšená úplná rodina

samotný rodič s jedním nebo více dětmi

smíšená neúplná rodina s dětmi

nerodinná domácnost

jednotlivec muž

jednotlivec žena

At risk of poverty or social exclusion

Two-parent nuclear family

Blended two-parent family

Single-parent family with one child or more children

Blended single-parent family with children

Non-family household

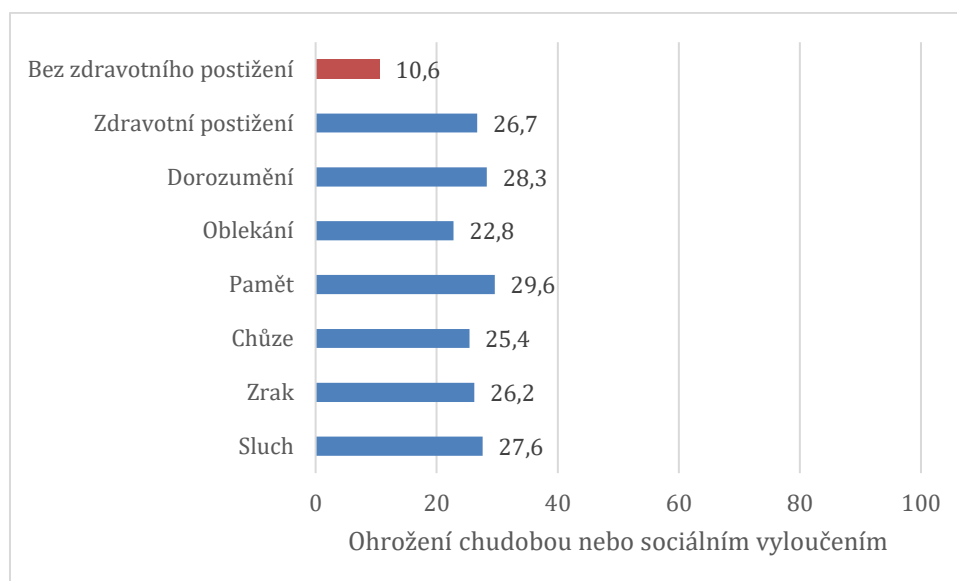
Single man

Single woman

A significantly vulnerable group was those aged 65 and over living alone - 37.8% of these people were below the income poverty line in 2022, which was approximately 3.5 times higher than the general population. It was also significantly higher than for people living in a household of two people, at least one of whom was aged 65 or over - only 4.2% of these people were below the income poverty line. Women are significantly more affected by income poverty in the category of persons living alone over 65, 43.1% compared to 24.5% for men. Although the group of persons 65+ living alone was relatively large - 7.3% of the population of the Czech Republic - the share of persons below the income poverty line fluctuated significantly: in 2020 the share of persons below the income poverty line was 37.4%, in 2021 it was 27.8%, and in the following year there was an increase of ten percentage points. This is due to the fact that the income of households made up of people aged 65 and over living alone is so low that a small increase in the income poverty line is enough to push many more people in this group into income poverty.

Another group at risk was persons with disabilities. According to the CZSO survey (2023 a) Income and Living Conditions, in 2022, 5.7% of the population of the Czech Republic was immobile or had great difficulty walking, over 2% of the population was blind or had great difficulty walking, and between 1% and 2% were deaf people and people who have difficulties with memory, dressing or communication. People with one or more of these health problems were more likely to be at risk of poverty or social exclusion (see Figure 8). Persons with disabilities tended to be older, less educated and living in households with lower work intensity.

Chart 8: Population of the Czech Republic at risk of poverty or social exclusion by disability, 2022



Source: CZSO, own calculations

Bez zdravotního postižení	Without disability
Zdravotní postižení	Disability
Dorozumění	Understanding
Oblékání	Dressing up
Paměť	Memory
Chůze	Walking
Zrak	Sight
Sluch	Hearing
Ohrožení chudobou nebo sociálním vyloučením	At risk of poverty or social exclusion

Roma

As already mentioned, there is no variable in the EU-SILC data that distinguishes ethnicity. This is a major shortcoming in terms of examining social exclusion. This gap can be partially filled by other research, namely the Sample Survey of the Roma Population of the Research Institute of Labour and Social Affairs (Fónadová et al., 2022) and the Roma Survey 2021 of the European Union Agency for Fundamental Rights (2022)¹².

The Sample Survey of the Roma Population in 2022 examined the proportion of Roma people living in material and social deprivation (the proportion of people living in households that cannot afford 7 of the 13 items monitored by the questionnaire for financial reasons). While in the general population around 2% of people lived in material and social deprivation, in the Roma population the indicator had a value of 40%. According to this research, 18% of Roma households cannot afford 3 meals a day for each household member and 8% of Roma households cannot afford a bed for each household member. According to the results of the survey, 41.9% of Roma were living in severe material deprivation (5 of the 13 items of deprivation missing simultaneously), while in the general population it was 2.4% (Fónadová et al., 2022). According to the Roma Survey 2021, 77% of Roma people in the Czech Republic live below the income

¹² Both surveys examined only respondents who self-identify as Roma, leaving out groups of Roma people who do not self-identify as such.

poverty line. In the case of Roma over 65, the proportion of people below the income poverty line was as high as 92% (European Union Agency for Fundamental Rights, 2022)¹³.

One of the aspects related to the living conditions of the Roma minority is significant spatial segregation. According to the Living Conditions of Residents of Socially Excluded Localities survey conducted by the Czech Ministry of the Interior's Social Inclusion Department (Agency) (Sál, 2021), self-identified Roma people made up 34% of the residents of excluded localities, while another 16% of Roma people reported a Roma identity combined with Slovak or Czech nationality. The sample survey of the Roma population reports that 31.8% of Roma people lived in a house where all or most of the people were Roma, and 29.1% lived on a street where all or most of the neighbours were Roma.

Ukrainian refugees

The EU-SILC survey data fails to provide information not only about the situation of members of the Roma minority, but also about the situation of refugees from Ukraine. Their situation was mapped in a research conducted by PAQ Research in cooperation with the Institute of Sociology of the Academy of Sciences of the Czech Republic entitled *The Voice of Ukrainians: Integration of refugees in the labour market and housing* (Kavanová, 2023). According to this research, 66% of Ukrainian refugees were below the income poverty line and 78% were materially deprived. The development of poverty and social exclusion among refugees needs to be further monitored; for example, the survey mentioned above showed that labour force participation increased only among new arrivals, while it stagnated at 60% among those who arrived immediately after the war (those with economic activity before the war).

¹³ The higher risk of poverty among Roma in the Roma Survey is probably related to the fact that there is a higher representation of residents from excluded localities, whereas the RILSA survey is consistently designed to be representative of the entire Roma population.

1.2 Indebtedness

Indebtedness and subsequent executions are significant factors of social exclusion. People who fall into the debt trap are easily marginalised. Over-indebtedness and subsequent executions are largely caused by the easy availability of high-interest loans and low financial literacy, but also by the lack of available services to help people overcome life emergencies (loss of employment, illness, death of a partner, etc.). The problems associated with executions and over-indebtedness in general are problems such as undeclared work or the threat of a very low pension in old age.

The number of people with executions in the Czech Republic is still very high. According to the data of the Chamber of Bailiffs of the Czech Republic (2023a), 668 thousand individuals had executions in the Czech Republic in December 2022¹⁴. While this is down from nearly 800,000 people before 2019, the number of people with three or more executions is declining more slowly than the total number of people with executions. Between 2018 and 2022, there was a drop from 493k in one year to 445k of these people, and 122k still face as many as 10 or more simultaneous execution proceedings, according to 2022 data. Multiple debt is precisely what threatens households, their overall stability and social inclusion the most.

Table 1: Development of the number of multiple executions in 2018-2022

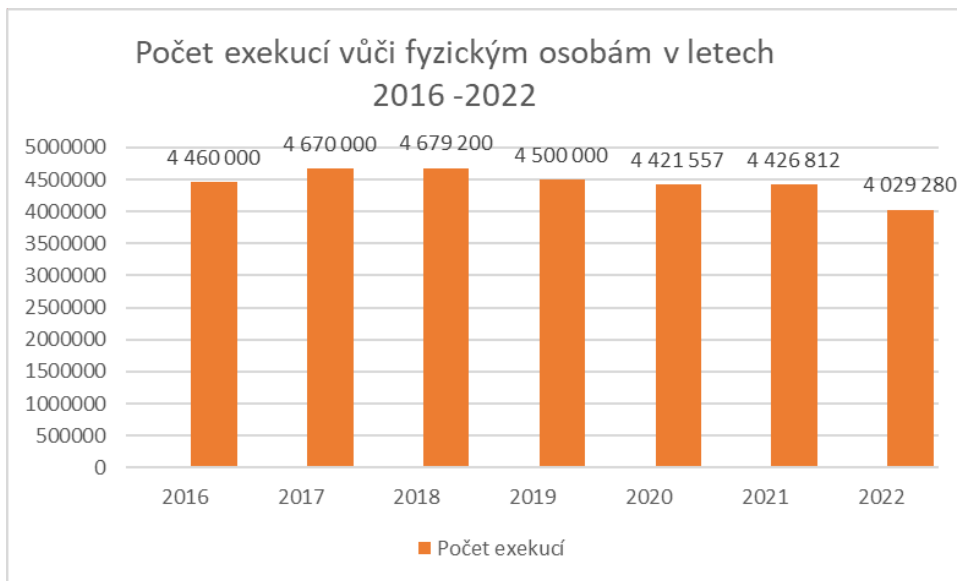
Number of executions per debtor	2018	2019	2020	2021	2022
1 execution	241275	223013	199285	163819	152200
2 execution	90961	86055	78928	73344	71067
3 execution	66533	43543	58920	56367	55790
4 execution	58524	54812	51282	49645	49731
5 executions	51483	49161	46102	45418	46019
6 executions	46982	44574	42142	41906	42333
7 executions	40800	39642	38016	37836	38191
8 executions	35338	34830	32825	33664	34065
9 executions	30562	30089	28422	29412	29540
10 executions	25773	25912	24899	25737	25527
More than 10 executions	133106	137869	132095	140880	121957

Source: Chamber of Bailiffs

The total number of executions has been declining only very slowly since 2016. As the chart below shows, it has been rather stagnant in recent years, with a more significant decline (397,532 executions) only occurring in 2022.

¹⁴ The data monitored by the Chamber of Bailiffs of the Czech Republic does not include tax and administrative executions.

Chart 9: Number of individuals with executions, 2016-2022



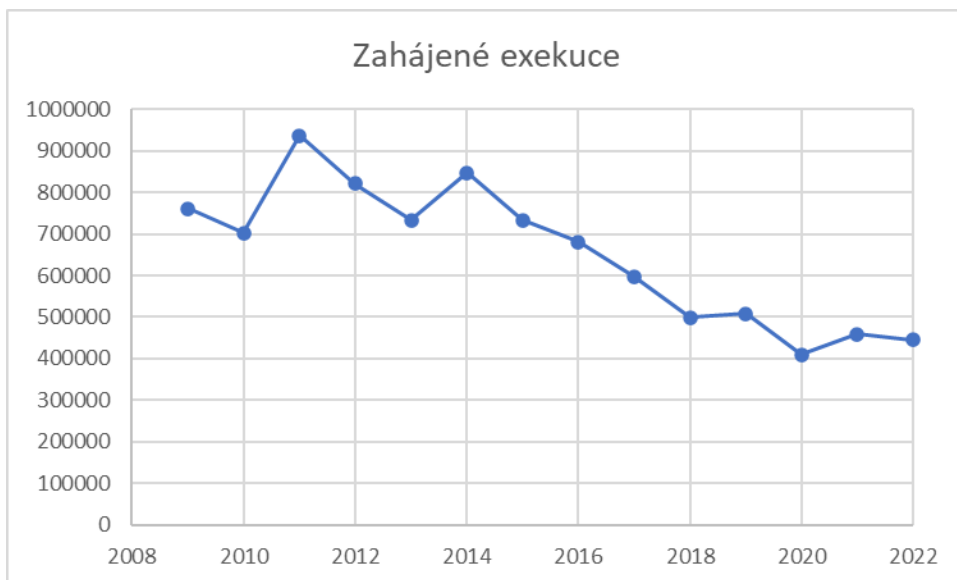
Source: Chamber of Bailiffs

Počet exekucí vůči fyzickým osobám v letech 2016 - 2022
Počet exekucí

Number of individuals with executions in 2016-2022
Number of executions

The number of newly initiated executions is rather stagnant again after a decline in 2014-2020. In 2022, 445,526 executions were initiated, representing a year-on-year decrease of only 13,793 new executions.

Chart 10: Overview of the number of initiated executions, 2008-2022



Data source: Chamber of Bailiffs

Zahájené exekuce

Initiated executions

Available data, as presented for example in the executions map (Open Society, 2023a), show that the level of debt is higher in regions with the highest concentration of socially excluded localities. The highest share of individuals with executions at the end of 2022 was in the Ústí nad Labem (13.95%), Karlovy Vary (12.96%), Liberec (9.7%) and Moravian-Silesian regions (8.96%). These regions also had the highest proportion of individuals with multiple executions. In this respect, the worst situation was in the Ústí nad

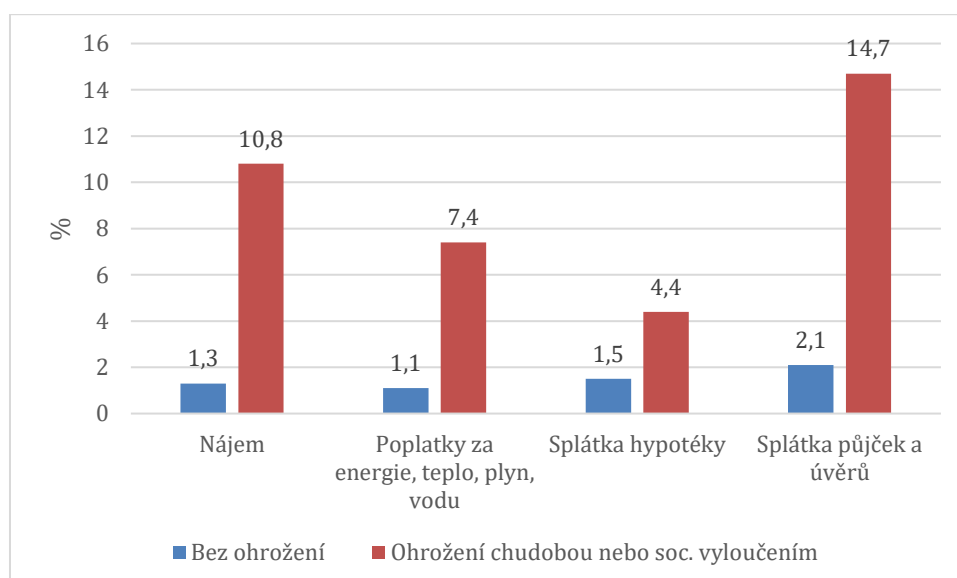
Labem Region, where 82% of the total number of individuals were people with multiple executions, while in the Moravian-Silesian Region this share was 81%.

According to the ETHOS 2022 Census of Selected Classification Categories (SocioFactor, 2022), over-indebtedness and inability to repay debts were the most common reasons for moving for people living in hostels or inadequate housing, with only 27.9% of people living in hostels or unsuitable housing having no debts, 38.8% unable to repay debts (respectively, almost 61.8% of people with debts living in hostels or inadequate housing did not know the amount of their debts. The most common sources of debt for these people were loans and credit (59.5%), debts for waste collection (37.2%) and public transport fines (36.2%).

Debt and subsequent executions have also been shown to be a factor in the placement of children outside the family. As shown in the analysis published in the Report on the State of Care for Children at Risk in 2023 (MEYS, 2023), there is a very strong correlation at the level of the individual MEPs studied between the proportion of the population with executions and the rate of placement of children in state care.¹⁵ It is clear that the needs of children are difficult to meet in families that have fallen into a difficult living situation, which includes financial distress and subsequent executions.

Unsurprisingly, people at risk of poverty or social exclusion differed significantly from the rest of the population in their ability to repay their debts. According to the CZSO data (2023a) presented in Chart 11, one tenth of people at risk of poverty or social exclusion had problems paying their rent (of those who lived in rented accommodation), while in the population of people not at risk it was only over 1 per cent. Almost 15% of those at risk of poverty or social exclusion had problems repaying loans or credit (of those who had loans or credit), compared to 2% of the general population.

Chart 11: Persons living in households with inability to pay debts on time in the last 12 months, Czech Republic, 2022



Source: CZSO, own calculations

Nájem

Poplatky za energie, teplo, plyn, vodu

Rent

Charges for electricity, heating, gas, water

¹⁵ According to the above-mentioned statistical analysis, differences between MEPs in execution rates explained the 77% variation in the rate of placement of children in state care (see MEYS, 2023, p. 31).

Splátka hypotéky
Splátka půjček a úvěrů
Bez ohrožení
Ohrožení chudobou nebo soc. vyloučením

Mortgage payment
Repayment of loans and credits
Without risk of poverty or social exclusion
At risk of poverty and social exclusion

The systemic way of dealing with over-indebtedness - debt relief - is still utilised by only a small proportion of over-indebted people. Research on barriers to entering debt relief (PAQ Research, 2022) has shown that a large proportion of debtors are unaware of the possibility of debt relief or have misinformation about the rules of debt relief, many debtors do not enter debt relief due to the difference in the amount of deductions in the execution and in debt relief, and a significant proportion are deterred by the complexity of the process and the risk of losing their housing.

In order to reduce the number of executions, the Czech government announced an action called "Grace Summer" starting from October 2021, which for three months allowed debtors to terminate execution proceedings related to their debts to public institutions. In total, 15,000 people used this option and 42,000 execution proceedings were terminated. Debtors were forgiven CZK 1.55 billion in penalties, interest and other related payments and CZK 390 million was returned to creditors. However, the expected impact was much more optimistic, with estimates of up to 300,000 people taking part.

In the autumn of 2022, a similar initiative was repeated under the name "Grace Summer II". As in the previous action, the borrower only had to pay the outstanding principal and a fee representing the bailiff's costs to terminate the execution¹⁶. Compared to the first year, fewer people joined the event, which was reflected in the number of suspended enforcement proceedings, which totalled 9,104, but also in the amount forgiven to debtors, which totalled CZK 370 million. This could have been due to the poor economic situation combined with the fact that this time, the majority of executions were those with high principal amounts. For many people, it could be impossible to pay back even just the principal of the debt (People in Need, 2022). According to the Chamber of Bailiffs (2023b), the lower number of discontinued execution proceedings was also influenced by the discontinuation of futile bailiffs' actions, which occurred in the first half of 2022. The results show that in regions with the highest number of executions, which are the Karlovy Vary, Ústí nad Labem and Liberec regions, the implementation of the second year of this event did not have any significant impact.

¹⁶ It increased from CZK 750 to CZK 1,815 compared to the previous year.

1.3 Employment

The unemployed are one of the groups at risk of social exclusion. The long-term unemployed generally have a low social status, they lose qualifications, work habits and self-confidence. Regional aspects can also play an important role in access to the labour market. In some areas with high unemployment rates and low job supply, the employability of some people may be limited.

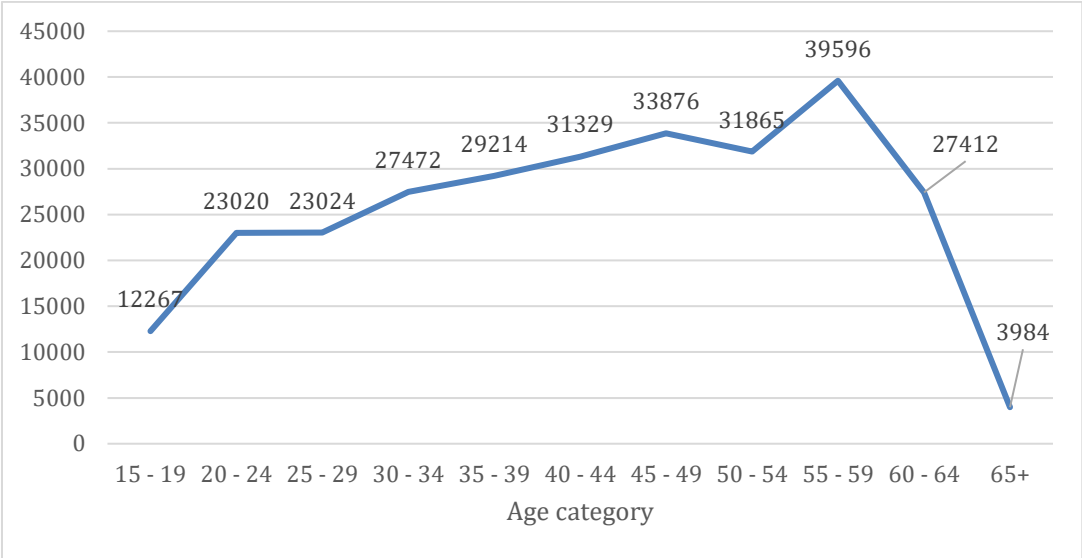
In the Czech Republic, the unemployment rate has fluctuated between 3 and 4% in recent years. According to CZ+91SO data (2023b), the general unemployment rate in the fourth quarter of 2022 was 2.2%, 1.8% for men and 2.7% for women. Young people are significantly more likely to be unemployed compared to other population categories: the 15-19 age category has a specific unemployment rate of 23.2%, but the 15-24 age category (7.6%) and people with only primary education (13.5%) are also at risk. The Moravian-Silesian (4.1%), Karlovy Vary (3.8%) and Ústí nad Labem (3.1%) regions were noticeably more affected. The long-term unemployment rate was 0.6%, higher in the 15-29 age group (1%).

A comparison of the situation of men and women in the labour market shows that women have a long-term disadvantage in this area. These inequalities are reflected, inter alia, in the gender pay gap and the very low employment rate of women of typical parenthood age. The causes of these inequalities include, among other things, a lower representation of part-time work in the labour market, which would enable women caring for children and dependents to effectively reconcile family and work life, long parental leave and a lack of affordable and locally available childcare (OG CR, 2021).

Roma people, in particular, suffer from the lack of access to the (quality) labour market. According to the Sample Survey of the Roma Population (Fónadová et al., 2022), a total of 49.6% of the Roma population aged 20-64 were employed, while in the general population for the same age category in 2021 the employment rate was 80%. Of those Roma people who are working, 34.1% had a fixed-term contract, which was significantly higher than in the general population (5.3% in 2021). According to the findings of this survey, the unemployment rate for Roma people was 11.8%, which is 5 to 6 times higher than the unemployment rate for the general population (in the same year it was only 2.1%).

The chart showing the number of job seekers by age category (see Chart 12) shows that the largest number of job seekers in January 2023 was in the pre-retirement age category 55-59, while there were relatively few younger job seekers. In terms of long-term unemployment, 26.7% of job seekers had been unemployed for 12 months or more. On the other hand, 37.3% of the unemployed had been out of work for less than three months. The Moravian-Silesian (35.2%), Ústí nad Labem (25.1%) and Pilsen (24.7%) regions had the highest share of people unemployed for more than 12 months (MoLSA, 2023).

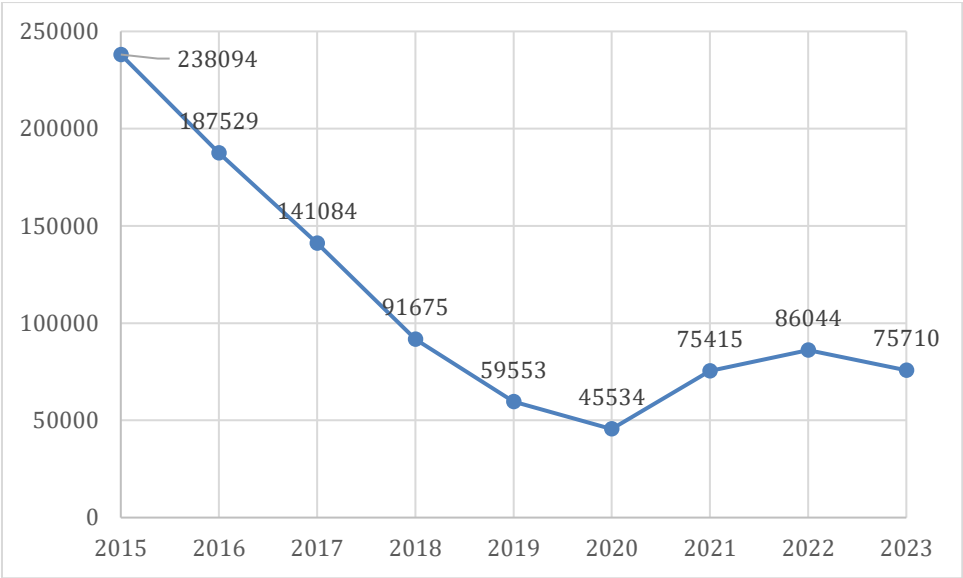
Chart 12: Number of job seekers by age, January 2023



Source: MoLSA

Between 2015 and 2020, the number of job seekers whose unemployment lasted 12 months or more declined steadily (see Chart 13). In 2021, on the other hand, the number of long-term unemployed persons increased significantly (by 30 000 persons), which represented a return to pre-2019 values, while in January 2023 a slight decline is again visible. In the long term, unemployment is highly concentrated, mainly in former coal mining areas (Karviná, Orlová, Havířov, Ostrava) and brown lignite mining areas (Chomutov, Jirkov, Most) (Mahdalová & Škop, 2023).

Chart 13: Absolute number of long-term unemployed job seekers, 2015-2023



Source: MoLSA, Structure of applicants and vacancies

Finding a job is key to getting out of a situation of social exclusion. In addition, in order to obtain and maintain stable employment, socially excluded people and those at risk of social exclusion have to overcome barriers such as greater discrimination, poorer education and poorer health than the general population.

1.4 Housing

Social exclusion is often associated with the absence of housing or with living in substandard housing. The socially excluded are displaced into low-quality housing stock, into peripheral locations without services and infrastructure. According to the definition of the European Typology of Homelessness and Housing Exclusion (ETHOS), the concept of "having a home" is understood as a decent dwelling (space) capable of meeting the needs of the person and his/her family (physical domain), as well as the possibility to maintain privacy and social relationships (social domain) and to have exclusive ownership, security of tenure and legal title (legal domain). The typology distinguishes the following categories of housing exclusion: roofless, houseless, uncertain housing, inadequate housing (see Table 2 for a more detailed breakdown). The target group of homeless persons and persons at risk of housing deprivation was the subject of the Concept for Preventing and Tackling Homelessness Issues in the Czech Republic by 2020. Some of its priorities have been incorporated into this expanded Strategy.

Table ETHOS – European Typology on Homelessness and Housing Exclusion in the environment of the Czech Republic

Conceptual category	Operational category	Form of housing	Generic definition (type)	National sub-category	*
ROOFLESS	1 Persons living outdoors	1.1 Public space or external space (in the street)	Persons living in the streets or publicly accessible spaces, without a shelter that can be defined as living quarters	1.1.1 Persons sleeping rough (e.g. in the streets, under a bridge, train stations, airports, public transport means, sewers, caves, abandoned railway cars, tents, garages, laundry rooms, cellars and attics of buildings, car wrecks)	b
	2 People in emergency accommodation	2.1 Night shelter	People with no usual place of residence who make use of overnight shelter, low threshold shelter	2.1.1 Persons in low threshold shelter 2.1.2 Persons seasonally using facilities without beds for overnight shelter	b b
HOUSELESS	3 Persons in accommodation facilities for the homeless	3.1 Homeless hostel	Persons in hostels with short-term accommodation	3.1.1 Men in homeless hostel 3.1.2 Women in homeless hostel 3.1.3 Mothers with children in homeless hostel 3.1.4 Fathers with children in homeless hostel 3.1.5 Two-parent families in homeless hostel 3.1.6 Persons in half-way house	b b b b
		3.2 Temporary accommodation	Persons in short-term public accommodation facilities who do not have their own housing	3.2.1 Persons in public commercial-based accommodation (no other housing possibility) 3.2.2 Persons in shelter after eviction from dwelling	b b
		3.3 Transitional supported accommodation	Homeless persons in transitional accommodation with social support	3.3.1 Housing with care intended explicitly for homeless people does not exist	a

	4 People in women's shelter	4.1 Women's shelter accommodation	Women accommodated, for short term, due to experience of domestic violence	4.1.1 Women at risk of domestic violence, residing at a secret location 4.1.2 Women at risk of domestic violence, residing in homeless hostel	a a
	5 People in accommodation for immigrants	5.1 Transitional housing (shelters for asylum seekers)	Immigrants in short-term accommodation due to their immigrant status	5.1.1 Asylum applicants in reception centres	a
		5.2 Accommodation facilities for migrant workers	People in accommodation for migrant workers	5.2.1 Migrant workers – foreigners in public commercial-based accommodation (no other housing possibility)	a
	6 Persons due to be released from institutions	6.1 Penal institutions	No housing available prior to release	6.1.1 Persons due to be released from prison	a
		6.2 Medical institutions	Stay longer than needed due to lack of housing	6.2.1 Persons due to be released from a medical institution	a
		6.3 Children's institutions	No housing available	6.3.1 Persons due to be released from a children's institution 6.3.2 Persons due to leave foster care	a a
	7 People receiving longer term support	7.1 Residential care for older homeless people	Seniors and disabled persons with long-stay accommodation in homeless hostels	7.1.1 Senior-aged men and women or persons with disabilities with long-stay accommodation in a homeless hostel	b
		7.2 Supported housing for formerly homeless people	Long-stay accommodation with care for formerly homeless people	7.2.1 Housing with care intended explicitly for homeless people does not exist	a
INSECURE HOUSING	8 People living in insecure accommodation	8.1 Temporary living with family or friends	Temporary living with family or friends	8.1.1 Persons temporarily living with family or friends (no other housing possibility) 8.1.2 Persons in subtenancy (no other housing possibility)	a a
		8.2 No legal (sub)tenancy	Housing without a legal title, illegal seizure of a building	8.2.1 Persons living in a dwelling with no legal right 8.2.2 Persons in an illegally occupied building	a b
		8.3 Illegal occupation of land	Illegal occupation of land	8.3.1 Persons living on illegally occupied land (allotment gardens, underground shelter)	b
	9 People living under threat of eviction	9.1 Notice to leave the rental dwelling	Notice to leave the rental dwelling	9.1.1 Persons who received a notice to leave the rental dwelling	a
		9.2 Loss of title to the dwelling	Loss of title to the dwelling	9.2.2 Persons at risk of being evicted from own dwelling	a
	10 People living under threat of domestic violence	10.1 Police-recorded domestic violence	Cases where police action was taken to ensure safety of victims of domestic violence	10.1.1 Persons living under threat of domestic violence – police recorded incidents – victims	a

INADEQUATE HOUSING	11 People living in makeshift and unusual buildings	11.1 Mobile homes	Mobile homes not intended as place of usual residence	11.1.1 Persons living in mobile homes, such as trailer, camper, houseboat (no other housing possibility)	a
		11.2 Non-conventional building	Makeshift shelter, shack or shanty	11.2.1 Persons living in a building not intended for residence, e.g. persons living at their workplace, in garden cottages with the owner's consent	a
		11.3 Temporary structure	Temporary structure	11.3.1 Persons living in temporary structures or in buildings without a final completion certificate, for instance	a
	12 People living in unfit housing	12.1 Occupied dwellings unfit for habitation	Living in premises defined as unfit for habitation by national legislation	12.1.1 Persons living in unfit premises – dwelling has become unfit for habitation (could have previously been fit for habitation)	a
	13 Persons living in overcrowded dwellings	13.1 The highest national standard defining overpopulation	Defined as exceeding the highest density standard for floor space or number of rooms	13.1.1 Persons living in overcrowded dwellings	a

* Abbreviations used in the last column – Degree of threat: a – vulnerable persons, b – homeless persons

The 2019 Census of Homeless People in the Czech Republic was conducted by the Research Institute of Labour and Social Affairs (Nešporová et al, 2019). The result was an estimate of the total number of homeless persons and selected categories of homeless persons (persons in shelters and non-commercial hostels, see Table 2); according to the Census, there were 23 830 such persons living in the Czech Republic in April 2019. Of this number, 2,600 were children under the age of 18, most of whom were living in shelters¹⁷. Approximately half of the total number of homeless people live on the streets or in emergency shelters. 80% of homeless people are men.

More than half (53%) of the population surveyed had been homeless for a total of 6 years or more, with 39% of homeless people having been on the streets at least three times in their lives. Long-term homelessness is most prevalent among people who sleep outside, a third of whom have been homeless for more than ten years. Approximately half (51-61%) of the homeless people surveyed have one or more children, but only 54% of these parents maintain contact with their children.

This research was followed up by the Census of Persons from Selected ETHOS Typology Categories (SocioFactor, 2022), which aimed to determine the numbers of persons from the previously under-monitored sub-categories of homelessness falling under the conceptual categories of houseless, inadequate and uncertain housing (see Table 2). According to this research, almost 29,000 people with Czech citizenship were living in accommodation facilities and inadequate housing in 2022¹⁸. Of this number, 8,000 people were children under the age of 15. There were a total of 12 445 persons living in

¹⁷ Children under the age of 18 must always have some kind of accommodation under current Czech legislation, so they cannot live "on the streets". Therefore, they do not appear in the "roofless" category.

¹⁸ These were dwellings in flats, houses, non-residential premises or cottages that do not meet at least one of the basic conditions of standard housing, including available running and hot water, electricity, a toilet, bathroom/shower and functioning windows or entrance doors.

10 358 households in hostels and other accommodation facilities, and 16 058 persons living in 4215 households in inadequate housing. Children under the age of 15 accounted for nearly two-fifths (38.8%) of the total population of persons living in inadequate housing. For both sheltered and inadequate housing, the main source of housing financing was housing benefit or a housing benefit supplement (SocioFactor, 2022).

In the Czech Republic, 37 472 people in housing deprivation lived in overcrowded flats (less than 8 m² per person), more than a third of them were children under 18 (13 909 children). Regarding the uncertain housing category¹⁹, it was estimated that 191,500 people living in 97,000 households in the country fall into this category.

The 2022 census included a comparison of the numbers of homeless people in the roofless category (people sleeping outdoors and in night shelters) and some people in the houseless category (people in shelters) with the 2019 results. According to this comparison, the total number of people without a roof in April 2022 was about 3% higher than in 2019. Thus, in 2022, there were approximately 12,000 people living without a roof in the Czech Republic, compared to 11,600 in April 2019. According to the 2019 Census, the number of persons in shelters was 6 135, while in 2021 the Population and Housing Census counted 5 981 persons. Given that the 2019 data was based on partial extrapolation, it can be assumed that the number of people in shelters was approximately the same in 2019 and 2022 (SocioFactor, 2022).

The extent of the problem of substandard housing can also be illustrated by data from the CZSO Living Conditions Survey (2023a). There is a housing deprivation indicator which defines housing deprived people as those living in households that have at least one of the following problems: humidity, bathroom not part of the dwelling, lack of light, no flushing toilet in the flat/house. According to the survey, 7.5% of the population of the Czech Republic lived in a household with at least one of these problems (769 000 people). People at risk of poverty or social exclusion were significantly more likely to be affected (12.6% vs. 6.8% without being at risk). This is confirmed by data from the survey of the Department (Agency) for Social Inclusion of the Ministry of Regional Development SEL-SILC, which shows that while in 2020 the problem concerned 8.4% of the Czech population, the state of housing deprivation was identified in the case of 31% of people living in SEL (Lang, 2020).

Given that existing surveys attempting to quantify the housing need of the Czech population are based on different methodological procedures and different data sources, it is currently not possible to track the overall trend in the number of people in housing deprivation, and, with the exception mentioned above, even in the individual categories of homelessness and housing deprivation according to the ETHOS typology. A study by the Initiative for Housing (2021) attempted to estimate the total number of people in housing deprivation, according to which there are between 35 000 and 62 000 households in housing deprivation, with 20 000 and 51 000 children under the age of 18 growing up in them. Another 130,000 to 190,000 households with approximately 100,000 children are at risk of losing their housing. And another approximately 300 to 350 thousand households, a third of which are households of the elderly, suffer from excessive housing costs (spending more than 40% of their income on housing). In total, approximately half

¹⁹ The category of uncertain housing included all subcategories according to the ETHOS typology, i.e. persons temporarily living with relatives or friends (no other housing option); persons in subletting (no other housing option); persons living in an apartment without a legal reason; persons in an illegally occupied building; persons who were evicted from a rented flat; persons at risk of eviction from their own flat; persons at risk of domestic violence - police recorded cases - victims.

a million Czech households with just under a million people face one of the three housing problems mentioned above.

The study also names a growing housing problem that elderly people have been faced with in recent years. According to the data as of 2021, there were at least 5 500 persons aged 65 and over living in 4.7 thousand households in housing deprivation (usually single person households). Most of them, four out of ten, live in hostels. Most of the elderly in hostels probably pay for their stay from their pension, as only 26% of them receive a housing benefit supplement. According to this report by the Housing Initiative (2021), the number of elderly people in hostels is growing, and the number of elderly people in shelters increased by a quarter (from 230 to 290) in just two years between 2018 and 2020.

The Census of Persons from Selected ETHOS Typology Categories research referred to above, as well as the 2021 Housing Exclusion Report, based their identification of people in inadequate housing on a review of socially excluded localities based on concentrations of housing benefit recipients. The researchers used an inventory of socially excluded localities and looked for dwellings that met the criteria for inadequate housing. Lower quality housing is concentrated in socially excluded localities, which has a consequent impact on the quality of life of its inhabitants.

1.5 Territorial dimensions of social exclusion

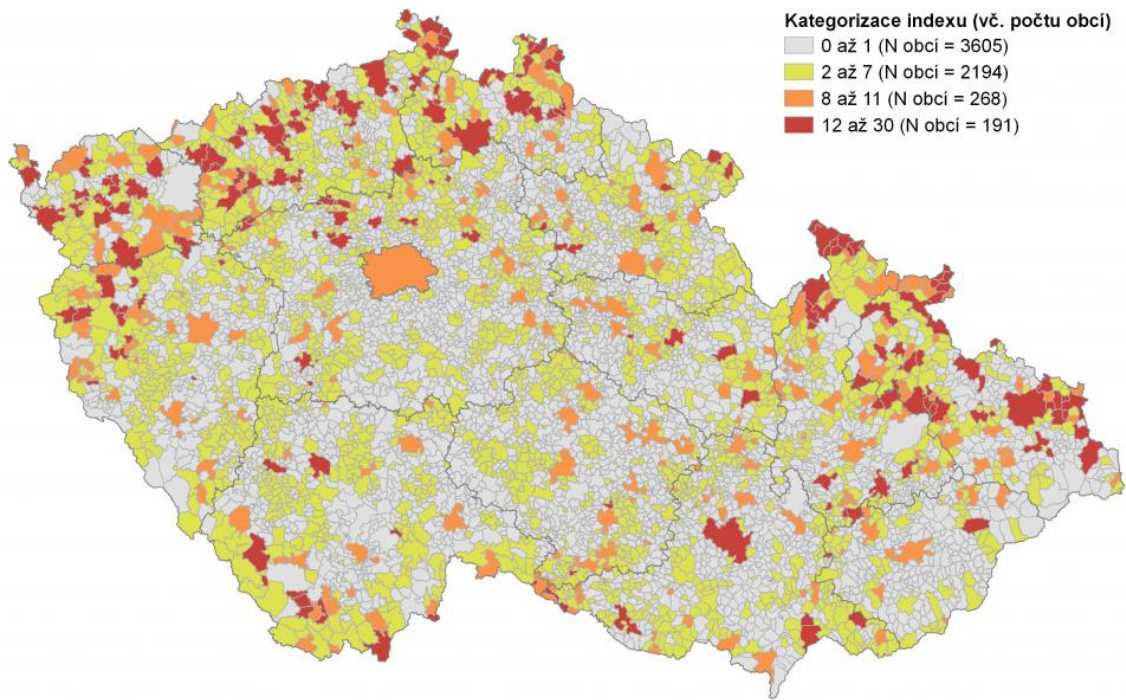
Poverty and social exclusion in the Czech Republic are significantly concentrated in certain localities. In 2020, a research team led by prof. RNDr. Luděk Sýkora created a map of localities of social exclusion and segregation.²⁰ The map enables differentiation at the level of basic settlement units. Between June 2015 and December 2020, the number of localities of a concentration of persons at risk of social exclusion decreased from 515 to 408 localities, but the number of localities with extreme levels of concentration increased from 35 to 41. While the number of persons assessed jointly (in a household) for subsistence allowance has generally been decreasing, the number of such persons living in areas of extreme concentration has been increasing (Sýkora, 2022).

Another definition of areas with a greater degree of social exclusion is offered by the so-called Social Exclusion Index based on the Methodology for assessing the degree and extent of social exclusion in a territory, which was developed by the Department (Agency) for Social Inclusion of the Ministry of Regional Development (Lang & Matoušek, 2020). According to data based on this source, the highest rate of social exclusion in 2021 was found in 175 municipalities of the Czech Republic (MoRD, 2021). Data from the EU-SILC survey can only offer a differentiation by regions of the Czech Republic (see Map 1). The comparison of the situation depicted in the map of the risk of poverty or social exclusion according to the data from this survey with the situation described by the Social Exclusion Index coincides in many respects (e.g. significant concentration of the problem in the Karlovy Vary, Ústí nad Labem and Moravian-Silesian regions), but in some respects it also differs (e.g. small number of socially excluded localities in Vysočina, where EU-SILC indicates a relatively high percentage of people at risk). These differences are due to the omission of people living outside standard housing in the EU-SILC survey and the use of primarily administrative data in the Social Exclusion Index.

²⁰ The map was created as an output of the project "Development dynamics of segregation and social exclusion in a territory" supported by the Technology Agency of the Czech Republic within the framework of the Éta programme (project no. TL02000479). The map is available at the following link: https://lokality.page.link/segrepace_op

Map 1: Index of social exclusion in municipalities, 2022

Index sociálního vyloučení v obcích v roce 2022

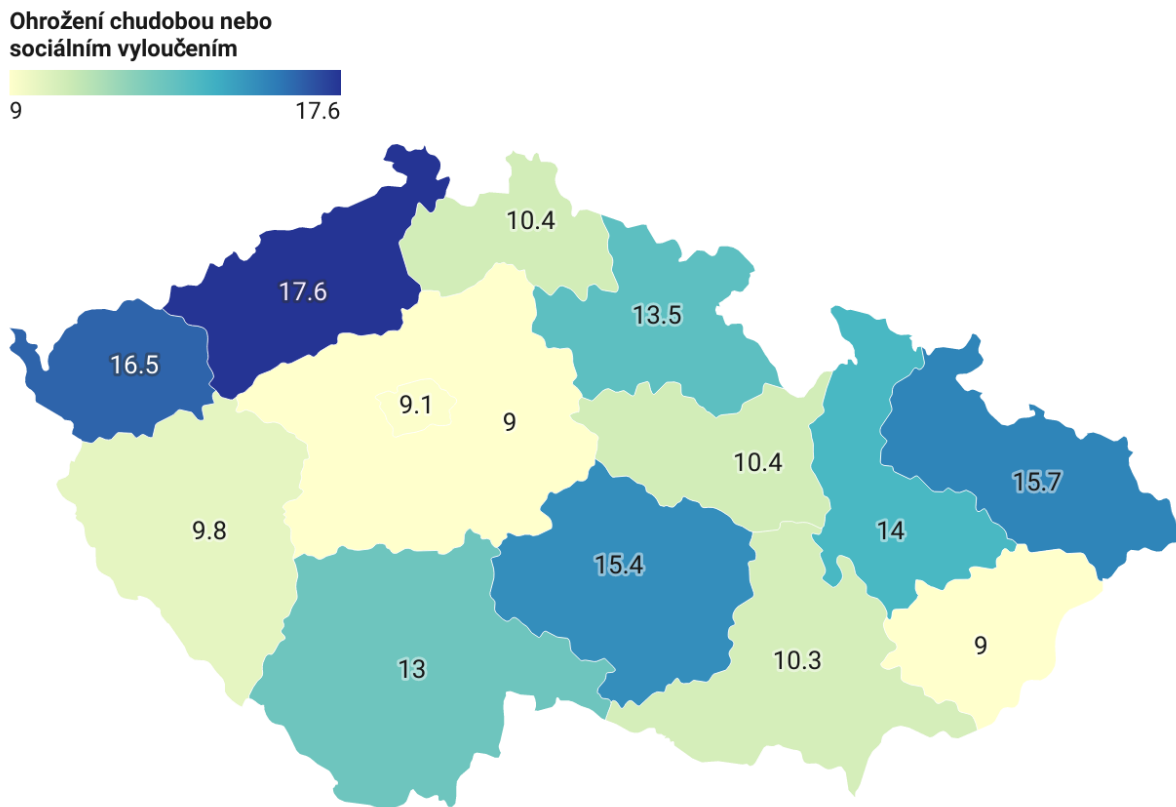


Source: MoRD, 2023

Index sociálního vyloučení v obcích v roce 2022
Kategorizace indexu (vč. počtu obcí)
0 až 1
N obcí

Index of social exclusion in municipalities in 2022
Index categorization (including the number of municipalities)
0 to 1
N of municipalities

Map 2: Risk of poverty or social exclusion in regions of the Czech Republic (%), 2022



Source: CZSO, own calculations

Ohrožení chudobou nebo sociálním vyloučením

At risk of poverty or social exclusion

As a result of the accumulation of negative phenomena related to social exclusion, regions with SEL are generally characterised by a number of problems, including increased crime rates and security problems. Residents of these areas may therefore be at a higher risk of crime.

A 2016 BRIZOLIT project investigation showed that 50.7% of socially excluded residents were victims of crime, while the figure for people outside socially excluded areas was 36.3% (Toušek et al., 2018). These include various types of property and violent crime, as well as crime by organised groups.

The crime rate is also monitored in the crime map, which shows the extent and type of crimes by region, expressed by the so-called crime index²¹. A long-term comparison shows that in the regions with the highest number of SELs, the value of this index is almost double compared to the regions with the most favourable situation. While the Vysočina Region showed a value of 5.8 and the Pardubice Region 6.8 in 2020, the Moravian-Silesian Region showed 10.4 and the Ústí nad Labem Region 12.3. Compared to 2016, there was a decrease in this index in all regions, which, according to the authors, is to some extent influenced by the change in the classification of some crimes (Open Society, 2023b).

In 2018, a survey was conducted in the Ústí nad Labem Region focusing on the lives of the inhabitants of the area, which, among other topics, focused on the subjective perception of safety. The data showed that 28% of respondents did not feel safe in their place of residence. A deeper analysis showed that the degree

²¹ Number of offences detected in the selected period, per 10 000 inhabitants.

of feeling safe was related to the specific area in which the interviewees lived. In the case of areas with SEL, the feeling of safety was significantly lower, for example, in the Ústí and Labem and Děčín areas; the proportion of people who said they did not feel safe was 41%. Almost three quarters of the respondents who reported that they did not feel safe in their place of residence also reported that they perceived tensions between different groups of people living there (Kuchař & Buriánek, 2020).

The higher incidence of crime in socially excluded localities is related to low satisfaction with the work of the police and low trust in the police. According to data from BRIZOLIT, 20.1% of the residents of socially excluded localities were dissatisfied with the activities of the police, while for the general population this figure was 9.2% (Toušek et al., 2018). According to the 2020 SEL-SILC survey, residents of socially excluded localities are higher consumers of alcohol and drugs and more likely to gamble online than the general population. The experience of imprisonment is also more common among residents of socially excluded localities compared to the general population. Higher prevalence of drug and other addictions is associated with higher crime rates (Lang, 2020).

In the EU-SILC data, there is an item asking respondents whether the problem of crime or vandalism occurred in their place of residence. To compare the situation in 2022, a subjective indicator of managing with income was used. It turned out that respondents who found it very difficult to manage with their income were much more likely to report crime or vandalism in their place of residence (11.1%) than respondents who found it very easy to manage with their income (3.5%).

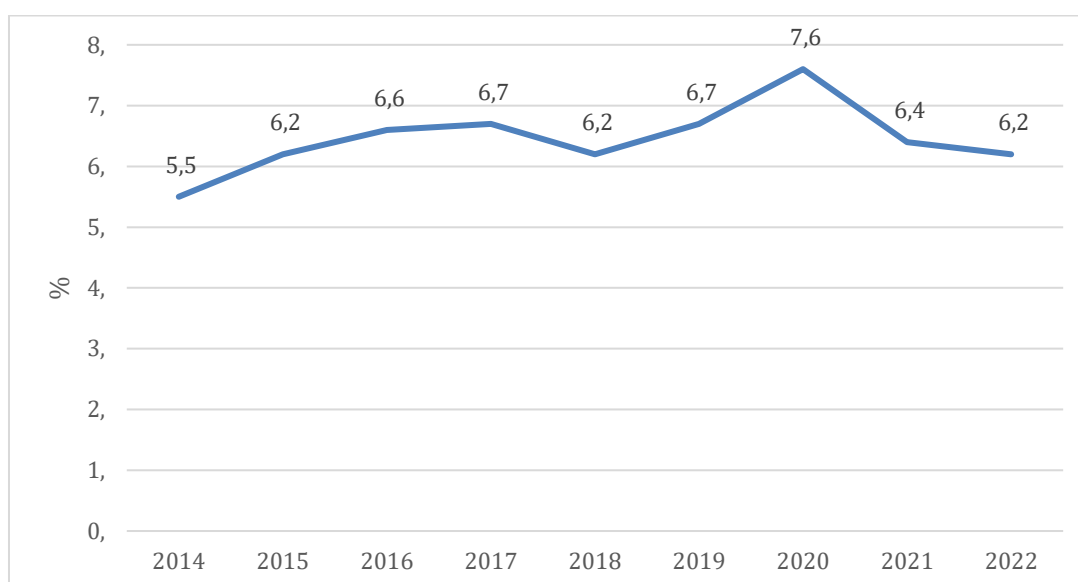
In the case of localities inhabited by people at risk of social exclusion, we can see a combination of high crime rates, a high concentration of people with criminal histories, a higher incidence of drugs and a higher level of distrust in the police.

1.6 Education

In the field of education, early school leaving is the key issue that has the most significant impact on poverty and social exclusion rates. Early school leaving is largely related to the unstable socio-economic situation of the family, and for early leavers it has a clear impact in the form of unemployment and falling into income poverty.

The early school leaving rate includes both those who do not continue their studies after primary school and those who started secondary school but did not complete their studies. As shown by Eurostat data (2023c) presented in the graph below, the early school leaving rate in 2022 was 6.2%, representing a return to pre-2020 levels, which saw an upward spike (the early school leaving rate was 7.6%). The early school leaving rate in secondary education is thus stagnating in the general population. However, there is a fundamental difference between the general population and people at risk of social exclusion – in socially excluded localities, roughly two-thirds of pupils drop out of secondary education (Matoušek, 2018).

Chart 14: Early school leaving rates in (secondary) education, 2014-2022, Czech Republic



Source: Eurostat

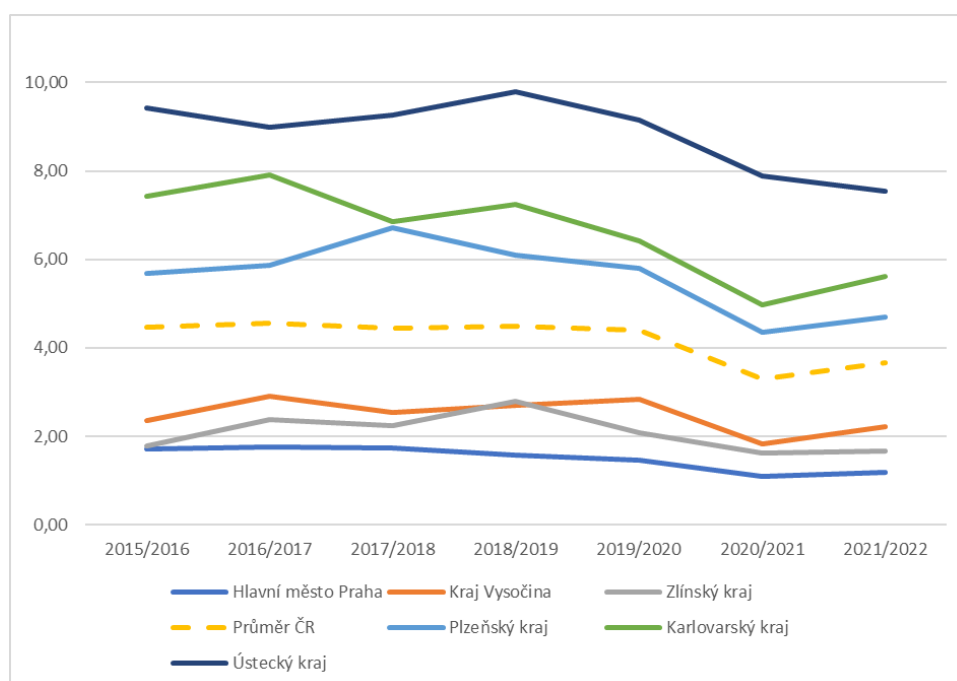
Problems in the field of education in the Czech Republic are often related to disparities in the quality of education, which are manifested at the regional level. It is clear from the surveys that in regions with high levels of social exclusion and a higher number of SELs, pupils perform worse than in other regions when comparing levels of knowledge in different areas. Structurally affected regions with higher levels of social exclusion, such as the Karlovy Vary and Ústí regions, are the worst performers in terms of educational outcomes (MEYS, 2020).

The regional distribution of problems in education is illustrated, for example, by the education map (PAQ Research, 2023), which shows the situation in individual regions of the Czech Republic through an index of educational problems. This index is based on a combination of three variables, which are the non-completion of primary school, high absenteeism and repeating a school year. These data show that the highest rates of educational failure can be identified in the Ústí and Karlovy Vary Regions, where these problems are conditioned by higher levels of social exclusion and poverty in the region. There are also

problems in areas on the periphery of some regions, especially those on state borders or adjacent to poorer counties. These include parts of the Pilsen, Olomouc, South Bohemia and Liberec regions. Then, in some regions, it is possible to identify MEPs that, despite the average situation in the region, show high levels of educational problems. This trend may be due to area-specific problems such as the existence of SELs or problems at the level of the local education system (PAQ Research, 2023). A sample survey of the Roma population carried out by RILSA in 2022 showed that the most common education attained by respondents was primary school (43.9%) and vocational education without a secondary school certificate (30%). 2.6% of the 1,549 respondents attained secondary education with a certificate (Fónadová et al., 2022).

In regions with the highest levels of social exclusion, problems in the field of education are not only related to secondary education, but are already manifested at the level of primary education. The following graph shows the differences in the early school leaving rates from primary education in selected regions. In a long-term comparison, a significant decline in the early school leaving rate from primary education can be observed on average for the entire Czech Republic in the school year 2020/2021, after which the trend began to return to the values reported before this period. In terms of selected regions, the situation follows the trend for the entire Czech Republic, with only the Ústí 37nd Labem Region continuing its downward trend in the 2021/2022 school year. The least favourable situation in this respect in terms of MEP in the school year 2021/2022 was in Bílina (16.0%), Aš (14.3%), and Rumburk (12.6%). In all cases, these are areas with a high number of SELs in their territory.

Chart 15: Proportion of early school leavers – regular classes, regions with the highest and lowest values vs. the average of the Czech Republic



Data source: MEYS

Hlavní město Praha
Kraj Vysočina
Zlínský kraj
Průměr ČR
Plzeňský kraj
Karlovarský kraj
Ústecký kraj

The Region City of Prague
Vysočina Region
Zlín Region
Average for the Czech republic
Pilsen Region
Karlovy Vary Region
Ústí nad Labem Region

Educational attainment has a major impact on the economic and social situation of individuals and society as a whole. According to the CZSO survey (2023a), 22.4% of households with income below the poverty line were headed by a person who had only primary education, which is significantly higher than for households with income above the poverty line (4.6%). This fact is also illustrated by the results of the Census of Persons from Selected ETHOS Typology Categories, according to which 51.3% of persons in hostels or inadequate housing had only completed primary education, and a further 6.3% had not even completed primary school (SocioFactor, 2022).

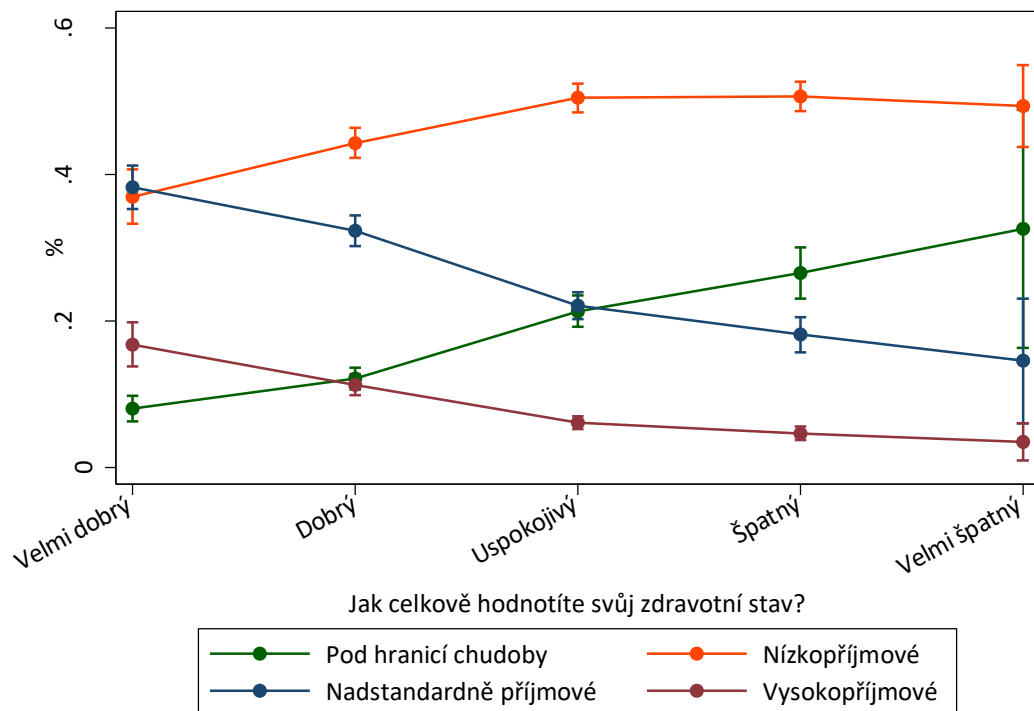
1.7 Health

Health is also an important dimension in the context of poverty and social exclusion. Reduced quality of life due to health problems, together with poorer access to health care, have been reported as one of the characteristics of a state of social exclusion (Tulupová et al., 2020). In this context, there is talk of health inequalities, which means differences in health status related to socio-economic aspects (e.g. low income, material deprivation, living in SEL). Improvement in this area is thus considered one of the prerequisites for ensuring a satisfactory standard of living (Šmoldas & Lang, 2021).

The most common diseases in the Czech Republic are hypertension (more than a quarter of the adult population in 2019) and high cholesterol. These problems arise mainly as a result of an unhealthy lifestyle. Between 2014 and 2019, there was an increase in the number of people with obesity, while other risk factors such as smoking saw a slight decrease (Pištorová, 2021). Available data show a higher prevalence of these factors and a poorer health condition of people at risk of poverty and social exclusion. For example, the document of the State Institute of Public Health entitled *Promoting Health in Excluded Localities - Reducing Health Inequalities* states the overall deteriorated condition of people who are socially excluded or at risk of social exclusion, which is characterized in particular by a shorter life expectancy of 10-15 years compared to the majority population, a higher incidence of diseases of the cardiovascular system, a higher infant mortality rate or a higher incidence of infectious communicable diseases. The authors of the document attribute this primarily to substandard housing (high or low humidity, little light and sunlight, high noise levels, low temperatures in living rooms, high ambient dust levels, rodents and insects, overcrowding, inadequate drinking water supply and waste disposal). According to research, some groups at risk of social exclusion have higher levels of risks associated with unhealthy lifestyles (Janata, 2015). According to research focusing on the Roma as one of the groups at risk, the proportion of smokers in this population is 74%, while in the majority population it is less than 28%. The consequence of poorer health is a shorter life expectancy of 10-15 years (Fónadová et al., 2022). According to research by the EU Agency for Fundamental Rights, the difference in life expectancy between Roma and the majority population in the Czech Republic is almost 12 years for women and 13.4 years for men (European Union Agency for Fundamental Rights, 2022). Statements on subjective health assessment did not show significantly unfavourable values in the case of Roma (see the RILSA survey) compared to the general population. For example, the proportion of people who declared long-term limitations in their normal activities (for more than 6 months) was 26.9% for Roma, and 25% for the general population. However, it is necessary to take into account the lower life expectancy of Roma, i.e. lower average age, which should correspond to lower values of limitations in activities due to health.

The information on the objective health of socially excluded persons can be supplemented and compared with a subjective health assessment (self-evaluation of health) of respondents to the *Life during a pandemic/a priceless life survey* (see Figure 16). People with low income and income below the poverty line were under-represented in the category of people with very good health. Conversely, those with poor and very poor health were over-represented among people with income below the poverty line.

Chart 16: Income poverty by subjective health, Czech Republic, 2022-2023



Source: Life during a pandemic/A priceless life, PAQ Research, N (pers.) = 6 138, 95% confidence intervals

Velmi dobrý	Very good
Dobrý	Good
Uspokojivý	Satisfactory
Špatný	Poor
Velmi špatný	Very poor
Jak celkově hodnotíte svůj zdravotní stav?	How would you asses your overall health?
Pod hranicí chudoby	Below the income poverty line
Nízkopříjmové	Low-income category
Nadstandardně příjmové	Upper-income category
Vysokopříjmové	High-income category

One of the factors influencing the health status of people at risk of poverty and social exclusion may be the availability of health care, as its inaccessibility may further exacerbate health inequalities between the general population and the socially excluded. The problem of low access to health care often affects peripheral areas with high levels of unemployment and social exclusion. (Jeseník district, Karlovy Vary region) (Bernard & Šimon, 2017).

The situation in the Frýdlant district is an example of problematic access to health care. According to research (Baltag, 2018), there is a shortage of paediatricians and dentists in the region and people have to travel to Liberec to see them. For the socially excluded, however, the lack of the finances needed to travel can lead to the postponement of visits to doctors. Deteriorating access to health care can have the greatest impact on families and people who are socially excluded or at risk of social exclusion, the elderly or single mothers.

Worsened access to care also affects SEL. Research conducted on this issue shows a lack of access to medical care, a low level of health literacy of the population of SEL in the area of prevention, and a lack of financial resources for care and medicines that are not covered by health insurance. One of the

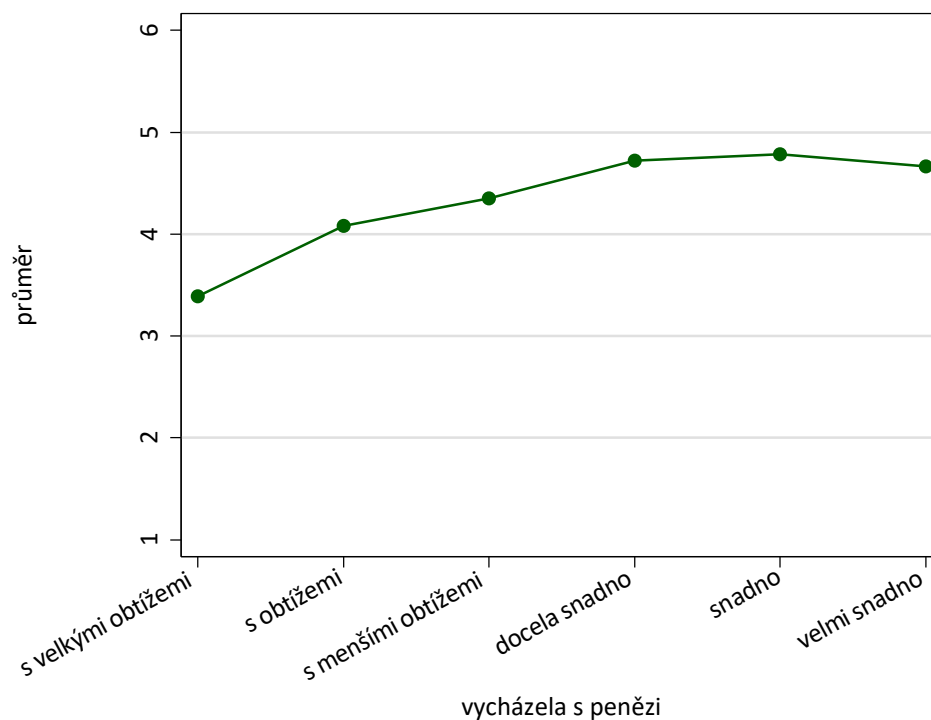
consequences is the lower use of outpatient health care. An example of this is a survey focused on the health care of people in the SEL, which found, for example, a lower rate of use of general practitioner care, which is half that of the general population. The RILSA survey (Fónadová et al., 2022) showed that 15.6% of the Roma have an unmet need for GP services, compared to 2.5% of the general population. The unmet need for dental care affected 25.2% of the Roma population, compared to 2.7% of the general population.

Health is closely linked to socio-economic factors, which include other dimensions of social exclusion such as poverty, unemployment or lack of education, as well as the environment in which people live. In particular, these conditions affect more vulnerable groups such as children, the elderly, the disabled and the homeless.

1.8 Participation

One of the characteristics of social exclusion is a lower level of participation in normal social relations and institutions, as well as in the political life of society as a whole. A crucial factor of participation in public life and one of the indicators of social cohesion is trust in other people (Uslaner, 2002; Putnam, 2000). As an analysis of data from the annual CZSO Living Conditions Survey shows, trust in other people depends to a large extent on socio-economic status. According to this analysis, people who found it very difficult to manage financially had significantly less trust in other people than people who found it easy to manage financially (see Figure 17).

Chart 17: Level of trust in other people by money management, Czech Republic, 2022



Source: EU-SILC, own calculations

Průměr	Average
S velkými obtížemi	Very difficult
S obtížemi	Difficult
S menšími obtížemi	Quite difficult
Docela snadno	Pretty good
Snadno	Good
Velmi snadno	Very good
Vycházela s penězi	Make ends meet

Participation or greater involvement in social institutions is hindered by barriers, including a sense of exclusion from society and mistrust of others. The level of participation in informal social activities can be illustrated, for example, by data tracking participation in volunteer activities. While 8.4% of those at risk of poverty and social exclusion were involved in informal voluntary activities, the proportion of those not at risk was 12.7%). The same was true for the level of involvement in volunteering, in the sense of unpaid activity carried out for a formal organisation, club or society. While 6.9% of those at risk of poverty and social exclusion participate, the figure for those not at risk was 10.7%. According to an analysis of data from the CZSO (2023a) Living Conditions Survey, it appears that involvement in volunteer activities is closely related to feelings of exclusion from society. Of those at risk of income poverty and social exclusion who were involved in formally organised volunteering, only 2.3% felt this way. Conversely, of those at risk of income poverty and social exclusion who did not participate in these voluntary activities, 13.3% felt excluded from society. Participation in volunteer activities helps people at risk to build their social network and maintain new contacts that have the potential to improve their situation and reduce their sense of exclusion from society.

Another indicator of participation in social life is trust in public institutions. It is also consistently lower among selected groups of socially excluded persons and persons at risk of social exclusion than in the general population. Data from a research survey conducted by the EU Agency for Fundamental Rights show that people who self-identify as members of the Roma ethnic minority in the Czech Republic have much less confidence in the Czech legal system than the majority society. Of the total population of the Czech Republic, 54% of people trust the legal system, but only 22% of the Roma population in 2021 did so. At the same time, trust in the rule of law among the Roma population declined from 31% to 22% between 2016 and 2021. An even greater difference can be observed in the case of trust in the police. The rate for Czech Roma decreased from 33% to 19 % between 2016 and 2021. In the Czech society in general, 75% of people trusted the police in 2021. Trust in the police is similarly low among SEL residents. According to the most recent research that focused on this issue, in 2016, more than a quarter (26.2%) of residents of socially excluded localities did not trust the police, while only 13.2% of the general population did not trust the police (European Union Agency for Fundamental Rights, 2022).

Low levels of political participation are also an important source and consequence of social exclusion. In data from various surveys, this is reflected, for example, by low voter turnout among excluded groups of people and people living in socially excluded localities. In the general population of the Czech Republic, after a decline compared to the turnout in the parliamentary elections in the 1990s (74% in 1998), this turnout has rather stagnated since 2002 at around two-thirds of active voters. 65.4% of eligible voters took part in the elections to the Chamber of Deputies of the Parliament of the Czech Republic. However, as the results of the survey conducted by the Research Institute of Labour and Social Affairs show, in the case of the Roma population, the proportion of people who voted or stated that they voted in these elections was only 19% of the legal voters (Fónadová et al., 2022).

Exclusion from access to civil rights is one of the forms of reduced participation in the ordinary life of society. Equal access to rights is an essential factor in reducing social exclusion and strengthening social cohesion. To ensure equal access to rights, public institutions must ensure a level playing field for disadvantaged groups and effectively prevent all forms of discrimination.

Socially excluded people and people living in socially excluded localities are particularly likely to face various forms of discrimination. According to the Survey of Living Conditions of Residents of Socially

Excluded Localities SEL-SILC, more than one-fifth of the residents of SEL have experienced discrimination (e.g., because of skin colour, age, gender, sexual orientation, disability, ethnic origin, religion, etc.) in several of the areas surveyed over the past 5 years. 36% have been discriminated against when looking for a job, 28% during work activities (employment, business), 29% when trying to rent or buy an apartment or house, 28% when contacting administrative authorities or public services and 24% when trying to visit a nightclub, bar, restaurant or hotel, while using public transport, visiting or trying to enter a shop. 19% reported an experience of discrimination when using a health service (e.g. from a doctor, nurse, dentist, hospital, emergency room or health centre) (Turnerová, 2022).

Roma represent a significant part of the population in the SEL. This ethnic group also has the highest number of experiences of discrimination in the above-mentioned areas. Almost half of the Roma people surveyed by the EU Agency for Human Rights in the Czech Republic in 2021 reported having experienced discrimination on the basis of their ethnicity in the past 12 months, an increase of 16 percentage points (from 32%) compared to 2016 (European Union Agency for Fundamental Rights, 2022).

Other forms of discrimination and unequal access to civil rights in practice, as well as related problems, such as the failure to report discriminatory conduct, are further discussed in the following chapter.

1.9. Equalisation of opportunities

The Social Inclusion Strategy builds on the basic principles of human rights protection, which define the obligations arising from the constitutional order (especially the Charter of Fundamental Rights and Freedoms) and from international treaties by which the Czech Republic is bound. Human rights, as the basis of a democratic rule of law, are one of the primary sources and barriers to the exercise of public power and all activities that the State and other actors (local self-governments, private entities) carry out in the exercise of their powers.²² Within the framework of social inclusion, respect for the human rights of persons plays a key role as an inspiring and executive source and at the same time as a content corrective for the individual measures taken. Social inclusion based on human rights, respect and their application thus contributes to the development of every human individual and a society as a whole of equal and free human beings with equal rights and obligations, and thus to the development of a modern democratic rule of law as such.²³

Social inclusion's task is to contribute to the protection and exercise of human rights. In accordance with its subject of activity, it is primarily a matter of helping socially excluded persons or members of vulnerable and disadvantaged groups so that they can exercise their rights equally to others. The starting point for social inclusion is thus the human dignity of a person which is given to the person from birth for their whole life and is the same for every person.²⁴ This equality in dignity and rights means equal respect for every human individual, regardless of external circumstances and their personal characteristics and behaviour. Social inclusion should thus aim to enable everyone to fully enjoy their rights and freedoms as full members of society, and to provide assistance and support to people who are socially excluded or disadvantaged on the basis of their ethnicity, age, origin, disability and other reasons, and to provide assistance and support in removing restrictions and developing their personal potential. This also promotes the human freedom of each individual to do everything that the law does not prohibit and to not be forced to do anything that the law does not impose, while the restrictions must pursue a legitimate aim and be proportionate.²⁵

Social inclusion is primarily concerned with economic, social and cultural rights such as the right to work, decent working conditions, social security, emergency social assistance, health and social services and education. These rights are a certain basis for an individual's social life and their successful integration into society. However, the social inclusion of the individual must respect and must not neglect their other civil and political rights such as the right to life, the protection of liberty and bodily integrity from ill-treatment, privacy and family life, property, freedom of religion, movement and residence, expression, assembly or association and the right to participate in public life. The modern democratic rule of law is based on the indivisibility and interconnectedness of human rights. Civil and political rights have their strong and significant social context and therefore, in addition to one of the objectives of social inclusion, they also form a measure and value corrective of individual inclusive measures.²⁶

All measures must respect the prohibition of discrimination on grounds of sex, race, skin colour, language, religion or belief, political or other opinion, national or social origin, membership of a national or ethnic minority, property, gender or other status, such as age or disability. On the contrary, certain specific

²² See the Preamble to the Constitution and the Charter of Fundamental Rights and Freedoms.

²³ See "The Human Rights Agenda in the Everyday Practice of a Social Worker" (MoLSA, 2015, p. 8).

²⁴ See Article 1 of the Charter of Fundamental Rights and Freedoms.

²⁵ See Articles 2(3) and (4) of the Constitution and Articles 2(2) and (3) of the Charter.

²⁶ See "The Human Rights Agenda in the Everyday Practice of a Social Worker" (MoLSA, 2015, p. 8).

groups, such as children, the elderly, members of ethnic and sexual minorities, foreigners or persons with disabilities, persons with a criminal record, etc., require certain specific supportive procedures in order to be able to exercise their rights on an equal basis with others. Social inclusion's task is then to help them achieve the same quality of life as other people through these procedures.

Protection against discrimination and the right to equal treatment are governed primarily by Act No 198/2009, on equal treatment and legal means of protection against discrimination and amending certain acts (the Anti-Discrimination Act), as amended, which defines areas of non-discrimination and prohibited discriminatory grounds, forms of discrimination (direct and indirect discrimination, harassment, incitement, persecution, etc.), as well as legal means of protection against discrimination for its victims. The Public Defender of Rights has an important role to play in protecting against discrimination, providing methodological assistance to victims of discrimination in initiating proceedings for discrimination, issuing recommendations and publishing reports, and conducting research on discrimination.

Persons who believe that their rights to equal treatment have been violated can enforce their rights before courts and may also refer the matter to the Public Defender of Rights (Ombudsman), who is obliged to provide methodological assistance to victims of discrimination when filing petitions to initiate proceedings for discrimination. The Ombudsman's task is to protect persons from the actions of the authorities and other institutions when they are unlawful, inconsistent with the principles of democratic rule of law and good governance, as well as from their inaction; in addition to other specific areas, the Ombudsman also has powers in the area of equal treatment and protection against discrimination.²⁷

However, as the analysis of the Ombudsman's Office (2015) shows, non-reporting of discrimination appears to be a widespread problem, which is largely related to the citizens' low confidence in the functioning of State institutions (and the relatively low number of court decisions in discrimination-related cases). It is estimated that only about 10% of cases of discrimination are reported, and as the study shows, the lower the socio-economic status and education of potential complainants, the more likely it is that discrimination will not be reported.²⁸ The analysis thus reveals the "disparity between the frequent incidence of subjectively perceived discrimination (for various reasons)" (Office of the Ombudsman, 2015, p. 4), as pointed out by representative research at national and international level, and the low number of complaints of discrimination addressed to the Ombudsman and legal authorities and the low number of court proceedings.

In 2019, the Ombudsman's Office dealt with 403 complaints concerning discrimination. Of these complaints, discrimination was found in sixteen cases. Eleven complaints were classified as direct discrimination, four as indirect discrimination and one as another form of discrimination such as persecution, harassment, instruction or incitement to discrimination. Most often, people felt discriminated against in the area of work and employment, access to goods and services, housing, education or in areas other than those defined by the Anti-Discrimination Act. Of the reasons defined by the Act, the most common reason was disability, followed by gender, age, and attributed or declared race and ethnicity. There were also 44 cases in which discrimination was alleged on multiple grounds at once (OG CR, 2020).

²⁷ See Act No 349/1999, on the public defender of rights, as amended.

²⁸ For example, according to the results of the 2012 Eurobarometer, up to 19% of respondents from the Czech Republic felt discriminated against in the past twelve months (mainly due to age and gender), while up to 43% of respondents witnessed discrimination during the same period.

The legal prohibition of discrimination and the enforcement of this prohibition is only one of the tools to prevent discrimination and build equal opportunities for citizens and persons located in the Czech Republic. Along with the enforcement and application of the legal norm, it is necessary to promote changes in the setting and functioning of society, economy and politics, which will lead not only to the elimination of direct discriminatory behaviour, but also to the elimination of indirect forms of discrimination, especially in their structural form. Structural discrimination, which, rather than acting in relation to a particular individual, mobilises a subordinate position or a lower status of a particular group to which the individual is situated, can be both obvious and covert. It is characterised by the application of a wide range of practices and policies based on seemingly neutral norms and values widespread and shared by the dominant culture, but which do not take into account the previously established inequalities and thus reproduce systematic discrimination or limitation of opportunities of certain persons or groups of persons. In relation to the Roma, the European Parliament uses the term "structural anti-Gypsyism", which manifests itself in the form of "individual and institutional neglect, discrimination, inequality, disempowerment, belittling, othering and scapegoating, stigmatization and hate speech, and making them into victims of violence, extreme poverty and profound social exclusion." (European Parliament, 2017, p. 4).

Another, no less serious form of structural discrimination in the Czech Republic is the introduction of "zero tolerance policies", which are sets of measures punishing minor offences aimed at reducing crime.²⁹ In the Czech Republic, these policies were implemented, for example, in Litvínov, Bohumín and Duchcov, and their common link was targeting the "inadaptable population", which in practice mainly affected the Roma population.³⁰ The adopted policy measures show a high degree of segregation, discrimination and social stigmatisation of a certain social group, which are often, as in this case, the Roma.

Structural discrimination can take the form of a seemingly neutral setting of certain institutions, as shown, for example, by research by Glumbíková et al. (2017), when the inhabitants of shelters and more generally people facing housing deprivation in the Czech Republic are confronted with an "unpleasant demeanour", "distant approach", making light of their health situation and rejection by doctors and health professionals (precisely because they are people stigmatised by their "life on the edge" and homeless). Another form of structural discrimination is pointed out by research within the BRIZOLIT project,³¹ supported by the Ministry of the Interior, which unmasks widespread stereotypes about crime in excluded localities. Research shows that excluded localities are currently the last "development" stage of ethnic segregation³² in Czech society, and thus that structural discrimination against the Roma has taken place through political and economic changes and processes (e.g. commodification of housing) in recent decades. As far as structural discrimination is concerned, the field of education also plays a major role. Even ten years after the verdict of the European Court of Human Rights, which condemned the Czech Republic for indirect discrimination against Roma children in the Ostrava region in access to education, spatial segregation in education based on attributed ethnicity still represents a significant problem, as evidenced by the Ombudsman's findings (Office of the Ombudsman, 2018), Government documents, research and analyses by non-governmental entities (European Union Agency for Fundamental Rights, 2016; Amnesty

²⁹ In the context of the Czech Republic, these measures often apply to the inhabitants of SELs.

³⁰ For more information, see e.g. the publication: Analysis of zero tolerance policies in Litvínov and Duchcov, Lucie Trlifajová, Filip Pospíšil, Petr Kučera, Bára Matysová, Blanka Kissová, SPOT – Centre for Social Issues, z.s., 2015

³¹ See e.g. Toušek et al., 2018.

³² Segregation means the separation of different social groups into spatial areas, in the context of education also the placement of children in schools or classes on the basis of ethnic origin or social status. If segregation disadvantages people on the basis of a protected discriminatory ground, it is discrimination.

International, 2015). Therefore, education continues to be one of the areas in which people are discriminated against, which results in the reproduction or deepening of social exclusion and poverty.

Discrimination in the Czech Republic is also present in the form of unfriendly treatment of citizens of other nationalities. As stated by the UN Committee on the Elimination of Racial Discrimination in the final report of the 2019 survey on the Czech Republic, there are more forms of discriminatory tendencies with regard to migrants, to which increased attention must be paid. "In the area of treatment of migrants, the Committee is primarily critical of hate speech³³ against refugees, including hate speech from top politicians, cases of intimidation of journalists, detention of families with children, including families waiting for the "Dublin transfer" – the Committee urges the Czech Republic to find more suitable alternatives to detention, also discriminatory access to health care related to inability to obtain public health insurance. The Committee also criticises the absence of a procedure for stateless persons and their difficulties in obtaining personal documents, as has long been pointed out by the Organization for Aid to Refugees (2019).

One of the specific forms of discrimination occurring in the Czech Republic is anti-Gypsyism. In the majority society, anti-Gypsyism affects the number of citizens declared as being of Roma nationality. In the last Population and Housing Census in 2021, only 4 458 citizens declared themselves exclusively of Roma nationality, and another 17 233 people in combination with another nationality (CZSO, 2021). Qualified estimates of the number of Roma living permanently on the territory of the Czech Republic are around 250-300 000. The reasons for the low number of persons registered as Roma can be seen mainly in the fact that, given their historical experience, Roma are concerned about declaring their affiliation. At the same time, there are currently fears of growing hate violence and prejudiced hatred, which Roma face more than other national minorities in the Czech Republic. The number of citizens registered as Roma is further influenced by their experience with ethnic discrimination or concerns about discrimination in access to housing, employment, education and health care. It should be noted that Roma affiliation in the Czech Republic is a stigma for the citizen and places a number of obstacles in their everyday life (OG CR, 2015a).

The high degree of anti-Gypsyism can be illustrated by attitudes and assessments of the quality of coexistence between the majority society and the Roma. For a long time, according to research, the Roma have been the least likeable national minority. In the Czech Republic, coexistence with the Roma is assessed as bad by the majority society (Public Opinion Research Centre IS CAS, 2019). The growing antipathy towards the Roma is partly caused by the fact that the society accuses the Roma of being economic and social parasites. The prevailing opinion in society is that the Roma abuse the State social system and the system of EU financial subsidies. The opinion or stereotype of the economic and social parasitism of the Roma causes an increase in the number of victims of hate violence (Supreme Public Prosecutor's Office, 2019).

Last but not least, it is necessary to emphasise the cumulative and overlapping nature of discrimination, i.e. what is called multiple discrimination. In the Czech context, this issue is pointed out, for example, by a study of ageing migrant women who face discrimination with regard to their (ethnic) origin, gender, social status and age (Hradečná et al., 2016).

³³ Hate speech means hateful rhetoric or hateful speech towards other people or target groups, it can be said that it is any form of speech that incites hatred, xenophobia, etc. (note: author).

2. Application of basic principles

Social exclusion affects the whole of society; one of its negative consequences is the erosion of social cohesion. Social cohesion refers to the status of shared identity, loyalty and solidarity in society. It expresses society's ability to provide suitable living conditions for all its members. Cohesion is not a simple product of civic, spatial or territorial belonging, but rather that of participation in the socio-economic dynamics and governance. Social cohesion is also linked to territorial cohesion, as the widespread disruption of social cohesion negatively affects the functional integration of a given territory in a globalised economy and society and the possibilities for its cooperation with other entities at regional, national or European level.

To reduce the risks that social exclusion poses to social cohesion, it is necessary to increase the effectiveness of interventions implemented to weaken the processes of social exclusion and reduce the territorial concentration of social exclusion via a conceptual approach. Furthermore, their coherence is essential and they must be created on the basis of evaluating their impacts and their effectiveness in relation to the prevention and solution of social exclusion (evidence-based policy, informed-based policy).

The understanding of social inclusion as processes and policies aimed at ensuring social and territorial cohesion implies the basic principles for setting public policy objectives and instruments:

- It is a matter of guaranteeing equal opportunities for individuals, regardless of individual characteristics or local contexts;
- Ensuring the concentration and coordination of activities promoting social inclusion is essential for areas with a large number of social exclusion issues;
- In the context of society as a whole, a simultaneous emphasis on the objective and subjective dimensions of social cohesion is essential;
- Mainstreaming social inclusion and cross-cutting this perspective in all relevant policies is essential for the effectiveness and economy of public policies;
- In the implementation of social inclusion policy, it is essential to apply a perspective of gender equality and take into account the specific needs of women and men.

2.1 Support for equal opportunities

Promoting and supporting social inclusion, or preventing or reducing social exclusion of various vulnerable groups of people plays an irreplaceable role in the modern approach to solving the problems of these groups.

The general objectives of social inclusion also include ensuring equal access to all resources, rights, goods and services. The principle of equal treatment, or equalisation of opportunities and non-discrimination must be integral to social inclusion, which leads to improved conditions for active participation by the persons concerned and their integration into society.

Objective 2.1.a: Promoting equal access of socially excluded persons or persons at risk of social exclusion and persons with different types of disadvantage to public services.

Increase civic awareness about socially excluded persons or persons at risk of social exclusion in terms of basic competencies and legal awareness – support active volunteering in this area. Increase public awareness about the issue of social exclusion. Support the reduction of inequalities affecting people with various types of disadvantage in society, such as people with disabilities, migrants, minorities (including marginalised groups such as the Roma). Reduce the number of barriers in the public space – in terms of physical, orientation and communication barriers, as well as in terms of stereotyping of certain groups or persons (e.g. elderly, Roma, people with disabilities, families with children, persons in prison and after release). Promote gender equality, especially in the areas of the labour market, equal pay, domestic and gender-based violence between women and men in family and social policy. Increase the awareness of public administration employees at all levels and local government about the negative consequences of not ensuring equal access for socially excluded persons or persons at risk of social exclusion and about the impact of direct or indirect discrimination.

2.2 Promoting social inclusion at local and regional level

Significant territorial disparities in the concentration of social exclusion, which exist at both regional and local level (see Chapter 1.5), require territory-differentiated policies to address them. Territorially focused policies in places with the greatest concentration of issues require a sufficient concentration of financial, organisational and other resources, a supra-sectoral approach and the multidisciplinary interconnection of relevant entities and long-term strategic management.

Measures will be based on supporting the application of an evidence-based approach to the regional and local level and on the creation of local partnerships and social inclusion platforms. Their objective will be the development of socially inclusive local public policies and approaches at the level of local self-governments, including the removal of barriers to the implementation of pro-inclusive public policies.

Objective 2.2.a: Create functional systems of social inclusion at local and regional levels in areas with the highest concentration of socially excluded localities and social exclusion of at-risk persons.

Actively link the tighter cooperation between self-governing bodies of regions and municipalities and State administration bodies at all levels, including linking the local government with the LO CR. Emphasise the regional perspective with a focus on areas with a higher concentration of socially excluded persons or persons at risk of social exclusion. Follow up on the existing system of methodological guidance, education and coordination of municipalities and regions in the field of social inclusion and further develop it through the use of innovative approaches and examples of good practice from the territory.

2.3 Strengthening social cohesion

Indicators based on “objective” parameters of income distribution or material deprivation (despite a number of limitations) show that in the EU context, the Czech Republic is a country with below-average or at most average levels of poverty and social exclusion. Nevertheless, in a number of aspects, especially those related to the “subjective” perception of social inequalities and one’s own position in society, disparities between social groups are deepening. For those who have experience with executions, general (generalised) trust in society and its institutions is reduced and participation in political processes (expressed, for example, by turnout) is minimised. A high proportion of members of minorities face discrimination, which indicates attitudes of a significant proportion of society that are not compatible with social cohesion in the long run. There is also high latency in cases of hate violence against members of minorities (e.g. Roma and Muslims) or disadvantaged groups (e.g. the homeless). The social reproduction of these attitudes is largely independent of the reduction or increase in the “objective” level of material security, although the uncertainty of maintaining one’s current standard of living may contribute to it. Public policies have traditionally focused mainly on “objective” dimensions of poverty and social exclusion (e.g. insurance and non-insurance benefit systems). However, in recent years, attention has also expanded to include “subjective” dimensions. At the UN level, this is the World Happiness Index initiative, which focuses on subjectively declared satisfaction with one’s life.

The concept of social cohesion includes:

- the aspect of social harmony (low level of social conflict in society, low level of social exclusion);
- the aspect of reciprocity and solidarity (collaboration, participation in resources);
- the principle of balance in society (a dignified life for all, equality of opportunities to access resources);
- the aspect of trust (the social climate).

Society is cohesive through functional families and participating communities, decent work, affordable quality health and social care, equal access to culture and an effective education system that enables everyone to achieve their individual maximum education and supports the development of transferable competences. Policies must be based not only on the results of quality scientific knowledge, but also on participation, i.e. the involvement of the public, which has enough quality and comprehensible information. At the same time, the principle of subsidiarity, i.e. decision-making at the lowest possible level, must respect the positions of various social groups. Decisions enforced by force are unsustainable in the long run. If all entities are involved in decision-making, the governance stabilises at all levels, even the lowest ones. The connection between the degree of democratic participation and representation on the one hand and social inequalities, or structural social inequalities, on the other hand, is becoming more obvious every day. The socially weaker participate less and the importance of this factor is growing. All entities need to be involved in strategic planning and management and they must use all of their instruments. Public administrations at all levels must learn to stimulate and moderate ongoing public debate.

A space where different entities can participate together in strategic planning and management, discuss land use, seek agreement and reach compromise should be prepared and created. This debate must also lead to practical results, and ultimately to a decision in the public interest, since it is the public administration that bears the greatest share of responsibility for carrying out the agreed intentions. In parallel with the effective participation and involvement of all entities, the State will support the

development of local communities at various levels (municipalities, city districts or the entire region). A prerequisite for the functioning of a resilient community is the equal status of its members, a sense of belonging, general awareness and the ability to manage failure. Participation is a soft skill that can be learned, and as such it should be included in the education system, including adult education; active volunteering can also contribute positively. The skill of participation may be trained in public libraries, which are a natural part of community life in the regions and offer a number of educational and community projects.

Objective 2.3.a: Effectively reduce the risks to social cohesion posed by social exclusion, at national, local and regional levels, using a conceptual approach to social exclusion. Cover the prevention and response to social exclusion through vertical and horizontal coordination.

Create a functional system that will effectively prevent and weaken social exclusion processes and reduce the territorial concentration of social exclusion. The conceptual approach is based on the application of the results of a systematic study of the phenomena and processes of social exclusion and their form in the context of spatial, social and economic isolation and cultural differences. It is also necessary to follow up by evaluating the impact and effectiveness of policies and partial interventions in the fight against social exclusion, including identifying good and bad practices when making decisions at all levels and in all relevant areas. The measures will build on the Agency's existing activities and will aim to strengthen cooperation between the public administration, the non-public sector, civil society, community and local groups and individuals. The aim is also to interconnect social inclusion policies, in particular minority integration policies (especially Roma integration) and the fight against discrimination. Furthermore, measures will be aimed at ensuring the flexibility of the system so that it can respond to short-term trends and changes in developments in the field of social exclusion and social inclusion and their impact, both at the level of society as a whole and at a local level.

Within the conceptual approach, interconnected instruments will be synergistically applied to effectively prevent and weaken social exclusion processes and reduce the territorial concentration of social exclusion; the instruments will be in particular normative, financial, strategic, planning and project focused, organisational / institutional, process, research, technological, educational, awareness-raising and voluntary-based.

Objective 2.3.b: Strengthen the participation of people who are socially excluded or at risk of social exclusion in decisions to address social exclusion.

Ensure standardisation of procedures in the area of target group participation, enabling socially excluded persons or persons at risk of social exclusion to obtain quality and comprehensible information, to develop their competencies for understanding the phenomena of social exclusion and to lower the threshold of institutional procedures that prevent higher participation. Implement information campaigns, awareness-raising and educational activities in order to reduce barriers to participation. Local communities will be supported so that they strengthen each other on the basis of trust and understanding. Participatory methods focused on the own initiative of the target group (e.g. through the LEADER method, etc.). The specific development needs of the territory will be reflected in the framework of the integrated community development instrument "Community Led Local Development" (CLLD).

2.4 Mainstreaming social inclusion

Mainstreaming social inclusion means including the agenda not only in social policy, but also in policies affecting other aspects of human life and society (social policy, employment, education, health, regional development, culture, justice, security, crime prevention, finance). It is characterised by a change in approach to one that seeks a broader understanding of the problem. The aim is to find the tools to change attitudes and use them to influence existing approaches in various policies.

Evidence-based policy,³⁴ and more generally policy analysis, emphasis on managerial aspects and professional supervision over the implementation of measures and the use of the principles of mainstreaming social inclusion are growing in importance. The application of evidence-based practice can contribute to the positive consequences of proposed policies. Its clear link to research allows an evidence-based policy instrument to significantly support effective and workable policies. In this way, it is possible to increase the credibility of policies and broaden their knowledge base.

Social innovation

Social innovations, i.e. innovations which are social in terms of their purpose and means of achieving them, represent in their current concept “new solutions and, compared to available alternatives, better solutions” (i.e. more effective, more efficient, more sustainable, fairer) that meet pressing social needs, while also creating new social relations or cooperation. Social innovations can include new products, processes, services, organisational arrangements, technologies, ideas, regulations, institutional forms, functions and roles, social movements and other forms of addressing social needs.”³⁵ An example may be the introduction of “housing with support” of social work or engaging people with the experience of homelessness or other form of social disadvantage (e.g. peers, Roma mentors) in addressing the adverse situation of a person or family associated with housing and other social disabilities. In addition to adopting new solutions, there is a need to support the sustainability and further dissemination of already adopted projects/programmes and to assess their social and economic impact. It is important to develop and support new forms of social innovations, and at the same time to support their evaluations in order to determine their impact, or possibly their introduction into common practice.

Risks and barriers

1. Media strengthening the stereotypical perception of the inhabitants of socially excluded localities.
2. Low interest of key persons on whom the social innovation will be targeted (e.g. involving people with experience of homelessness, etc.).

³⁴ Policy analysis - i.e. an analysis of anything that is “policy”, i.e. individual policies such as employment policy or environmental protection policy.

³⁵ KADEŘÁBKOVÁ, Saman: *Guide for the Development and Implementation of Innovative Projects*. Prague: MoLSA, 2012 p. 4

Objective 2.4.a: The use of evidence-based approaches to policy-making and to strengthening awareness of the issue of social exclusion

Support research for evidence-based policy, regular collection and sharing of data on the status of people who are socially excluded or at risk of social exclusion. Raise State and local self-government awareness about the obstacles that prevent people who are socially excluded or at risk of social exclusion from fully and meaningfully self-realising, through data collection and research. Use the knowledge and information of social workers, obtained also from screening activities, to detect "invisibly" socially excluded persons and persons at risk of social exclusion. Adopt and test new/alternative instruments in the field of social inclusion (socio-health boundaries of social services, ASLPC, social housing, social entrepreneurship, new methods of social work, primary prevention, etc.). Support impact monitoring including the elaboration of analyses to verify the economic savings of individual interventions, supporting the sustainability and dissemination of these programmes at the local and national level, as well as the sustainability of already proven programmes and services. Focus on collecting anonymised data.

Objective 2.4.b: Increase the quality and coherence of public policies and thus increase their impact on weakening the processes of social exclusion and reducing the territorial concentration of social exclusion.

The measures will be aimed at preparing the conditions for the content coherence and interconnectedness of public policies, in particular by ensuring the availability of the necessary data, expertise and professional and methodological support for public policy-making and evaluating their impact in preventing and addressing social exclusion. Measures will include the development of new tools, instruments, procedures and methodologies, including the use of technologies. Development will take place in the field of data collection, research and impact evaluation, including the development of qualitative approaches, as well as project and process management in the creation and implementation of local and regional social inclusion strategies (e.g. development of a dynamic participatory model of strategic planning effectively linking the benefits of an integrated approach and gradual, incremental, bottom-up and top-down approaches³⁶), as well as in the area of collective impact and procedures for increasing the value of networks. Measures will also be aimed at creating suitable conditions (especially legislative, non-legislative, financial, knowledge-related) for the active cooperation of public administration units with territorial self-governing units, their unions or associations, local action groups, public library networks, the non-governmental non-profit sector and business, and the academic and research sector in combating social exclusion. Measures will be aimed at ensuring the cooperation and common approach of governmental departments in the field of social inclusion. Measures will also be aimed at the establishment, operation and interconnection of horizontal and vertical networks of entities in the field of social inclusion as a key prerequisite for quality decision-making in the field of social inclusion and disseminating the positive impact of interventions and measures to minimise and prevent social exclusion.

³⁶ A top-down approach is an approach that comes from the top, i.e. from politicians or the official apparatus.

3. Social work as a fundamental tool for social inclusion

Social work is a professional activity focused on assisting individuals, groups or communities, in order to improve or restore their capacity for social functioning in their natural environment. Social work is aimed at creating favourable social conditions to achieve the defined goal. It promotes social change, problem-solving in human relationships and strengthening and liberating people in order to allow them to fulfil their personal well-being. It acts where people come into conflict with their social environment. The principles of human rights and social equity and solidarity are of key importance for social work.

Social work promotes social change and problem-solving in interpersonal relationships and in its various forms it focuses on diverse, complex relationships between people and their environment. It responds to crises and acute situations as well as to everyday personal and social problems. The social worker performs social work activities in practice, e.g. social investigation, assistance in dealing with social benefits, social legal counselling, analytical, methodological and conceptual activities in the social field, professional activities in facilities providing social prevention services, screening activities, crisis management assistance, social counselling and social rehabilitation. Act No 108/2006, on social services, imposes the obligation of lifelong training on social workers. In these areas, a high level of support is needed not only for social workers themselves, but also for employers and other stakeholders in the field of education. In the next period, it is necessary to further strengthen the activities of municipalities in the planning of social services so that there is no social exclusion as a result of systemic failure in the field of social care. Social work is an activity performed in both independent and delegated competence, it is also performed within the framework of social services (especially preventive), but also as a part of other activities. In accordance with the law, social work can also be supported in the form of a special-purpose subsidy.

Community work

A key problem in municipalities with concentrated social exclusion is the large social imbalance in the area of power / influence and access to resources, as well as low social cohesion. One of the factors of social exclusion in the exercise of civil rights is the non-participation of the population in basic democratic processes, such as elections and decision-making processes that affect them. The processes of social inclusion are then not only a social issue, but also a civic one.

Community work and participation which result in active citizenship, i.e. the ability to participate in public life or to defend one's own civil rights in everyday administrative matters and activities, are important methods that enable citizens' participation in decision-making processes and in more general terms in the administration of public affairs. Both approaches are equally important, suitable for different situations and can be applied to different levels of distribution of power between citizens and public administration: they can intersect and complement each other. Community work is a method of social work the aim of which is to achieve social change by activating community members (focusing on the inhabitants of areas with a concentration of social exclusion), strengthening the sense of belonging and balancing the imbalance between people's needs and resources. Community work is a process of activating and empowering groups of citizens to solve both common and specific problems; the activation and empowerment of citizens to solve problems is the primary goal of community work, the actual solution of problems its process and consequence.

Community work through the activation and empowerment of community members (with a focus on the inhabitants of the territory with a concentration of social exclusion) can thus significantly strengthen the sense of belonging and joint problem-solving.

Civic participation in social inclusion as a general principle and objective of empowering the population at risk of social exclusion is applied across individual levels of public involvement and various thematically defined areas. Achieving a change in the civic literacy of the population at risk of social exclusion, in their social perception by the general public or the development of the local community in municipalities with a concentration of social exclusion, involves a systematic and long-term approach to solving it. This case is not about the effect of one activity or measure, but about a coordinated approach across individual areas and their interconnection over time. In order to achieve civic and political empowerment of the population with an accumulation of social problems, it is necessary to have the instruments to achieve a situation where (not only) these people will be not only objects of public policy assistance, but above all active entities participating in their creation and implementation. In terms of benefits for the target group, all actions developed in the activities and measures should pursue one main and common objective: to activate the target group and motivate them to solve the perceived problems, preferably on their own.

At the strategic level of social work (e.g. community planning), participatory approaches in social work can be used in research empowering social entities to express their views and needs, which can serve as background analysis for the conception of social policies, not only at the local level.

The active use of both methods can make a significant contribution to social cohesion in municipalities, towns and cities, to the participation of all groups of the population in socio-economic dynamism and governance, and to the functioning of the neighbourhood as a community.

Within its activities, the Agency provides professional and methodological support to municipalities and local social inclusion stakeholders. To execute this cooperation, local partnerships are being established in municipalities which associate entities relevant for the solution of social exclusion. The aim of local partnerships is to identify local problems and their causes, carry out participatory planning, propose solutions and monitor the effectiveness of interventions that should lead to positive change. Most often, members of these local partnerships are representatives of non-profit organisations, the public administration (municipalities, associations of municipalities and public authorities), local business entities, the police, school facilities and expert entities. Local partnerships may help facilitate a change in attitudes towards a pro-inclusive view of local reality. Local libraries, which organise various community events and deal with topics such as intergenerational coexistence, involvement of citizens in local activities and other extracurricular education of citizens, may also play a key role in supporting the development of communities.

One of the social inclusion stakeholders at the local level are the Local Action Groups (hereinafter “LAGs”), which are partnerships of citizens, non-profit organisations, volunteers, the private business community and the public administration (municipalities, associations of municipalities and public authorities) that are independent of political decision-making. LAGs most often cooperate in rural development, agriculture and obtaining financial support from the EU and national programmes for their region, using the LEADER method.

The basic goal of LAGs is to improve the quality of life and the environment in rural areas. One of the necessary tools for the area of social inclusion in the rural environment is, for example, the active

acquisition and distribution of subsidy funds for the area of community work or active involvement – the participation of residents of municipalities with a higher concentration of social exclusion. In this area, LAGs cooperate and coordinate their activities with the Agency.

It will be important to ensure in the next period that social work in the area responds flexibly, effectively and in a coordinated manner to the identified needs of the population, and that local, natural sources of support are appropriately involved and developed when carrying out social work and that conditions for its use by vulnerable groups are created and strengthened. When implementing the measures, experience of regions or academic entities with the implementation of activities in the field of community work can also be used.

Risks and barriers to social work:

1. Inadequate personnel capacity;
2. Ambiguity and inconsistency of social work's objectives;
3. Insufficient offer of social services;
4. Lack of cooperation and coordination of key stakeholders; lack of case management;
5. Low social prestige of social work as a profession, low salaries of social workers;
6. The reluctance of some municipalities to use social and community work instruments to include socially excluded persons, especially Roma and persons released from prison, in the context of the majority population's attitudes towards these groups (potential voters evaluate these measures negatively);
7. Lack of funds from the State budget for the field of social work; the problem concerns in particular the area of social services and social work which does not fall within the definition for the registration of social services; e.g. activities on the border of the social field and crime prevention, peer mentoring activities (i.e. mutual mentoring in the form of mutual learning from people with similar experience), non-commercial employment mediation, social entrepreneurship activities – i.e. financing the integrative role of social enterprises, consisting in supporting employees in training, ensuring their development and subsequent transfer to the regular labour market;
8. Absence of legislation adequately regulating the performance of social work, e.g. activities on the border of social work and social prevention, activities not by their nature covered by the Social Services Act (e.g. non-commercial employment mediation and subsequent support in job adaptation), social entrepreneurship, and further limited opportunities for participation of representatives of the target group of the socially disadvantaged in the provision of peer programmes (i.e. programmes mostly of a preventive nature in the presence of people with similar experience) and mentoring programmes due to non-compliance with qualification requirements set by the Social Services Act;
9. Insufficient databases to measure the effectiveness of services and their impact, and the resulting insufficient development of evidence-based practice.

Objective 3.a: Develop and professionalise social work.

The fulfilment of the objective will consist of, among other matters, the completion of the legislative process for the Social Work Act (Act on Professions) and its implementation in practice also in the implementation of instruments to ensure adequate financial remuneration for social workers, i.e. adequate remuneration for the performance of social work in public administration. Strengthen the civic empowerment of socially excluded persons or persons at risk of social exclusion by social work methods. Analyse blind spots in the social work system with the socially disadvantaged and design and enforce measures to be taken to eliminate them. Take systematic steps to measure the impact of existing interventions, mapping practices with a demonstrable social and economic impact, developing arguments for key stakeholders and supporting the dissemination of this practice.

Objective 3.b: Create preconditions for coordination of support in the territory.

Measures will focus on the possibilities of increasing the capacity to perform social work, strengthening mutual cooperation between public administration stakeholders and other entities in the performance of social work. Significant support for social work in municipalities, harmonisation of social work methods and cooperation with the LO CR, non-governmental non-profit organisations and social services will be important, as will the emphasis on financial security of social service providers, including social workers.

Objective 3.c: Strengthen the instruments for providing support in people's natural environment.

The fulfilment of this objective consists in the development of support provided as much as possible in the natural environment of the persons for whom the support is intended, including the development of the necessary tools (especially community work) with emphasis on the principles of empowerment and the recovery of clients.

Risks and barriers of community work:

1. Passive approach of the population living in social exclusion to solving their own needs and problems;
2. Incoherence of activities and measures intended for social inclusion of the population with the local policy of the affected municipalities;
3. Low level of involvement of the population at risk of social exclusion in the process of formulating and solving problems and non-participation of representatives of institutions;
4. Insufficient experience of municipalities with active use of community work and participation methods;
5. Insufficient anchoring of community work in the social work system – especially in the area of support for meeting activities of socially disadvantaged people and the public (e.g. community centres with an integrative role, the development of which received a considerable amount of funds);
6. The reluctance of some municipalities to use social and community work instruments to include socially excluded persons, especially Roma, in the context of the majority population's attitudes towards this group (potential voters evaluate these measures negatively)

Objective 3.d: Enable social change and balance the disproportions between the needs of people and resources through community work and the participation of the inhabitants of the territory with a concentration of social exclusion.

Measures of individual ministries (depending on the relevant area of community work) will be aimed at the systemic anchoring and support of the implementation of community work as a tool for the creation of local communities - civic communities in villages and towns and a happy neighbourhood for all the inhabitants of the municipality. The measures will strengthen the capacity of people at risk of social exclusion in solving their problems and the participation of socially excluded persons or persons at risk of social exclusion in local policy-making and implementation of activities, and they will increase their participation in community life in the natural conditions of the local community. The measures will strengthen the bottom-up approach (mainly based on civil society) and support the civic and advocacy competences of socially excluded people and those at risk of social exclusion. Measures will focus on leveraging the potentially dense network of public libraries as important actors in local community life and informal, non-formal and community learning.

4. Areas supporting social inclusion

4.1 Prevention of indebtedness and help with the over-indebtedness issue

The increasing indebtedness of the population has long been perceived as a serious problem in most EU Member States. The uncontrolled increase in indebtedness leading to over-indebtedness can easily jeopardise the stability of the social system and the economy as a whole. Over-indebtedness is in many cases the cause of social exclusion of individuals and families, it leads to social and health problems, endangers the basic needs of children, leads to financial drainage of the most affected regions and has very negative effects on the State budget. Indebtedness is cited, among other matters, as one of the main causes housing loss, work outside the legal labour market and high recidivism. A significant problem is posed by the deepening indebtedness of socially excluded persons.

The significant over-indebtedness of part of the population is one of the key problems of social exclusion in the Czech Republic. By the end of 2022, there were execution proceedings against 668 thousand persons (almost 6% of the adult population) in the Czech Republic (Chamber of Bailiffs, 2023a). While this represents a year-on-year decrease of 30,000 persons, the number of persons with executions remains a serious problem. The data of the Chamber of Bailiffs of the Czech Republic draw attention in particular to the problem of the growth of multiple executions, i.e. cases where multiple execution proceedings are conducted against one debtor at once (the total number of active execution proceedings reached 4.1 million, 445 thousand people with at least 3 executions,³⁷ and 149 thousand people face 10 or more execution proceedings at once. The total amount recovered by enforcement exceeds CZK 620 billion (Institute for the Prevention and Resolution of Over-indebtedness, 2023).

The ever-decreasing age of over-indebted people is also a very dangerous phenomenon. All of this has far-reaching economic consequences in the form of distortions in the labour market, declining Government revenues from taxes and social security, and increasing spending on social support, health care, crime prevention and response, and more. Similarly, the social consequences, led by material deprivation, pathological behaviour, loss of housing and, in extreme cases, social exclusion, have a significant society-wide dimension.

At the same time, the cause of this situation does not necessarily have to be only irresponsible indebtedness and the consequent laziness in solving the repayment problem. In many cases, the causes of indebtedness are objective, such as loss of employment, long-term illness or injury, family breakdown, indebtedness of one of the partners or, for example, an unsuccessful business.

Experience also often shows that the over-indebtedness of individuals and households has been largely caused or exacerbated by the legislative environment. In particular, there was an abuse of the institution of arbitration,³⁸ costs of the “Reimbursement Decree”³⁹ for trivial debts, almost zero regulation of the non-banking consumer lending sector⁴⁰ and the creation of a competitive environment between bailiffs. Deficiencies in the setting of the system have the strongest impact on the most socially vulnerable groups

³⁷ One of the basic indicators of over-indebtedness and current or potential risk of social exclusion.

³⁸ From 1 December 2016, arbitration procedure is prohibited in all consumer contracts.

³⁹ Effective from 2001 to 2013, when it was annulled by the Constitutional Court.

⁴⁰ The new Act No 257/2016, on consumer credit, already significantly regulates the non-banking sector with effect from 1 December 2016.

of the population: they contribute to the growth of the number of socially excluded persons and their accumulation in socially excluded localities.

One of the basic shortcomings of the current system is the lack of a comprehensive database of detailed (and often aggregated) qualitative and quantitative data on the indebtedness of individuals and households, not only in socially excluded localities, but also in the whole of the Czech Republic. The absence (or unavailability) of such key statistics, which could be extensively analysed and monitored over time from different demographic, social or economic perspectives, causes discussions on potential adjustments to existing legislation to take place at a very general level without precise quantification of the extent of the problem under discussion.

Due to the development of over-indebtedness of the Czech population, there is another current, which is the insufficient capacity of the debt counselling system, which leads to poor availability of these free services, involvement of the private sector in areas that are insufficiently covered by non-profit organisations or State institutions,⁴¹ and a higher concentration of “usurious” companies and various unfair practices. In addition, the population groups concerned are not sufficiently informed about the possibility of using the free debt counselling. This is also one of the reasons why they often come to counselling too late. Entities from the non-profit organisation sector often focus on a more active, comprehensive and individual approach to working with the client in the area of over-indebtedness than the public sector, thus complementing the overall work with the client and helping to fulfil the strategy of measures. However, the public sector, which invests too much in debt counselling in this respect, should not rely on entities outside it to cover the issue independently.

Among the most fundamental problems in the field of debt collection in execution proceedings is the absence of the territorial principle and the system of free choice of the bailiff. Today, multiple executions of a single debtor are enforced by more executors simultaneously, thus duplicating the same activities and thus burdening a number of entities and, in essence, the entire economy. Paradoxically, those most affected by this system are employers, who spend hundreds of thousands to millions CZK a year to employ people in execution and therefore often do not prefer to employ people in execution.

The method of calculating execution and insolvency deductions from income, together with the currently very low non-seizable amount, leads to a preference for undeclared work and thus considerable economic losses. The problem seems to be the combination of the low income of the debtor/obligor from whom the monies are deducted and the social benefit settings. Precisely because of the calculation bases of social benefits that do not take into account income after deductions, debtors often show only minimal income and work illegally, because otherwise they would lose their entitlement to social benefits and their income would drop dramatically – a paradox that supports widening the debt trap.

The non-seizable amount, even though it has been repeatedly increased, is insufficient for many debtors to cover the basic necessities of life. As the calculation of the non-seizable amount does not take into account the regional aspect, situations arise where in areas with low housing costs the non-seizable amount is sufficient or even unnecessarily high, while in areas with higher housing costs (especially in larger cities) it is so low that it does not allow debtors to cover their housing costs without entering the illegal economy.

⁴¹ For example, in the area of debt relief under the Insolvency Act, there are a large number of commercial debt relief agencies that often offer very poor quality services for often absurdly high fees (moreover, in most cases illegally).

One of the reasons for the current situation is the insufficient financial literacy and education of the population. This area has long been neglected in primary and secondary education. At present, financial literacy is a mandatory part of education in primary and secondary schools, but without the definition of a mandatory time allowance, which would take into account the individual regional needs of schools in connection with the distribution of over-indebted persons within the Czech Republic. As a result, many schools address the field of financial literacy by only assigning a few hours on this topic within one school year, which is completely insufficient in terms of its effectiveness and impact. The financial literacy of adults can also be ensured via public libraries.

Risks and barriers:

1. Excessive indebtedness of part of the population, combined with a low non-seizable amount and the setting of the income deductions system weakens the interest of part of the unemployed/inactive in seeking formal employment;
2. Insufficient capacity and availability of debt counselling services (especially within the social care department);
3. Lack of alternative options for resolving over-indebtedness for persons who do not meet the current conditions necessary to enter the debt relief process under the Insolvency Act;⁴²
4. Establishment of a system of executions which does not respect the territorial competence towards the debtor and enables executions against one debtor by several executors;
5. Absence of legislation that would make it impossible for children to incur debts;
6. Absence of a separate study programme of debt counselling or integration of debt counselling courses into already existing programmes (e.g. social work);
7. Insufficient financial and debt literacy education in the system of regional education and the related insufficient non-formal education of citizens in the field of financial literacy of the population that has already undergone formal school education;
8. Inconsistent system of data collection and evaluation in the field of executions and their unavailability;
9. Impossibility of obtaining free access to information on own debts.

Objective 4.1.a: Reduce the risk of social exclusion due to over-indebtedness of individuals and households as well as persons at significant risk of social exclusion.

Special attention will be paid to the promotion of preventive measures and the promotion of relevant services, especially in the area of debt counselling. The area of education will be a separate chapter altogether, including the education of (future) workers providing support to indebted people. To meet this objective, it will be necessary to collect and analyse more detailed data in the field of executions and insolvencies and the necessary legislative changes, including the regulation of non-bank lending by the state, e.g. some form of regulation of advertising spots promoting non-bank loans.

⁴² Act No 31/2019, amending Act No 182/2006, on bankruptcy and settlement (the Insolvency Act), as amended, and some other acts, made debt relief available to almost all honest debtors.

Objective 4.1.b: Reduce the cost and efficiency of the execution process and significantly combat illegal practices.

The measures will focus on the assessment of the impact of legislative changes on the subsequent revision of the execution process, alternative insolvency resolution options, the system for calculating income deductions, the amount of non-seizable amounts, and better and free access to information on own debts and executions. Attention will also be paid to the creation of a single point of access to information on tax and administrative executions.

4.2 Employment and its retention

Poverty and social exclusion are very closely related to unemployment, in particular long-term unemployment. More than half of all unemployed persons (53.7%) were at risk of income poverty in 2022 (CZSO, 2023a). Ensuring equal access to employment for all groups of the Czech population is a prerequisite for combating social exclusion, especially in the productive part of the population. Promoting employment of disadvantaged groups is important both in order to ensure adequate income and prevent the risk of poverty for socially excluded persons or persons at risk of social exclusion, and also to facilitate the social integration of this group of the Czech population, as having a job is not only an essential source of income, but also an important social value.

However, at the same time, entering employment does not automatically lift you out of poverty. Especially for people facing executions, entering employment is very often financially disadvantageous. The situation when work does not pay off is very demotivating for potential employees and employers alike. At present, the systemic solution of the issue of executions is a very significant challenge in terms of solving barriers in the field of employment. One of the possible positive changes could be brought about by the amendment of the Government regulation on non-seizable amounts,⁴³ which raised the threshold above which the rest of the net wage is seized without restriction. This change should help people with higher income to keep a higher amount of their income and to motivate all debtors/obligors in execution/insolvency to achieve a higher income.

Long-term or repeated unemployment contributes to an increase in material and social deprivation and an increased risk of social exclusion, trapping socially excluded individuals in welfare benefit dependency.

The expected problems of the Czech labour market follow in particular from:

- Lack of funds and capacity to care for pre-school children or other dependents;
- The growing discrepancy between supply and demand in the labour market (both quantitative and qualitative), between the qualification needs of the labour market, the qualification of the labour force and the insufficient professional (but also regional) mobility of the labour force;
- The effects of the 4th Industrial Revolution and workers' adaptation to change, especially in the case of low-skilled persons and persons with poorer access to education (both initial and lifelong), for whom it is difficult to find employment in future labour markets, even in situations where there is a high demand for labour; It is also important to focus on the predicted effects of digitisation in relation to gender equality (LO CR, 2015b);
- Insufficient funding to support suitable permeable jobs and supported jobs in the secondary labour market for disadvantaged people, such as the socially excluded or at risk of social exclusion, or persons with disabilities or people with an increased need to reconcile personal and professional life (because of caring for children or other dependents);
- Despite the current economic boom, there are still groups of people who are disproportionately represented in the labour market, such as the Roma.⁴⁴

⁴³ Government Decree No 91/2019, amending Government Decree No 595/2006, on the method of calculating the basic amount that may not be deducted from the monthly wage in the execution of a decision, and on determining the amount above which the wage may be deducted without restriction (Regulation on Non-Seizable Amounts).

⁴⁴ Although the general unemployment rate fell from 4 to 2.8% between 2016 and 2021, the proportion of Roma in the Czech Republic who declared paid work as their economic status increased by only 2% during that period (43 % in 2016 vs. 45% in 2021) (European Union Agency for Fundamental Rights, 2022).

Risks and barriers:

1. Lack of interconnection of initial education with labour market needs.
2. Insufficient cooperation of relevant stakeholders across governmental departments and employment phases.
3. In the area of reconciling family and working life, there is still an insufficient offer of locally and financially available education and care services for children up to three years of age, pre-school children, children of younger school age and care services for other dependent persons. The use of flexible forms of employment relationships and the low supply and use thereof and the organisation of work (quality part-time work, flexible working hours, etc.) is among the lowest in the EU and prevents reaching a higher employment rate, which primarily applies to certain demographic groups (women with children, single-parent families, older people, disabled and otherwise disadvantaged persons, persons caring for a dependent).
4. There are growing regional disparities in the labour market, territorial remoteness and poor transport access to employment, which constitute other elements disadvantaging certain groups of job seekers.
5. There is space for improvement in the system of further education of the workforce in general, including the use of tools for the certification of competences acquired outside the formal education system.
6. The growing risk of “unemployment” of certain groups in changing labour market conditions with the potential for long-term unemployment.
7. Over-indebtedness (execution deductions) fundamentally limits the possibilities of entering the labour market. This leads (with regard to the setting up of the system of executions) to illegal work or the preference for dependence on social income over income from economic activity. These are not exclusively barriers on the part of debtors, but also on the part of potential employers, who must then take upon themselves the administrative burden of the execution deductions.
8. Targeting active employment policy instruments more towards those who face milder barriers to entering the labour market than those most in need of support to enter the primary labour market.
9. Absence of an interdisciplinary system of a comprehensive individualised approach to people with multiple disabilities (barriers in the labour market).
10. Lack of data does not allow the implementation of evidence-based policies (e.g. there is a lack of information on how many unemployed people face executions).
11. Discrimination in access to the labour market.

Objective 4.2.a: Create the conditions for socially excluded persons or persons at risk of social exclusion to enter and remain in the labour market.

This objective will focus on creating a more favourable environment for people with specific needs who are socially excluded or at risk of social exclusion. The main idea behind the measures contained in this objective is the assumption that appropriate labour market conditions will contribute to reducing unemployment among the target group, including long-term unemployment, which is one of the main causes of social exclusion.

The aim of the following measures is to gradually remove objective and subjective barriers that prevent people with specific needs from entering the labour market, thereby reducing the annual cost to public budgets.

In the field of consulting, professional and capacity standards of consulting work will be set. The impacts of the measures taken on the target groups will be regularly evaluated so that it is possible to implement evidence-based policy.

The measures are designed, among other things, to support the improvement of the qualifications of socially disadvantaged people, while at the same time they are aimed at the training of workers who work with this target group. It can thus be reasonably assumed that improving qualifications on the one hand and improving the quality of further education on the other will have a positive impact on the employment situation of people with specific needs.

The implementation of some measures is entirely dependent on sufficient financial resources. In the absence of sufficient funds allocated to employment policy, some of these measures will not be possible to implement.

Objective 4.2.b: Create a favourable environment for employers who employ people who are socially excluded or at risk of social exclusion.

The measures contained in this objective are aimed at potential employers and employers who already employ persons who are socially excluded or at risk of social exclusion, in order to create adequate conditions for their employment.

The main pillar of the aforementioned objective is the entry into force of the Social Enterprise Act, including the amendment to the Employment Act with a defined system of profiling of persons with specific needs. The philosophy behind this law is, among other things, the assumption that the employment of persons with special needs will contribute to their integration into the free labour market and society. To this end, it is necessary to work individually with the employees concerned, not only in the area of employment, but also to address other socially pathological phenomena that prevent them from fully integrating into society. To this end, the Act defines the degree and form of support from a qualified social worker who will perform "case-management" in a registered social enterprise.

In addition, public budgets can be expected to reduce the cost of several thousands of unemployed people per year. For this reason, it will be necessary to increase the motivation of both natural and legal persons to register in the register of social enterprises maintained by the Ministry of Labour and Social Affairs. A campaign promoting social entrepreneurship will be implemented for this purpose in 2024 in the form of a nationwide conference, work-shops or, for example, information materials.

In order to improve the skills of socially disadvantaged people who are long-term unemployed, emphasis will be placed on expanding the range of retraining programmes that will be more targeted at this group

of citizens. As a result, employers can be expected to be more interested in employing these people, which will have a positive impact in many ways.

The ambition of the fifth measure contained in this objective is to achieve comprehensive and systemic support for socially responsible public procurement for the purpose of the social inclusion of disadvantaged people.

Objective 4.2.c: Introduction of an individual and comprehensive approach of public employment services to people with more disadvantages in the labour market. Develop social entrepreneurship opportunities.

It can be concluded that the year-on-year increase in the number of registered social enterprises will lead to an increase in the number of jobs for people with specific needs. On this basis, it can be assumed that this measure will contribute to reducing unemployment among the target group.

An individual approach to people with multiple disadvantages requires professionalisation in the field of individual work. The specification of qualification requirements for the positions of professional advisors or project workers for clients at the Labour Office of the Czech Republic can contribute to this, as well as the introduction of a system of training in individual work for workers in direct contact with clients.

A methodology for cooperation between the entities working with the clients concerned will also be developed.

Cooperation between schools, employers and the LO CR will also be supported. Especially for people with incomplete primary or secondary education, the possibility of reconciling employment and further education will be supported. Within the framework of the use of active employment policy, the aim is also to ensure and implement the smooth linking and overlapping of individual active employment policy instruments and support the development of social entrepreneurship.

4.3 Social services

Through social services defined by Act No 108/2006, on social services, as amended, assistance and support is provided to individuals in difficult social situations in order to achieve social integration or prevent social exclusion. Social services respond to the needs of socially excluded persons or those at risk of social exclusion, as well as to negative social phenomena that occur in the localities where these services are provided. The lack of social services and, as a consequence, the insufficient network thereof, make it impossible to prevent the deepening social exclusion of these people. The basic framework document for the given area is the National Strategy for the Development of Social Services for the period 2016–2025, the purpose of which is to set up a system of social services to meet the needs of disadvantaged people and social service users and to enable them, if possible, to live in their natural environment. There are also other strategic documents for specific groups, e.g. for families with children there is the Action Plan for the implementation of the Guarantee for Children for the period 2022-2030 (MoLSA, 2021a).

The aspects of the quality, availability, permeability and complexity of the social services system play a fundamental role. Under the current conditions of the financing method, municipalities and towns cannot plan activities in the area of social services in the long term, as the State does not sufficiently cover the area of social services with financial resources and decides on their possible additional financing only during the year. Thus, social service providers live in uncertainty about whether they will be able to afford to provide social services in a given year.

In practice, the current definition of the conditions for the provision of individual types of social services allows only partially for the provision of social services to specific groups of vulnerable people, such as people in the highest degree of social exclusion, potential clients of night shelters, low-threshold day centres and homeless hostels, who need services with the lowest possible level of conditions and maximum accessibility, at least at a certain stage. This includes, for example, homeless people who have other specific difficulties and limits in their ability to adapt to the requirements (e.g. the requirement to prove that they are free of infection when entering the service for clients with barriers to health care access). Especially in residential prevention-oriented services, clients are in a hopeless situation when there are no follow-up services or available housing, temporary social services do not and cannot replace regular housing, and yet they become a long-term or permanent solution. Residential care services are practically unavailable to them, because if they meet the conditions of the target group (due to their long-term adverse health condition, they need the help of another person to cope with basic life needs), they will not fulfil the obligations associated with the use of the service (payment for accommodation, food and for care provided to the agreed extent).

Risks and barriers:

1. The capacity and availability of social services, as well as the solution to the issue of the socio-health boundary, is still insufficient;
2. Significant differences in the quality of social services in the area of social inclusion or the prevention of social exclusion;
3. System of financing social services;
4. Insufficient communication between theory and practice;
5. Subjective and objective barriers in communication between individual providers of social services and between providers and social workers of MEPs and MADPs (municipal authorities with

delegated powers) (there are many cases where a socially excluded person is a client of several social service providers and social workers of municipal authorities – social work can be counterproductive and moreover, more economically demanding).

6. Act No 108/2006, on social services, does not define social services for some very specific groups of people, so there are no social services for certain socially excluded people.

Objective 4.3.a: Create a sustainable and predictable system of multiannual financing of social services.

The measures will focus on the development of principles of the multi-year and multi-source funding of social services.

Objective 4.3.b: Ensure the availability of quality and effective social services corresponding to the identified needs.

The measures will focus on the revision of the system of evaluated quality of services so that this system provides tools for continuous monitoring of the quality of services with regard to specific needs, i.e. elimination of situations where despite the actual availability of the type of service in the locality, some target groups are negated from the provision of support. Furthermore, the measures will focus on strengthening the principle of a person's participation and the effective provision of the service, i.e. the elimination of the person's dependence on the service.

Objective 4.3.c: To create conditions for ensuring a sufficiently developed system of social services for the needs of persons socially excluded or at risk of social exclusion, responding to their individual needs in the context of the social contract.

The measures focus on prevention services and improving the availability of social services and social work in the natural environments of residents of socially excluded localities and localities where persons at risk of poverty live. The measures are intended to contribute to meeting the needs of the inhabitants of these localities, but also the needs of municipalities and regions in the area of financing social services.

Objective 4.3.d: Create conditions for increasing the flexibility of providing support through social services. Further support the transformation of residential social services.

The measures will focus on the creation of legislative conditions enabling the provision of more comprehensive support within the registered type of service, the reduction of the administrative burden on social service providers and the issue of the socio-health boundary.

Objective 4.3.e: To create conditions for lowering the thresholds for residential and outpatient services for people facing extreme social exclusion in cases where the conditions defining the scope of social services, participation of clients and the approach (rules) of providers limit or prevent the solution of the adverse social situation or the access of the target group to services.

The measures will focus on improving access to and the specialisation and modification of social services for homeless people who are also dependent persons. These changes are accompanied not only by a change in the entry conditions (definition of the target group by the provider) and the rules of social services, but also by a change in the professional approach of the teams based on cooperation with addiction services. This objective should be fulfilled both on the investment level, i.e. building and reconstruction of existing spatial layouts of services to provide such a service in the conditions of collective coexistence, the professional level, i.e. supporting education and linking experts on homelessness and addiction, and on the verification level, i.e. supporting pilot projects of "wet" social services so that all relevant services fulfil it.

4.4 Family support

The most significant changes in family life include increasing variability in cohabitation, increasing life expectancy, low fertility, increasing age of mothers at the birth of the first child, increasing the number of childless women, low employment of women (especially women with minor children) and increasing levels of women's qualifications, declining household sizes and increasing length of children's education. All family functions must be supported in all phases. Due to changes in the structure of population and households, because of the expected increase in single-member and single-parent households, we can expect a sharp increase in the risk of poverty for the EU population. Within the framework of family support, it is necessary to focus on addressing crisis situations, improving the status of children and families at risk, and focusing on primary and early prevention - measures and services that will contribute to improving the status of families in the Czech Republic and reducing the number of families at risk. One of the key tools for the inclusion of poor (low-income) families with children, along with supporting children's motivation to learn, is the development of school-based services for extracurricular education and the offer of meaningful extracurricular activities that remain largely or completely inaccessible to these children. Another tool is to improve child nutrition through free/subsidised school lunches in primary and preschools.

On 18 September 2017, the Government of the Czech Republic approved by Resolution No 654 the Family Policy Concept, which was prepared by the MoLSA in cooperation with the Expert Commission for Family Policy. The Family Policy Concept (MoLSA, 2017) comprehensively supports the family through a total of 39 measures that respond primarily to the demographic ageing of society and low birth rates. The prevention of social exclusion of children is also addressed in the Action Plan for the implementation of the Guarantee for Children for the period 2022-2030 (MoLSA, 2021a).

This section focuses both on the area of family policy, which aims to support ordinary families in the performance of their basic social functions, and on the care system for vulnerable children, which is aimed at helping at-risk children within the meaning of Section 6 of the SLPC Act and their families in unfavourable life situations. An important prerequisite for effective assistance to families is, of course, the interconnectedness of measures that are part of both systems so that these measures complement each other and follow upon each other appropriately with regard to the changing needs of families in the Czech Republic.

4.4.1 Family support in the family policy system

As already mentioned, the most significant changes in family life include the following main factors: increasing variability in cohabitation, increasing life expectancy, low fertility, increasing age of mothers at the birth of the first child, increasing number of childless women, low employment of women (especially women with children) and increasing levels of women's qualifications, declining household sizes and increasing length of children's education, but also the lack of access to pre-school education.

One of the key instruments for the inclusion of poor families with children is, in addition to supporting children's motivation for education, the development of services focused on hobby education of children from low-income households so that they can meaningfully spend their time and develop their potential in an all-round manner. At present, due to the limited income of families, these hobby activities are often unavailable to them. As part of education support, it is also important to improve the access of children from low-income households to free school lunches in primary and nursery schools, as the current support system is not always sufficient; insufficient involvement of all regions in the Czech Republic, insufficient promotion of lunches in schools, and often uninformed parents all play a role. Another important area is the insufficient availability of pre-school education, especially in the care for children under 3 years of age. This aspect increases the risk of social exclusion of parents as well as their return to the labour market.

A significant obstacle to the development of primary prevention services to support the family is the absence of their legal regulation, which would clearly define them, define the rules of their operation and set up appropriate control mechanisms. Counselling services and other preventive activities fall under different governmental departments and are also funded from different sources. This situation in connection with the short-term nature of the support for projects of individual non-profit entities creates an uncertain environment for providers and users.

Primary prevention services make it possible to investigate the assumptions and causes of the occurrence of socially negative phenomena affecting families and to find ways to prevent them. These services are primarily of a preventive and supportive nature and they promote the stability of families, facilitate family formation, strengthen parental competencies, improve family relationships, support parents in caring for and raising children, and they also have a positive effect on the harmonious reconciliation of family and work.

Risks and barriers:

1. In the Czech Republic, employment of women is significantly lower compared to men;
2. Frequent absence of low-threshold services aimed at supporting families who find themselves in an unfavourable social situation (e.g. facing conflicts or violence in the family, parents lacking the necessary parental competencies, caring for one of the members that places high demands on other family members, one of the parents is in prison, etc.);
3. Hobby education is unavailable for children from low-income families due to the high financial demands;
4. Absence of systemic tools to support families in housing deprivation who are at risk of losing their homes.

Objective 4.4.1.a: Ensure accessible, interconnected and high-quality services for families, children and youth.

The proposed measures will focus on proposals for regulatory changes, changes in the system's financing and other necessary systemic steps. The measures will further target the development of low-threshold free services for the hobby education of children from low-income households, which will provide them with opportunities to meaningfully spend their leisure time and comprehensively develop their potential and will positively stimulate them to extend their education. Support for primary prevention in the area of the status (protection of the rights) of children and families with children, support for innovative approaches to primary prevention and follow-up measures to strengthen primary prevention are also essential. **Emphasis should be placed on activation services for families with children to further connect them to the social system and integration motives.** Support for primary prevention in the area of the status (protection of rights) of children and families with children, support for innovative approaches to primary prevention and follow-up measures to strengthen primary prevention, especially programmes to support marital/partner relationships of parents, are also essential.

Objective 4.4.1.b: Strengthen the economic stability of families and their independence with an emphasis on freedom of choice of family strategy, especially in balancing professional, family and personal life.

Support for childcare services with the aim of strengthening the employment of women (especially women at specific risk in the labour market) and the social inclusion of children from families in an unfavourable social situation due to social exclusion. Create sufficient places in pre-school care for children under three years of age, as well as expanding the number and capacity of children's groups and day nurseries. Develop and support the sustainability of programmes to support children's school meals and improve awareness of these programmes for children from families in need among the relevant parents. At the same time, it is necessary to supplement these measures with an adequate proposal for financial support for families with children who care for children until the age of three all day and do not want to return to work because of childcare.

4.4.2 Support for at-risk children and their families in the care system for at-risk children

Since 2006, several Government strategies have been adopted to transform the care system for at-risk children. Despite these efforts, the system is still not adequately optimised. One of its characteristic features is the high number of children taken from the care of parents and placed in alternative care, either institutionally provided by residential facilities for children or in the form of foster care.

Table 4: Number of children placed in alternative care in residential facilities for children 2011–2022

	Children placed in school facilities	Children placed in children’s homes for children under 3 years of age ⁴⁵	Children placed in homes for people with disabilities	Children placed in facilities for children requiring immediate assistance	Total children in residential care
2011	7,150	1,428	834	995	10,407
2012	6,941	1,397	769	1,020	10,127
2013	6,549	1,233	646	1,088	9,516
2014	6,495	1,213	577	1,259	9,544
2015	6,482	1,174	538	778	8,972
2016	6,500	1,037	595	629	8,761
2017	6,345	922	447	720	8,434
2018	6,394	876	429	504	8,206
2019	6,553	818	438	520	8,329
2020	6446	778	421	469	8114
2021	6234	*	408	429	*
2022	6355	*	*	403	*

* Data not yet available

Source: MoLSA, MEYS (column no. 1), IHIS (column no. 3)

There is a persevering problem of cases where children are placed outside the family environment for illegitimate reasons (e.g. to ensure the child’s education, even after the children have completed compulsory schooling; due to “educational problems” or unspecified “neglect”, which, however, works as an umbrella term for a bad financial and material situation or housing deprivation of the family, etc.).

⁴⁵ Source: Institute of Health Information and Statistics; children over 3 years of age are also placed in children’s homes for children up to 3 years of age, typically up to the age of compulsory schooling, i.e. up to 6 years of age; the age structure of children cannot be ascertained from the available statistics.

Table 5: Number of children removed from parental care between 2016 and 2022 and reasons for removal

Year	Cruelty	Sexual abuse	Neglect	Educational problems	Other barriers to parental care	Total
2016	158	42	1,665	937	1,010	3,812
2017	141	24	1,640	871	1,070	3,746
2018	122	43	1,541	862	1,071	3,639
2019	167	29	1,608	843	932	3,579
2020	144	25	1,463	552	719	2,903
2021	153	20	1712	*	1196	3,081
2022	146	31	1877	*	1321	3,375

* The indicator is not monitored from 2021.

Source: MoLSA

Children may be placed in institutional care on the basis of inadequate legal titles, e.g. on the basis of preliminary settlement of their relationships, even if the child is not exposed to an immediate threat to life, health or serious threat to development (In 2022, a total of 3,375 children were separated from their parents, 67% of whom were removed on the basis of preliminary measures (MoLSA, 2022a).

One of the reasons is the low level of human rights awareness among the entities involved in the placement of a child in institutional care. The system as a whole shows a high permeability only in the direction from the natural family; the permeability in the other direction, i.e. back to the child's own family, is very low.

According to national legislation and international obligations, institutional care should always be the last resort when it is necessary to place a child outside the family. Institutional care should never be considered the most appropriate environment in which a child should grow up. Many residential facilities for children are large-capacity and it is no exception for them to be located in remote places where children do not have the opportunity to be in contact with the local community or the opportunity to develop social ties outside the facility. In the Czech Republic, the accumulation of several types of facilities and services (social, health, educational) in one area of a residential facility is not prohibited by law,⁴⁶ where individual services provided in different legal regimes overlap and fade into one another. The accumulation of services within a residential facility does not support children in relations with the normal environment and confirms the tendency of the institutional facility to influence all aspects of their lives, as children do not have to go beyond these facilities, which thus have all areas of their life under their control (e.g. the children's chances to attend a regular school or engage in leisure activities with other children are limited). Residential facilities for children show the characteristics of a total institution with a set regime and rules that do not create enough space to take into account the individual needs of the child, and which limit children's chances to experience the everyday life that their peers live in a family environment. The stay

⁴⁶ In the real world, there are also situations where the facility provides services without appropriate authorisation (registration), which meet the parameters of the service formulated in the relevant law, although this law imposes an obligation on the provider to properly register this service, which also puts in place the appropriate control mechanisms. Therefore, institutional care provides a grey area for the provision of services to children without adequate authorisation.

of children in these regime facilities, where the opportunities for children to exercise their own opinion and choice are limited, is often long term. The importance of the child's relationship with their family and other close people is also underestimated. Children leaving institutional care subsequently have difficulty coping with the demands of everyday independent life in a normal environment without a set regime and rules.

Although the number of children placed in institutional care has decreased over time (a decrease of 22% from 2011 to 2022), this trend is unfortunately rather slow and slightly stagnant in recent years. In the Czech Republic, there has been an increase in the number of children placed in foster care since 2011 (by about 26%), however, not even this has meant a drastic reduction in the number of institutionalised children in institutional care. One of the reasons for this trend may be the still insufficient network of facilities and services to support the stabilisation of the biological family.

Table 6: Number of children placed in foster care in 2011–2022

	Foster care	Foster care for a temporary period	Guardianship with guardian's personal care	Entrusting a child to the care of another person	Total children in foster care
2011	7,170	1	2,648	4,738	14,557
2012	7,448	15	2,766	4,941	15,170
2013	7,595	33	2,764	4,901	15,293
2014	9,771	302	3,005	4,452	17,530
2015	10,380	543	3,076	4,152	18,151
2016	10,922	540	3,013	4,161	18,363
2017	11,362	605	3,032	4,263	19,262
2018	11,643	528	3,098	4,357	19,626
2019	11,931	591	3,136	4,637	20,295
2020	12,094	504	3,307	4,575	20,480
2021	12351	538	3236	4534	20,659
2022	12268	535	3228	4812	20,843

Source: MoLSA

The above results prove that the Czech Republic is failing to effectively fulfil its international obligations, which oblige it to gradually deinstitutionalise the care for at-risk children, within the time schedule set in the adopted Government strategies. In the context of Central Europe, the Czech Republic is also the last country to allow pre-school children to be entrusted to institutional facilities without any restrictions, despite long-term and widely published research results showing the negative effects of institutional care in the case of the youngest children. The placement of a young child in institutional care is perceived by

international bodies⁴⁷ as a form of emotional neglect of the child, which as one of the forms of violence against children, is in conflict with the child's right to protection against all forms of violence under Article 19(1) of the Convention on the Rights of the Child.⁴⁸

⁴⁷ In particular, the UN General Assembly, the UN Committee on the Rights of the Child, the UN Special Rapporteur on the Right of Everyone to the Highest Level of Physical and Mental Health, the Special Rapporteur on Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, the World Health Organization.

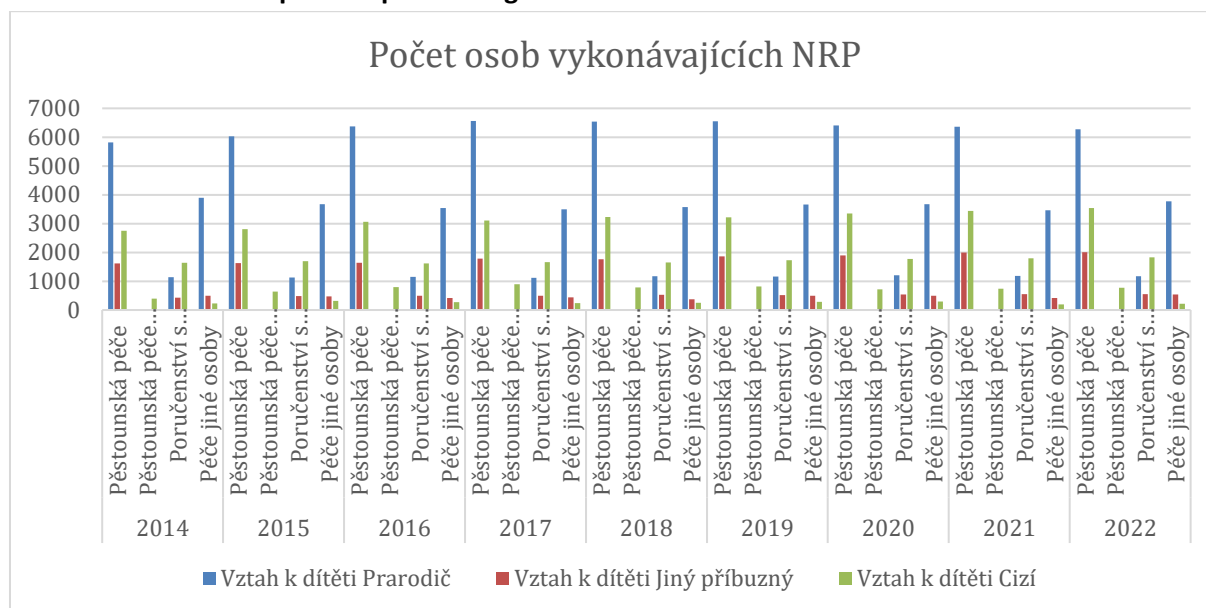
⁴⁸ Beyond this article of the Convention on the Rights of the Child, this practice is also in conflict with Article 19 of the Convention on the Rights of Persons with Disabilities and the UN Guidelines on Substitute Care for Children.

Table 7: Number of persons performing foster care

31 December	Form of foster care	Relationship to the child		
		Grandparent	Another relative	Not related
2016	Foster care	6 373	1 636	3 066
	Foster care for a temporary period	0	5	794
	Guardianship with guardian's personal care	1 147	498	1 612
	Care by another person	3 539	419	269
2017	Foster care	6 557	1 786	3 108
	Foster care for a temporary period	0	2	898
	Guardianship with guardian's personal care	1 118	492	1 660
	Care by another person	3 494	443	240
2018	Foster care	6 537	1 766	3 226
	Foster care for a temporary period	3	0	789
	Guardianship with guardian's personal care	1 170	528	1 646
	Care by another person	3 572	367	246
2019	Foster care	6 547	1 858	3 213
	Foster care for a temporary period	3	0	822
	Guardianship with guardian's personal care	1 158	514	1 730
	Care by another person	3 662	500	288
2020	Foster care	6 410	1 897	1 359
	Foster care for a temporary period	3	9	511
	Guardianship with guardian's personal care	1 211	540	556
	Care by another person	3 674	497	266
2021	Foster care	6 361	1 997	3 438
	Foster care for a temporary period	0	0	735
	Guardianship with guardian's personal care	1 180	546	1 792
	Care by another person	3 460	415	200
2022	Foster care	6 268	2 004	3 535
	Foster care for a temporary period	0	0	777
	Guardianship with guardian's personal care	1 178	545	1 823
	Care by another person	3 770	539	221

Source: MoLSA

Chart 18 – Number of persons performing foster care



Source: MoLSA

Počet osob vykonávajících NRP

Number of persons performing foster care

Pěstounská péče

Foster care

Poručenství s osobní...

Guardianship with guardian's personal assistance

Péče jiné osoby

Care by another person

Vztah k dítěti Prarodič

Relationship to the child Grandparent

Vztah k dítěti Jiný příbuzný

Relationship to the child Another relative

Vztah k dítěti Cizí

Relationship to the child Not related

In many cases, placing a child in institutional care can also be considered disproportionate to the situation of the child and their family, as the situation could be dealt with effectively before the child is removed from parental care if families with children are provided with preventive services available in their place of residence in time. Unfortunately, the Czech Republic does not have a uniformly and sufficiently developed network of preventive services provided to families in an unfavourable social situation, especially in the field and outpatient form (this is most pronounced in structurally affected regions and socially excluded localities), through which it would be possible to prevent the child from being removed. A fundamental problem in this respect is the uneven distribution of financial flows, with funds invested in institutional care still accounting for the highest share of funds (42%) of the total amount of public funds spent within the system. Together with the funds earmarked for foster care (36%), they make up 78% of the total volume of funds that are invested in alternative childcare. Only 8% of funds are spent on preventive services for vulnerable children and their families (Macela, 2018).

New non-insurance and non-income-tested social benefits have been introduced with effect from 1 January 2022

1) recurrent maintenance allowance (Art.50b(1) ASLPC),

2) a one-off maintenance allowance (Section 50c of the Social Security Act),

which are intended for dependent persons up to 26 years of age or for dependent minors who have been granted full legal capacity to alleviate their unfavourable social situation after foster care, guardianship or institutional care has ended, for the duration of their dependency under the Act on State Social Support.

In addition to the issue of adequate material security, the situation of young adults is complicated by difficult access to employment opportunities, affordable housing, and the lack of accompanying support services that could be used by young adults who need support in dealing with related problems (counselling, accompaniment, mentoring). Young adults leaving protective education or prison or its relevant equivalent find themselves in a similar situation.

Risks and barriers:

1. Horizontal and vertical fragmentation and complexity of the system, unclear competencies and responsibilities between individual managers. The individual components of the system fall under various ministries (especially the Ministry of Labour and Social Affairs, the Ministry of Education and the Ministry of Health) and levels of public administration.⁴⁹ Different approaches to the management, rights and needs of the child, methodological management and financing blend together. There is a lack of binding quality standards regulated by legal regulations and methodologies that would unify work procedures across the entire system and guarantee quality and effective protection for all children.
2. A system managed by different governmental departments does not take into account the complex needs of children, the relevant components of the system focus only on a specific part of the child's life (school facilities primarily focus on education and upbringing, health services on health needs, etc.). The importance of the child's stable relationships with family and loved ones is underestimated. The child's opinion is not sufficiently taken into account in decision-making processes, there are no mechanisms for involving children and young people in decision-making processes at all levels.
3. The financial flows in the system are unevenly distributed – it is necessary to optimise them so that the most funds are spent on preventive services, which should be the pillar of a functioning system and receive the most massive financial support. At present, there is also no minimum network of services guaranteed by the public administration (State) focused on timely assistance and rehabilitation of the family.
4. The threat to the child and the failure of the parental role is in many cases a secondary consequence of the family's problems in another area (poverty, social exclusion, unemployment, etc.). Moreover, the failure model often repeats itself in future generations of the family. In addition to developing a network of services for at-risk children and their families, it is essential to ensure that these families have access to affordable housing and adequate material security by revising and adjusting the concept of social benefits for families with children in disadvantaged social situations.
5. Children who are placed in alternative institutional care and who cannot temporarily or permanently return to their own families are not always or sufficiently quickly provided with a suitable alternative family environment. The most disadvantaged are children with special needs, which result from an unfavourable health condition or from a different ethnic origin or from living in a different socio-cultural environment (e.g. children – foreigners). Unlike other European countries (including Central European countries), the Czech Republic does not limit the possibility of placing pre-school children in residential facilities.

⁴⁹ State administration institutions, regional and municipal authorities, important sources of support such as housing and the development of social services are the responsibility of self-governments.

Objective 4.4.2.a: Optimise the system of care for at-risk children so as to ensure the consistent protection of children’s rights guaranteed by the Convention on the Rights of the Child and the fulfilment of their needs.

The measures will focus on changing the philosophy of the system and related conceptual changes, which will ensure consistent protection of the rights of the child guaranteed by the Convention on the Rights of the Child and other international documents; they will also lead to the fulfilment of children’s individual needs (including specific needs resulting, for example, from an unfavourable state of health, from living in a different socio-cultural environment, etc.).

It is important to ensure the effective management, coordination and interconnection of individual components of the system, the basic principle of which must be the all-round development of the child in their own family and, if this is not possible, primarily in an alternative family environment. The individual components of the system must have clearly and transparently set boundaries of activities so that the scope of their competencies is clear. This must include setting up guarantees that will eliminate the unequal treatment of children and their families and encourage the active participation of children in decision-making processes that directly affect them.

An important aspect of fulfilling this objective is the establishment of a functional monitoring system for the care of children at risk based on an information system that will enable the collection of data on the number and situation of children at risk and their families and on the impact of the services provided on their quality of life. This measure will be implemented through the Crime Prevention Strategy in the Czech Republic for 2022-2027, where specific objective F.2 focuses directly on the full implementation of the early intervention system in work with children at risk in the Czech Republic. The Ministry of Labour and Social Affairs is responsible for this objective and the aim is to create an existing system of cooperation in identifying and assisting children at risk, including an existing software tool to support such cooperation. It also includes a change in the approach to assessing the quality of the care system for at-risk children, the basic starting point of which will be the fulfilment of the child’s rights and needs (not only of the material, technical, operational and other conditions of care). The monitoring system needs to be linked to the evaluation of the effectiveness and efficiency of the funds spent (whether the efforts and resources lead to the solution of the situation in the family corresponding to the best interests of the child).

Objective 4.4.2.b: Support the professional development of workers working in the system of care for at-risk children.

A key prerequisite for the quality of childcare is competent professionals who provide this care. Therefore, the measures in this area will lead to the setting up of such instruments to develop their knowledge and skills so that children and their families can be provided with support that respects their rights and needs which will lead to an actual improvement in their living situation. An important area in this regard is the system of education, methodological support and supervision of employees.

Professional development should include the development of skills that are important for identifying and respecting the child’s views and for involving children in decision-making on matters that concern them.

Objective 4.4.2.c: Supporting parental competences and children from birth to 3 years of age

The educational success of children in the Czech Republic is strongly dependent on the socio-economic status of the family, including the motivation of the parents. We also know from research that the skills required for learning only build on the neurobiological foundation that is formed in the first years of life. It is essential to work to create a system of support for children and parents living in destabilising poverty and unstimulating environments that is comparable to early childhood services for children born with disabilities.

4.5 Access to education

The starting strategic document in the field of education is the Education Policy Strategy of the Czech Republic until 2030+ (MoYEH, 2020). Through this document, the Czech Republic is committed to the Strategic Framework for European Cooperation in Education and Training (ET2020) as well as to Europe 2020: A Strategy for Smart, Sustainable and Inclusive Growth.

Inequalities in education represent one of the most pressing problems, which were already addressed in the mentioned Education Policy Strategy of the Czech Republic until 2030+. Reducing inequality in education is an important topic in the development of education policy strategy in the Czech Republic for the next period, especially in connection with the creation of the Education Policy Strategy of the Czech Republic until 2030 with the aim of ensuring equal access to education for all children, pupils and students. One of the most serious phenomena of recent years in relation to inequalities in education is the increase in differences both in connection with the differentiation of individual schools at partial levels of education and, above all, across individual regions. This results in an undoubtedly negative impact on the conditions, course and results of education of children, pupils and students. In this respect, it seems absolutely necessary to define partial objectives and measures to increase the quality of conditions and the course of education in the regions or at individual schools of all levels of education. However, in many cases, unjustified and premature separation of children happens, and its societal negative effects seem to outweigh the positive ones. This selection is due to the limited availability of childcare facilities, dividing children upon commencing elementary schools widely varying in quality, or commencing grammar schools. According to international comparisons, differences among children in different schools in terms of their study dispositions are very high in the Czech Republic (OECD, 2011).

The basic precondition for a quality and functioning educational system is to enable each individual to develop their educational potential to the maximum and to ensure good accessibility and permeability of all levels of education.

The quality of pre-school and primary education helps to reduce social disparities and, in contrast, poor quality of widely available education deepens these disparities. The improved quality of pre-school and primary education is an effective measure to significantly reduce the costs of future social policies. Investing in quality and widely accessible initial education constitutes huge savings of future social spending. The educational structure in the Czech Republic is characterised by a high proportion of people with secondary education. In 2017, 70% of persons of 25-64 years of age had secondary education, the share of tertiary education in the Bachelor's degree cycle was 6% and the Master's degree 17% (OECD, 2022).

The amendment to Act No 561/2004, on pre-school, primary, secondary, higher vocational and other education (the Education Act) introduced, from the 2017/2018 school year, compulsory pre-school education for children who reach the age of 5 before the beginning of the school year. Compulsory pre-school education is free. It is primarily performed in kindergarten for 4 hours a day. The law also allows for individual pre-school compulsory education. The aim is to ensure the successful entry of all children into basic education.

From September 2017, children aged 5 and over are guaranteed a place in their catchment kindergartens. Municipalities must provide conditions for their education. Children from 4 years of age were also entitled to admission to a kindergarten established by a municipality or a union of municipalities (in accordance

with the gradual effectiveness of the provisions of the Education Act) from September 2017, and children from 3 years of age were guaranteed from September 2018.

A very important area that needs to be targeted is the area of early care for children under three years of age from families facing socio-economic disadvantage. In relation to children from socio-economically disadvantaged families, the effectiveness of the intervention is significantly increased by intensive care from an early age. The Czech legislation does not provide for any support or educational activities for children under the age of three who come from such families. The current system provides support and comprehensive care only to families with children with disabilities, primarily through early care services, i.e. in the area of providing support to a child and parents of a child under 7 years of age who is disabled or whose development is endangered as a result of adverse health conditions. The service is focused on supporting the family and the child's development with regard to their specific needs, in accordance with Act No 108/2006, the Social Services Act. This above support does not include support for socially disadvantaged children.

As of 1 September 2016, an amendment to the Education Act (Act No 82/2015) became effective, which set clear rules for entitlement support in the education of pupils with special educational needs and gifted pupils. Despite the problems that accompanied the introduction of the changes, the obvious positive is the fact that children receive support in a predictable way and coverage of costs associated with support is guaranteed up to the amount set by the implementing regulation. In January 2016, Decree No 27/2016, on the education of pupils with special educational needs and gifted pupils, was approved and became effective on 1 September 2016. The Decree defines the procedures for implementing changes to strengthen the education of children, pupils and students with special educational needs in mainstream schools through demanding support measures guaranteed by the State on the basis of the recommendations of the school counselling centre. The support measures are divided according to material and financial demands. An overview of support measures divided into five levels according to organisational, pedagogical and financial demands with their detailed description is contained in Annex 1 to Decree No 27/2016. Support measures are tied to a standardised financial intensity, which is uniform for the entire territory of the Czech Republic. The school thus obtains funds to ensure the provision of support measures for the education of the pupil.

Another important change in 2016 was the extensive modification of the Framework Educational Programme for Primary Education (FEP PE). The annex to the FEP, which regulated the education of pupils with mild mental disabilities (MMD), was removed and used in the preparation of a unifying curriculum. As of 1 March 2016, the amended FEP PE entered into force.

The unifying curriculum supported both the unification of educational conditions for all primary school pupils and the individualised education of pupils using support measures for pupils with special educational needs, including the possibility of adjusting educational content from the third level of support, including set minimum levels of expected learning outcomes from education for the reasons of mental disability. According to qualified estimates, in the 2017/18 school year, Roma pupils accounted for 29.5% of all pupils educated in programmes for pupils with MMD. A high share of Roma pupils are educated in primary schools which are in catchment areas for excluded localities.

However, the ongoing evaluation of the implementation of the introduced changes shows that the support is used effectively, especially in the case of children with disabilities. In contrast, no significant change can be observed in children who are handicapped by their social status and poverty in education. Support

measures for these children are not being used enough.⁵⁰ Inequalities continue to be reflected in the high early school leaving rates from primary education, i.e. the number of pupils who do not continue their education after completing compulsory schooling, and the number of students who drop out of/do not complete secondary school.

Effective cooperation between the family and the school is absolutely essential for the development and support of at-risk children. The school supports the social function that is primarily performed by the family. Schools and school facilities do not have “jurisdiction” over parents and families of pupils; the Ministry of Education can influence the population of pupils’ parents only indirectly. For this reason, it is necessary to support cooperation across governmental departments and effective involvement of ASLPC in solving possible cases of:

- non-participation of children in compulsory pre-school education;
- non-fulfilment of compulsory schooling;
- non-cooperation of parents with school counselling facilities;
- non-functional application of support measures at school;
- early school leaving.

In order to ensure compulsory schooling or extend the education of an adolescent child, the public authorities also use repressive interventions in the life of the child and their family, which are in conflict with the child’s right to be cared for in the family. One of the most serious repressive interventions is the placement of a child in school facilities for institutional and protective education (e.g. a diagnostic institute, a children’s home with a school or an educational institution) in order to provide education and upbringing. This practice needs to change.

Instruments to prevent and address the consequences of early school leaving will be aimed in particular at lowering the threshold for access to education for socially disadvantaged children. Intervention in the field of education should primarily consist of the development of soft motivational and support programmes for children and their parents using alternative approaches to education based on a community approach. Through them, the motivation to learn and to extend the children’s education will be gradually increased with the use of positive role models (education should not be associated exclusively with the school environment; it is important to naturally move it to the environment of excluded communities). There is a potential for increasing motivation to learn in leisure and hobby education programmes for children focused on their all-round development and stimulating their natural interest in acquiring knowledge. It will also be necessary to connect the intervention in the field of education with the intervention on the social level, seeing as a stable social background; material security and overall well-being of the family is a necessary precondition for its interest and support for extending the child’s education. It is important to place special emphasis on the pre-school education of children, but the specific needs of parents must also be taken into account, primarily the needs of those who are more at risk of financial distress or social exclusion, such as single parents.

On the other hand, attention must be paid to changes in the education system that contribute to social climate change in schools in terms of their openness to accepting otherness. The school environment is

⁵⁰ Motivational and support instruments aimed, among other things, at removing structural barriers preventing the child from accessing quality education (change of social climate in schools, an open atmosphere towards children from different socio-cultural backgrounds, etc.) are used sporadically.

significantly influenced by the attitudes of teachers towards children who differ in some way from other students, but also by the attitudes of students themselves (their prejudices and stereotypes), and teachers must be competent enough to work with these attitudes. The guide to achieving positive change is to support social climate change in schools so that they are open to:

- the pupils, who may have different needs to which the school is able to respond, and the school shall not make efforts to redirect the pupil to the special education segment and shall have low-threshold conditions for the education of pupils;
- the parents, who shall be perceived as the equal partners of teachers who actively participate in solving the child's situation;
- the community, whose resources shall be used by the school to informally support disadvantaged families, the development of which shall be the school's objective, e.g. by creating space for parents' activities or actively participating in community planning and participating in the development of necessary services in the community.

On a practical level, positive change can also be achieved through education, supervision of teachers, dissemination of examples of good practice and taking into account the needs of diversification of teaching with regard to the individual needs of pupils. It is necessary to take into account both the specific needs of talented children and disadvantaged children (socially or medically) or children at risk of any form of discrimination (OECD, 2012; People in need, 2009). Public libraries play a significant role in terms of free non-formal education and leisure activities.

Risks and barriers:

1. Inequalities in education, segregation of children in education, the threat of an increasing number of segregated schools with Roma children.
2. Absence of systemically anchored early care for children under the age of three from families facing socio-economic disadvantages. Insufficient capacity and quality of pre-school care for children from socially excluded backgrounds within some regions. Low awareness of parents about compulsory pre-school education, absence of motivational instruments.
3. Unavailability of hobby education for children from low-income families.
4. Insufficient readiness and methodological support of schools and teachers to implement the principles of an equal approach in education and to work with pupils with varying degrees of support measures, lack of services of school psychologists and specialised teachers, SCC and other support services enabling inclusive education in the real world. Lack of schools' own funds for further education of educators.
5. 5. Insufficient communication and cooperation of the school with other stakeholders, especially insufficient interconnection with social work providers who have the potential to contribute to solving the unfavourable social situation of the family and thus creating suitable conditions for education and development of the child.

Objective 4.5.a: Reduce the risk of poverty through education.

The measures will be aimed at continuous monitoring and evaluating the impacts of the adopted measures in relation to the education of children from excluded localities and otherwise socio-economically disadvantaged children, and their updating at the general level and at the level of individual educational

paths. Part of the objective will be the introduction of instruments to prevent and address the consequences of early school leaving, standardisation of the lifelong learning system, active support for the involvement of children from disadvantaged backgrounds in hobby education and raising awareness about the links between poverty and education. Instruments will be created to prevent early school leaving from education at the level of kindergartens, primary and secondary schools, and to minimize subsequent problems of such pupils and learners on the labour market.

Objective 4.5.b: Ensure comprehensive, interdisciplinary early educational care for children under three years of age from excluded families or non-incentive families at risk of exclusion, support for pre-school education, upbringing and care.

The implementation of the measures will be aimed at the legislative regulation of early care and its provision, especially in relation to localities with a higher number of children at risk, and the development of professional, spatial and personnel capacities to ensure quality pre-school education.

Objective 4.5.c: Ensure better, long-term methodological support of schools and individual educational personnel for the implementation of the principles of equal approach in education and for work with pupils with varying degrees of need for support measures. The development of school pedagogical facilities, school psychologists and specialised educational workers, as well as a system of quality education for pedagogical workers.

The implementation of the measure will be aimed at supporting the active cooperation of schools and founders in strategic planning, development of methodological readiness of educational staff in working with children, pupils and students with special educational needs and with gifted pupils, setting up quality and accessible school counselling services, including sufficient personnel and professional capacities in education counselling.

Objective 4.5.d: Develop communication and cooperation between the school and key entities, including other schools and school facilities, local Government representatives, academia, service providers, parents and others.

The measures will support the development of mutual cooperation and communication of all relevant entities, their interconnection and the availability of follow-up services.

Objective 4.5.e: Prevent or avoid the unjustified sorting of children and their segregation by the socio-economic status of the family.

The aim is to increase the quality of conditions and the course of education and reduce differences both in connection with the differentiation of individual schools at partial levels of education and especially across individual regions, and to ensure equal access to education for all children, pupils and students without distinction.

4.6 Access to housing

Access to housing is a basic condition for the social inclusion of individuals and families; homelessness is seen as extreme social exclusion making it impossible for people to access other resources (Hradecká & Hradecký, 1996).

As part of the extension of the Strategy to include homelessness topics, which were addressed in a separate conceptual document until 2020 (MoLSA, 2013), the functional definition of ETHOS (European Typology of Homelessness and Exclusion from Housing), which is considered to be the basic starting point for addressing the issue of homelessness and people at risk of losing their housing, was included in the text of the Strategy and approved by the Government. According to this definition (see page 27), “homeless” is a collective term for a heterogeneous population group comprising both people who sleep outdoors (roofless), and homeless persons who, due to the inability to provide for other housing, live in hostels and some residential social services (shelters or half-way houses), and also people whose living is uncertain, including victims of domestic violence and people who live in unsatisfactory forms of housing – i.e. in conditions that do not meet the minimum standards of living in a given cultural and social environment. Homelessness is a complex, dynamic and differentiated process in which different individuals and groups go through different entry and exit points (Hradecký et al., 2012). The risk of homelessness can cover a wide range of situations and conditions in which a person may find themselves, from the risk of losing their home to the situation when the person returns to standard permanent and non-segregated housing.

Each of the situations identified in the ETHOS definition represents a significant threat to the individual, and more often than not, a limitation or inability to meet their basic needs. The negative impact of housing deprivation is manifested in all spheres of life – economic, social, health and spiritual. Therefore, housing is a fundamental condition for human development. This fact also determines how homelessness and housing need can be effectively tackled: a range of instruments must be used, such as preventive measures to prevent persons from becoming homeless, sufficient supply of standard rental housing available to target groups facing housing deprivation, available assistance in the form of social work and social services focused on the issue, a benefit system that meets the needs of target groups, ensuring access to the labour market for the vulnerable, or the effective availability of health care for socially excluded people.

Currently, there is no comprehensive legislation in the Czech Republic regulating the rules for ensuring protection and support in the area of access to housing. The legislative solution for social or affordable housing is being led by the Ministry of Regional Development, which, at the time of the update of this Strategy, was preparing a draft law on housing support in cooperation with the Ministry of Labour and Social Affairs, with the law expected to come into force in 2025. Furthermore, the MoRD has prepared a subsidy and loan programme, implemented by the State Fund for Investment Support, called "Construction for Municipalities" pursuant to Government Regulation No. 112/2019 Coll., on the conditions for the use of funds from the State Fund for Housing Development for the acquisition of social and affordable housing and social, mixed and affordable houses, as amended. Social flats are intended for eligible households who have low income and inadequate housing.

Partial aspects of the provision of assistance to citizens in the field of housing are currently laid down mainly in the following laws: Act No 128/2000, on municipalities (municipal establishment), as amended, which governs the municipalities' powers in the area of housing, i.e. the general power of a municipality

to care for the housing needs of its inhabitants,⁵¹ Act No 111/2006, on assistance in material need, as amended (persons in material need are provided with assistance in material need, including housing supplement) and Act No 110/2006, on living and subsistence minimum levels, as amended, Act No 117/1995, on State social support, as amended (housing allowance) and Act No 108/2006, on social services, as amended (especially social counselling, outreach programmes, shelters, half-way houses, sheltered housing, overnight facilities, day centres and socially motivational services for families with children).⁵²

The area of investment support for housing concerns in particular Act No 218/2000, on budgetary rules and amending certain related acts (the Budgetary Rules) and Act No 211/2000, on the State Investment Support Fund, as amended by Act No 61/2005 and Act No 113/2000.⁵³

On 12 October 2015, the Government adopted the Concept of Social Housing of the Czech Republic 2015–2025 (hereinafter the “Social Housing Concept”) (MPSV, 2015b). This material is a framework document that defines the direction of building a social housing system for people in need in the Czech Republic. The Social Housing Concept considers social housing as a complex system of assistance to people facing housing deprivation, which connects housing and social policy instruments and its key principles include individualised social work and the principles of Housing Led and Housing First – an innovative method used to help homeless people in need of comprehensive support, which focuses on the provision of standard housing without prior treatment or “training”, on support based on their individual needs (i.e. housing in dwellings outside socially excluded and segregated areas) and using all tools to prevent housing loss. Social housing is perceived as a complex set of instruments that, in its interconnectedness, helps to end homelessness.

According to experts in the field of social housing, the social housing system must include the following comprehensive tools:⁵⁴

- Housing loss prevention instruments;
- Instruments to support housing retention and to help with obtaining new housing through social work;
- A system of social services and social work for solving crisis life situations;
- Community work instruments;

⁵¹ In accordance with the Act on Municipalities, the independent competence of a municipality in its territorial district shall cover taking care of creating suitable conditions for social care development and for meeting the needs of its citizens, in accordance with the local context and local practice. This concerns, in particular, satisfying the needs in housing, health protection and development, transport and telecommunications, the need for information, upbringing and education, overall cultural development and protection of public order.

⁵² The municipality has several obligations towards all persons present in its territory: According to the Act on Social Services, a municipality acts not only with regard to its citizens, but also to all persons or groups of persons present in its territory (these concern the persons who actually live there). The municipality is obliged not only to determine the needs for the provision of social services to persons or groups of persons in its territory, but also to provide assistance to these persons (for example, residential social services – shelters), in cooperation with social service providers or other municipalities and regions. Section 94 of Act No 108/2006, on social services, as amended.

⁵³ Other instruments to support housing are Government Regulation No 2/2021, on the conditions of use of funds from the State Fund for Investment Support in the form of a loan to support the construction of rental housing in the Czech Republic, and the MoRD subsidy programme Support for the Construction of Subsidised Apartments, as well as legislation governing the area of rental housing, i.e. Act No 89/2012, the Civil Code, as amended or Act No 40/1964, the Civil Code, as in effect on the date of the establishment of legal relationships (in accordance with the transitional provisions, in particular Sections 3074 to 3077 of Act No 89/2012, the Civil Code).

⁵⁴ Conclusions drawn from the working groups on the revision of the Concept of Social Housing of the Czech Republic 2015–2025, which took place in the period 5–7/2018.

- Instruments for the creation and development of a social housing network;
- Financial instruments for municipalities and other providers of social housing, financial instruments for citizens in the form of social housing benefits.

Inaccessible or low-quality housing is a fundamental and long-term unresolved problem. The common denominator of excluded localities and a fundamental issue of social exclusion remains the deeply substandard quality of housing at relatively high rents, which is often paid through housing benefits in a situation where the current housing market for this group of people is closed or severely limited (Bartoš et al., 2013).

Continuously rising rent prices are one of the main causes of housing unaffordability in the Czech Republic. According to regularly published data from research by Deloitte, rents as of the fourth quarter of 2022 in the Czech Republic increased by 40% on average over the last five years (Deloitte, 2022a). On average, the Czech household will spend 19.7% of its net income on housing in 2022. However, for rental housing, these expenditures are twice as high as for housing in a privately owned house or flat (34.2% vs. 16.2%). Vulnerability on the housing market no longer only affects the most disadvantaged, who should be prioritised for social housing (groups defined in ETHOS or meeting the income condition of spending more than 40% of disposable income on housing), but also low and middle income households, the latter of whom are finding it increasingly difficult to bear the cost of housing. However, the priority groups are determined by the social housing providers themselves, taking into account the local and regional situation, and their selection is not always based on the analysed needs of all target groups in the region or it is not properly and transparently justified. The average age of inhabited apartment buildings in the Czech Republic was 52.4 years and the average age of single-family houses was 49.3 years. The average age of occupied dwellings at the date of the census was 46.5 years. Compared to other EU countries, the Czech housing stock is rather old. In the European context, the Czech Republic is one of the countries with a lower floor area of dwellings (MoRD, 2019).

From the point of view of research, mapping the area of housing deprivation is complicated,⁵⁵ as it is necessary to take into account, among other things, the risk of housing loss. This is particularly difficult for groups living in insecure and substandard housing. These are, for example, persons at risk of domestic and gender-based violence who have specific needs in terms of not only the social services provided (specialised shelters, including shelters with a hidden address), but also specific needs in terms of housing and housing support (the need for a safe dwelling, long-term social and therapeutic support, etc.). Therefore, it is necessary to take the specifics of this target group into account when formulating measures in the area of access to housing.

⁵⁵ In 2016, the MoLSA commissioned the project “Analysis of the structure of municipal housing in the Czech Republic”, the aim of which was to obtain detailed statistical data on the composition of the municipal housing stock according to its size structure and the purpose of its use. The project carried out an extensive quantitative research involving a total of 2 229 municipalities, which represented 35.6% of the total number of municipalities in the Czech Republic. In these municipalities there are a total of 179 969 municipally owned dwellings, of which 53.1% are municipal flats, 18.5% are social flats and the remaining 13.8% are obstacle-free flats. However, the results of this analysis cannot be considered decisive, as it was not possible to obtain data from all municipalities in the Czech Republic. Source: PROCES – Centrum pro rozvoj obcí a regionů, s.r.o.: Analysis of the structure of municipal housing in the Czech Republic. [online]. Ostrava: 2016. Available at: https://www.mpsv.cz/documents/20142/225517/Analyza_struktury_obecnich_bytu_v_CR_TB05MPSV008.pdf/dd93c749

At the same time, it is difficult to statistically accurately identify the group of homeless people and people at risk of social exclusion. The methodologies of previous population censuses differed, and therefore the results are not comparable over time.

The MoLSA research from 2015 showed that in the territory of the Czech Republic, municipalities with extended powers estimate that there are almost 119 thousand people at risk of housing loss (in unsuitable and insecure housing) (MPSV, 2015a).⁵⁶ The total estimate of people without housing was almost 68.5 thousand, which includes people that are not living according to the ETHOS (including people outside or in overnight facilities, people in shelters and hostels and other residential facilities). Of the total estimated number of people without housing, 23.6% were women, 11.9% were under 18 and 10.3% were over 65.

In July 2019, the Research Institute of Labour and Social Affairs presented the results of the first phase of the output of the “Research of the homeless population in the Czech Republic with regard to economic activity depending on the phases of the life cycle (7/2018 – 6/2020)” project, namely in the “Census of homeless people in the Czech Republic 2019” study (Nešporová et al., 2019).

The aim of the research is to present the results of the most comprehensive census of homeless people in the Czech Republic to date. The census of monitored persons took place in the second week of April 2019 and was carried out in 403 municipalities in the Czech Republic. The estimated total number of homeless people in the Czech Republic was 23 900, of which 2 680 were children under 18, however, taking into account the fact that, for example, persons in commercial hostels were not included, the estimate of the number of people falling into hidden homelessness was not included. However, the study is of great importance in terms of repeatable feasibility. Approximately half of these persons (11 608) belonged to the roofless category, i.e. they slept outside or in dormitories for the homeless. Roughly one-third of the counted persons (6 135) lived in shelters, and roughly one in ten people were homeless at the time of the census in a healthcare facility (2 774), most often in a psychiatric hospital. Prisons also housed a significant number of homeless people (1 500) who would have nowhere to return after release because they had no accommodation before entering prison or lost it during imprisonment (Nešporová et al., 2019).

The breakdown by region showed that, in total, most homeless persons were counted in the Moravian-Silesian Region (3 541) and Prague (3 235), followed by the South Moravian Region (2 453), the Central Bohemian Region (2 201) and the Ústí nad Labem Region (2 009). This basically corresponds to the breakdown of regions according to size, but with the fact that some homeless people from the Central Bohemian Region undoubtedly migrate to Prague. When recalculating homeless persons per thousand inhabitants of a given region, the highest concentration of these persons is in the Karlovy Vary, Moravian-Silesian, Ústí nad Labem regions and in Prague. In contrast, the lowest numbers of homeless people per thousand inhabitants are apparent in the Vysočina and South Bohemian Region, i.e. regions with a small number of large cities. Regarding the category of roofless persons, i.e. those sleeping outside or in dormitories for homeless people, their numbers per capita are significantly higher in Prague and in the Karlovy Vary and Moravian-Silesian regions.

In 2022, the MoLSA in cooperation with the research agency SocioFactor followed up on the 2019 census of homeless people with the research "Census of Homeless People from Selected ETHOS Typology Categories". Its main objective was to determine the numbers of people from selected previously

⁵⁶ People in unsuitable housing were defined as persons living in temporary and unusual buildings, in uninhabitable or overcrowded dwellings, etc. People in unsatisfactory housing were defined as those temporarily living with family or friends, without legal entitlement, in squats, persons at risk of eviction from their own dwellings, etc.

unmonitored subcategories of homelessness falling under the conceptual categories of houseless, substandard and insecure housing. According to this research, 29,000 persons of Czech citizenship were living in hostels and inadequate housing. Of these, a total of 12,445 persons living in 10,358 households were in hostels and other accommodation facilities. There were 16,058 people living in inadequate housing⁵⁷ in 4,215 households. In the Czech Republic, 37,472 people in housing deprivation lived in overcrowded flats (less than 8 m² per person), more than a third of them were children under 18 years of age. Regarding the selected categories of uncertain housing⁵⁸ according to the national subcategories of the ETHOS classification, it was estimated that 191,500 people living in 97,000 households in the Czech Republic fall into these categories. Part of the 2022 count included comparing the numbers of homeless people in the roofless category (people sleeping outdoors and in night shelters) and some people in the houseless category (people in shelters) with the 2019 results. It said the total number of people without a roof in April 2022 was about 3% higher than in 2019. Thus, in 2022, there will be approximately 12,000 people living without a roof in the Czech Republic, compared to 11,600 in April 2019. According to the 2019 Census, the number of persons in shelters was 6,135, while in 2021 the Population and Housing Census counted 5,981 persons. Given that the 2019 data was based on partial extrapolation, it can be assumed that the number of people in shelters was approximately the same in 2019 and 2022.

The Housing Exclusion Report 2021 (Iniciativa Za bydlení, 2021) states that between 35 000 and 62 000 households are in housing deprivation and that between 20 000 and 51 000 children under the age of 18 are growing up in such households. Another 130 000 to 190 000 households with approximately 100 000 children are at risk of losing their housing. A further approximately 300 000 to 350 000 households, of which one third are households of senior-age persons, suffer from excessive housing costs (spending more than 40% of their income on housing). According to this Report, approximately half a million Czech households with just under one million people face one of the three housing problems mentioned above. Households in housing deprivation are mostly located in the largest cities of the Czech Republic, i.e. Prague, Brno and Ostrava. It was also confirmed that North Bohemia and North Moravia are more affected by housing deprivation as regions with a higher proportion of inhabitants in difficult social circumstances (Iniciativa Za bydlení, 2021). With rapidly rising energy prices, the number of such households will grow even further. The high burden of expenditure on housing placed on household includes the energy-intensive operation of the housing stock: energy and operation account for about half the total expenditure on housing (CZSO, 2017). In the Czech Republic, 2.8% of the population, i.e. 298 000 people, cannot heat their homes sufficiently (Očenášková, 2021).

In the absence of social housing and because of the abuse of social housing benefits by landlords, the inhabitants of the excluded localities and the State have found themselves in the position of hostages of poverty industry entities.

The conditions and possibilities for assistance from municipalities continue to differ significantly; many social housing activities are fully dependent on EU funding. Housing support through housing benefits has shown a declining trend in the long run.

⁵⁷ These were dwellings in flats, houses, non-residential premises or cottages that do not meet at least one of the basic conditions of standard housing, including available running and hot water, electricity, a toilet, bathroom/shower and functional windows or entrance doors.

⁵⁸ The category of insecure housing included persons temporarily living with relatives or friends (with no other housing options), persons in subletting (with no other housing options), persons living in an apartment without legal grounds, persons in an illegally occupied building, persons who have been evicted from a rental apartment, persons at risk of eviction from their own apartment, and persons at risk of domestic violence.

Expenditure on housing represents the greatest burden on low-income households and over-indebted families; particularly vulnerable are households with a single income (single-parent families, families with unemployed members) and single-member households, especially in the case of the elderly. The highest burden is placed households who live in big cities with higher rents. Housing needs to be made more accessible to all these target groups.

There is currently no comprehensive EU-wide definition of energy poverty, but some Member States have already developed their own definitions. The European Union considers energy poverty to be a major issue, which further accentuates income poverty or health problems (problems with energy affordability cause additional debt, increased stress and generally worsened conditions for already poor households, which can lead to disconnection from energy or excessive reduction of its consumption, which in turn can lead to health-related issues); therefore, the European Economic and Social Committee (EESC) has recommended that the Member States implement a general definition of energy poverty into their legal systems in order to harmonise its measurement and related statistics. According to the VŠE TK01010194 project focused on vulnerable consumers and energy poverty, energy poverty is typically characterised as a situation where “a household is unable to adequately heat its home or meet its other energy needs at an affordable price” (University of Economics in Prague, 2021, p. 4). According to the results of this project, it appears that there is a need to define in legislation, in particular, the concepts of “sufficient” heating and “necessary” energy needs and to create an umbrella body within the State administration responsible for addressing the issue of energy poverty.

Housing costs have increased significantly in the last two years. According to data from Deloitte, which collects data from real estate portals, rent grew fastest in 2022 in Prague, by 22.9% (Deloitte, 2023a). On average, property sales prices in Prague and all regional cities increased by 10.3% in 2022 (Deloitte, 2023b).

In the Czech Republic, the trend of favouring own housing over rented housing continues. According to the 2021 Population and Housing Census (CZSO, 2021), 60.6% of Czech households currently live in their own house or flat, while only 19.9% live in rented housing. By contrast, in Germany, for example, only 46% of housing is owner-occupied. Yet according to the Deloitte "Property Index" study (2022), Czechs have to save for new privately owned housing for the longest time among the 23 European countries compared (Deloitte, 2022b). The average price of owner-occupied housing increased by almost CZK 900 between 2019 and 2022 (from CZK 5,060 to CZK 5,903), while the average price of rent increased by almost CZK 1,800 (from CZK 9,017 to CZK 10,808) (CZSO, 2023a, own calculation).

Housing allowance and housing supplement are provided to households that already have a home, so they do not reduce the affordability of housing for people excluded from housing. In this way, assistance for persons or families who are facing income execution is not addressed, and as a result they are in fact left with no money for housing costs, financial assistance for persons or families without proper housing contracts or finding housing for persons/families who have lost their homes or have nowhere to live. Act No 286/2021, amending Act No 99/1963, the Code of Civil Procedure, as amended, Act No 120/2001, on court bailiffs and enforcement activities (the Enforcement Code) and amending certain other acts, was approved in July 2021. This Act was discussed in the Chamber of Deputies as Document of the Chamber 545. The legal regulation of the suspension of unsuccessful executions should contribute to the improvement of the position of debtors in execution, both the general legal regulation of this institute (suspension of unsuccessful executions after six years) and the “grace summer” (suspension of executions conducted to recover claims of public debtors after payment of the principal) or suspension of trivial

executions to recover amounts not exceeding CZK 1 500. In addition, a flat-rate reimbursement of the wage-payer's costs for acts performed by the wage-payer in execution by deductions from wages and other income was approved. This compensation should help to increase the willingness of employers to employ persons in execution.

The instrument for entering standard housing is the benefit of assistance in material need, extraordinary immediate assistance, which can be used to cover securities (i.e. deposits required within the framework of tenancy agreements). The threat of social and spatial exclusion affects mainly households that are disadvantaged in the housing market because of the lessor's prejudice that they pose a great risk – such as homeless people, people living in shelters and crisis forms of housing, households living in socially excluded localities, single-parent families with children, households with a larger number of children, the elderly, households with an uncertain income from employment or business, households of some ethnic minorities (e.g. Roma⁵⁹) and foreign immigrants. The Czech Republic is not yet sufficiently using instruments that would make the free market in standard housing accessible to disadvantaged households (e.g. guarantee mechanisms, social rental real estate agencies, etc.). High-quality field social work with the community along with the application of housing policy tools, including the consistent application of anti-discrimination policy is not accessible everywhere. This is governed by the Anti-Discrimination Act, which, among other things, enshrines the right to equal treatment in access to housing and in provision of housing. However, the practical application is inconsistent, and people are excluded from publicly offered services (renting or buying a flat) on discriminatory grounds, and the principles for allocating municipal housing may also contain elements of discrimination. The principles are subject to supervision by the Ministry of the Interior, and discriminatory conduct can be brought to the attention of an administrative authority or the Ombudsman. Non-discriminatory housing policy also means avoiding spatial exclusion of socially disadvantaged persons (Valachová & Pösl, 2009). Risk also lie in the insufficient application of the priorities of the 2008 Policy of Territorial Development of the Czech Republic (Government Resolution No 929/2009) in the field of preventing spatial segregation.

To assess the overall extent of social exclusion, the Social Inclusion Agency has created a Social Exclusion Index in its 2020 Methodology for Assessing the Level and Extent of Social Exclusion in the Territory (Lang & Matoušek, 2020). In terms of quality, this is a more extensive tool than the previous “Gabal maps of socially excluded localities” (GAC spol. s r. o., 2006 a GAC spol. s r. o, 2015); this new tool is able to record and compare the status of the development of social exclusion over time (the level of social exclusion at a certain point in time between different territorial units).

Social segregation negatively affects not only residents of segregated localities, but also residents of the neighbourhood. The concentration of socially excluded persons in developed countries has led in the past to the strengthening of the social and spatial segregation processes (Lux et al., 2010). In order to effectively prevent it, the MoLSA, in cooperation with the Faculty of Science, Charles University, has developed a Methodology for Identifying Residential Segregation, which enables municipalities to identify localities of the current residential situation and also to reveal their potential future emergence. The methodology enables the prevention of the emergence of new localities of residential segregation (Sýkora, 2018). In

⁵⁹ According to a survey conducted by the European Union Agency for Fundamental Rights (2022), Roma people in the Czech Republic live in lower-quality housing than the general population. If, according to this data from 2021, 17 % of the general population faced housing deprivation, in the case of the Roma population it was more than half (52 %). 82 % of Roma people lived in overcrowded apartments, compared to 17% of the general population. More than half of the Roma in the Czech Republic (55%) have felt discriminated against in access to housing in the last 5 years.

order to identify the target group, which is at risk of social exclusion and is characterised by difficulties in acquiring housing and whose concentration in the area of towns and villages may lead to undesirable segregation, the living allowance, i.e. the institute of persons assessed together for the provision of living allowance was chosen as the indicator. This simple indicator captures social inequality in an integral way for a broad spectrum of people in unequal social positions (unemployed, large families with children, vulnerable elderly).

In 2019, the MoLSA commissioned the INESAN Institute to prepare an analysis entitled Research on Neighbourhood Relations and Attitudes on Social Housing (INESAN, 2019). This representative survey from May 2019 shows that the citizens of the Czech Republic support the regulation of social housing by a separate act. The survey found that 85% of citizens support the creation of an act that would focus on social housing, with an even higher level of support (92%) among those respondents who have some personal experience with residents of social housing. The survey also showed that 93% of respondents believe that the establishment of social housing is necessary and 79% of respondents think that there should be more social housing than there is now. However, at the same time, the majority of respondents said that each municipality should be able to decide independently whether or not to build social housing (87%). Therefore, there is strong support among residents for the development of social housing, and other residents of the community should be taken into account in its planning and creation. To the greatest extent, respondents would accept families with children, single mothers and single parents with children, people after divorce, victims of domestic and gender-based violence, the elderly, people with low incomes, and people with disabilities in their neighbourhood (more than 70%). These are precisely the groups of people targeted by social housing, as they are among the most vulnerable in connection with housing loss. It appears that social work should focus on neighbourhood relations and social workers should be further educated in this area.

At the same time, a methodology for determining housing deprivation and the target population for the purposes of social housing was prepared and certified at the MoRD, in accordance with the rules for providing EU public support based on market failure at the individual level (SOÚ AV ČR, 2017). The MoRD used this material in the preparation of the parameters of the Construction for Municipalities programme (GR No 112/2019).

The number and share of municipal and State housing decreases. In the census of the Czech Statistical Office in 1991 there were almost 214 thousand municipal and State residential houses, in 2001 their number decreased to 79 thousand, in 2011 the State or municipality owned 48 146 inhabited houses with dwellings and 31,443 houses in 2021, which was 1.6% of all occupied houses with flats in the Czech Republic (CZSO, 2021). Municipal and State housing are more common in large cities. Overall, the share of rental apartments is falling sharply (MoRD, 2016). With regard to new construction, family houses dominate over apartment buildings; in the case of newly built apartment buildings, there is a dominant part of larger and more expensive apartments (Drápal, 2012). The problem of “derelict” privately owned buildings with a link to “poverty industry” also persists (rental of substandard housing, i.e. forms of housing such as accommodation facilities or non-residential space for inadequate amounts paid de facto from benefits in material need) (MoRD, 2018).

Support instruments, even the existing ones, are used insufficiently. Grant programmes only provide an economic stimulus, the amount of which is limited by the EU rules laid down for public support. In addition to the aforementioned Construction programme, the State Investment Support Fund provides loans for

rental and owner-occupied housing to selected target groups (elderly, young families under 40 years of age, persons with disabilities). These are only loans, not subsidies, and the recipients need to meet quite demanding conditions. Therefore, the IROP subsidy programmes financed during the programming periods from the European Regional Development Fund provide the biggest benefit in this area. Although the legislation obliges municipalities to ensure the needs of its citizens, including housing, many municipalities believe that social transfers (including social housing) are the responsibility of the State and should thus be financed from the State budget (Lux, 2012). The Czech Republic also does not use innovative instruments to ensure a sufficient amount of social housing, such as social real estate agencies and similar services. Among the approaches within the municipal housing policy, the main ones that have proved successful are housing contact points, the introduction of case management within the networking of organisations in the locality, the use of social real estate agencies, financial instruments such as crisis and guarantee funds or material instruments such as food and furniture banks. A good mapping of the situation in a given locality is a prerequisite for all housing-related activities. The sustainability of the established system of social housing and the related social work and other applied instruments is becoming a hot topic. The transition of people from social rental housing to affordable rental housing poses another problem, because in many cases, such transition does not exist or does not work in the municipalities.

Sufficient regulation is lacking in the Czech legal system in terms of the protection of persons at risk of eviction (e.g. the obligation to discuss evictions with the persons concerned in order to find alternative solutions to eviction, setting sufficient notice and prohibition of evictions in unfavourable times, the obligation of municipalities to consult persons or to offer support to evicted persons with finding housing, especially in the case of at-risk groups or persons) (European Committee of Social Rights, 2016). Particularly in the case of seeking an alternative solution along the lines of the FAWOS mechanism, there is an effort to introduce into the legal system, as part of the prevention of housing loss, an information obligation of the court/public institutions towards municipalities. Currently, two ways of introducing this are being explored. In the first instance, the court would instruct the defendant in the first written step in the proceedings to contact the relevant municipality, which may provide social assistance in the area in order to maintain housing or provide other housing. Subsequently, in the event that the court decides on eviction and this decision becomes final and enforceable, it would also inform the relevant municipality that such a decision has been made. However, negotiations on the specific form of the proposed measure are still ongoing. The MoRD is also addressing the issue in its analysis of lease relations, the preliminary results of which are expected in the first half of 2022. It is also addressing the issue in its Housing Commission and in discussions at the Professional Civil Law Collegium of the Institute of State and Law of the Academy of Sciences.

Furthermore, instruments for the prevention of housing loss are not sufficiently used and systematically linked. Housing loss prevention instruments include social policy instruments (e.g. housing benefits – especially housing allowance), but also social services and social work and housing policy instruments (civil code measures, State housing policy, implementation of housing policy at the municipal level, early warning of debts, work with debtors, efficient and fair selection of tenants, cultivation of the housing market, etc.). Interconnection with courts is also important (e.g. in the area of early notification of judicial eviction from a dwelling, etc.).

A key and integral part of social housing is represented by social work, i.e. the activities of social workers, without whose support there would be no effective and long-term sustainable operation of the social

housing system. At the same time, it turns out that social work is a necessary condition for the functional setting of local social housing systems. The cumulative role of social work support and rent control is one of the challenges often faced by municipal social workers. Furthermore, the maximum number of clients per worker, support for the training of social workers and, in particular, advocacy for the financial sustainability of social work in municipalities and the creation of subsidy titles for this area are necessary for the adequate quality of social work.

In social work practice across the whole Czech Republic, the application of the “housing with support” method is still insufficiently used; the method consists of the social worker supporting the person or family to keep their housing, and also in collaboration with a team of relevant actors as to the needs of the client (a nurse, a representative of the local social department, the owner of the apartment or a peer, i.e. a person with a similar experience, etc.).

The effective implementation of prevention in the form of field social work is negatively affected by understaffing (or inefficient use of the recommended types of employment) of social workers in municipalities, of the workers at the authorities for the social and legal protection of children and those of the Labour Office. The emphasis on standardisation of social work and setting and enforcing performance indicators is often counterproductive in addressing the life situation of clients and it cripples the preventive effect of services that are supposed prevent situations that have not occurred or should not occur. As the service system becomes more sophisticated, the number of barriers encountered by social workers and clients increases. This particularly affects people facing high levels of exclusion, such as homeless seniors, people with infectious diseases whose health condition does not require hospitalisation but who need a medical regimen, homeless and income-deprived people with reduced self-sufficiency, and people with mental illness, including addictions (MoLSA, 2021).

At the same time, solutions of housing deprivation must take into account its broader context – as a social phenomenon and not only a consequence of the unavailability of housing. It is often affected by a several interacting adverse social situations (poverty, limited access to health care and education, debt, etc.) and therefore requires a multi-disciplinary co-ordinated response. Comprehensive and coherent interventions of the entities that would complement each other and respond synergistically to the individual needs of people facing housing deprivation are still limited by the insufficient coverage or availability of the bundle of services at a single place, as well as their mutual setup for co-operation and orientation in the offer, competencies and legal framework of relevant agendas. Their “case” interactions are few and remain content-poor, monotonous and often asymmetrical. The leads to, among other things, the undesirable tendency of social services to take on a basically assisting role vis-à-vis institutions that use them to facilitate their own contact with the client, to achieve his or her cooperation and, to some extent, to control him or her (messages, escorts, assistance at meetings, verification of data, etc.), especially in contact with the Labour Office, or the authorities of social and legal protection of children, but also with school facilities. A significant part of the work of social services is limited to accompanying people, intermediating messages and assisting them in filling out documents from other institutions. Similarly, the capacity of these institutions to build relationships with clients and respond to their needs is not being developed.

In terms of improving people's access to affordable rental housing, the future direction of policies aimed at the creation of a social housing system will have a significant impact; in addition to various forms of social housing (in response to different needs and barriers mentioned above) these policies would clearly

regulate the position of the State, municipalities and other actors. The absence of these instruments has a negative effect on the increase in the number of people living in substandard housing or staying in social services facilities.⁶⁰ As a result, this situation brings increased costs for social systems, but also for health care systems, the judiciary, prisons, etc.

In order to set up effective social housing policies, it is also important to regularly collect data on the number of people excluded from housing and also on the state of the housing stock in the Czech Republic with regard to the situation in the area of social and other supported forms of housing.

The principle of “housing as a reward” means an approach that is reflected in the setting of inadequately strict conditions for obtaining a standard tenancy agreement in a municipal dwelling, which secondarily excludes some already socially excluded persons or families, or the elderly. The phenomenon of “cherry-picking” occurs also on the part of non-profit organisations.⁶¹ This is notwithstanding the experience from abroad which shows that with proper support most of the former homeless people (including those with complex problems – victims of long-term domestic and gender-based violence, various addictions combined with mental illness, etc.) are able to keep standard housing in the long-run without any problems (Aubry et al., 2015). In the area of housing support, it is necessary to take into account the elderly, especially those who have lost a significant part of their household income (i.e. widows or widowers) through the loss of their partner. In this area, the influence of the gender pay gap can be observed, which will be transformed from the period of economic activity into a gender gap in pensions. Income differences, together with the higher average life expectancy of women, when the partner households of seniors become households of individual female seniors, make this group the most at risk of poverty. Social exclusion in this group is also exacerbated by the fact of loneliness and isolation, the gradual deterioration of health and increasing dependence on the help of another person. In view of the above, there is a need to target and create programmes that reduce the risk of social exclusion of the elderly.

Risks and barriers:

1. Unaffordable housing;
2. Social and spatial exclusion;
3. Declining number and share of municipal and State housing;
4. No instruments are used to make the free market of standard housing available to disadvantaged households;
5. Unavailability of outreach social work, uncertainty of financing;
6. Lack of support instruments for municipalities and low use of existing ones;
7. Insufficient use and systemic interconnection of housing loss prevention instruments;
8. Lack of legislation and instruments and insufficient funding to address social housing.
9. Persistent discrimination in housing;
10. Use of inefficient procedures based on the principle of merit;
11. Insufficient advice and legal aid in the field of housing;

⁶⁰ This is in contradiction with the principle of de-institutionalisation, see e.g. Government Resolution No 127/2007 Concept of support for the transformation of residential social services to other types of social services provided in a natural community and promoting social inclusion of users.

⁶¹ This term denotes a situation where people who have the greatest chance of success are chosen for programmes aimed at returning to housing; the most vulnerable and weakest ones are once again left without help.

12. Lack of financial resources for the provision of social prevention services and social work in the public administration specifically helping people facing housing deprivation and the suboptimal technical and material condition of the facilities available to providers.

Objective 4.6.a: Increase the availability of housing for people at risk of exclusion from housing or those having lost it.

Adapt legislation supporting the availability and sustainability of affordable rental housing (Social/Affordable Housing Act) and strengthen legal certainty in all housing legislation (reduction of unrelated systemic changes, e.g. revision of benefits), creation and development of appropriate financial instruments to implement the social / affordable housing plan.

Minimisation of long-term housing in substandard forms with regard to the safety of people living in such housing, as there is currently no comprehensive legislation regulating the rules for ensuring protection and support in the area of access to housing.

Creation and development of appropriate financial instruments for the implementation of the social housing plan. Linking the financing of social work and investment programmes to social housing, always integrated calls. Housing shall always mean living in standard non-segregated flats. Minimisation of long-term living in substandard forms of housing with regard to the safety of people living in such environments. Reduction of conflicts in housing, resolving problematic situations and promoting a happy neighbourhood of people at risk of social exclusion and the general population, mediation, development of community work, housing, etc. Prevention of energy poverty, protection of at-risk target groups. Adapting the housing stock to address major societal challenges (demographic ageing, energy poverty, climate change), taking into account the diversity of local housing conditions. Housing will comply with the principles of solidarity, equality, subsidiarity, accessibility and voluntariness, with an emphasis on prevention, efficiency and individual social work. Introduction of a system for preventing housing loss, support in the acquisition of standard housing and retention of newly acquired housing (support for social and community work). Develop Housing Led and Housing First approaches in the area of social services and social housing in the area of obtaining and retaining housing, ending support for systems based on merit. Ensure the provision of education in the field of discrimination and housing support for a wider range of stakeholders and entities in the field of social housing. Systemic development of social real estate agencies, social housing systems for at-risk families, including senior households, development of social services for people facing housing deprivation who are at risk of multiple social and health problems, including prevention and development within the education system. Develop systemic cooperation between the State, municipalities and regions and support the development of methodological guidance by the MoLSA in the field of social services, social work and social inclusion.

Objective 4.6.b: To reduce the risk of housing loss and homelessness through comprehensive and individualised support using multi-disciplinary co-operation of the staff of the Labour Offices, municipalities, NGOs and social services.

Support for programmes for the development of coordinated non-hierarchical co-operation of entities in the field of work with homeless people facing housing deprivation and material need. Increasing the awareness and education of staff about the specifics, agendas, scope and tools for addressing homelessness and housing deprivation. Setting up communication processes between these entities, especially programmes “from above”, i.e. supported by employers, the contracting entities of these agendas, not dependent on individual activities and the will of the “bottom”, dependent on the interest of specific workers.

4.7 Access to healthcare

Health is a key prerequisite for the favourable socio-cultural and economic development of individuals and society as a whole. The World Health Organization (WHO) defines health as “a state of complete mental, physical and social well-being, and not merely the absence of disease or infirmity” (WHO, 1948). The Human Development Index (HDI) understands health – expressed in terms of the life expectancy index – as one of the three basic conditions for human life and development, together with access to education and ensuring a satisfactory standard of living. The health of the population is significantly reflected in the total HDI value. It is a proven fact that human health is directly determined by the environmental and socio-economic conditions of a person, which are their level of education, social status, working conditions, availability of social and health services and stability and amount of income and the environment in which people live. When these conditions are out of balance, health inequalities often occur without the active involvement of the people concerned.

Differences related to these social, economic and environmental determinants often arise beyond people’s ability to decide about them. In 2012, the final report of *the WHO Commission on the Social Determinants of Health* issued the following call for a society-wide solution to this situation, which is the basis of a major international debate today: “Systemic health inequalities are perceived as unjustified and unfair and need to be addressed with the participation of all sections of society, including governmental departments” (WHO, 2012).

Groups at risk of inequalities include children and the elderly (especially those living alone), the long-term unemployed, single-parent families and the homeless. Another factor contributing to health inequalities is ethnicity. A high proportion of people living in socially excluded localities are Roma, and their socio-cultural specifics must be taken into account when setting individual objectives. Research shows that life expectancy for Roma is about 10-15 years less than for the rest of the Czech population (IOM, 2016). Neonatal mortality in the Roma population is twice as high as the national average, the Roma population also suffers more injuries than the national average, and Roma living in socially excluded localities are also more likely to contract serious infectious diseases such as TB, hepatitis, etc. (Hnilicová & Dobiášová, 2012; Maryšková, 2010).

Inequalities can also be observed with regard to respondents’ state of health. Here we observe, among other matters, differences in the occurrence of risk factors, such as tobacco, alcohol and drug use and obesity, where the level of education of respondents plays a role. With a share of overweight or obese people reaching 55%, the Czech Republic is among the five EU countries with the highest incidence of obesity. Groups with lower education in particular lead risky lifestyles: for example, among people aged 30–44, the share of smokers among university students was 8.4%, while for people with primary or lower secondary education at the same age, it was 55%.

Although equal access to health care in the Czech Republic is ensured by valid legislation,⁶² which reflects, among other things, the international legal obligations of the Czech Republic,⁶³ and significantly supports solidarity and the rights of the insured in the public health insurance system, research by the Office of the

⁶² Act No 372/2011 Coll, on health services and conditions for their provision, as amended (the Health Services Act); Act No 373/2011, on specific health services, as amended; Act No 48/1997, on public health insurance and amending and supplementing certain related acts, as amended, Act No 258/2002, on the protection of public health, as amended.

⁶³ In particular, the obligations arising from the Convention on Human Rights and Biomedicine (No 96/2001 in the Collection of International Conventions).

Government of the Czech Republic shows that there are barriers to real equal access formed by low health literacy, difficult local, geographical and financial availability of health services and direct and indirect discrimination, especially in the registration of socially excluded persons to primary health care providers (Baltag, 2018; European Union Agency for Fundamental Rights, 2013). At the same time, parents are not obliged to register their child with a general practitioner for children and adolescents in the Czech Republic. A subsequent topic of expert discussion is the question of whether the Czech Republic complies with Article 24 of the Convention on the Rights of the Child if some children are denied access to preventive medical care due to their parents' attitude.

A characteristic part of homelessness, or any form of housing deprivation⁶⁴, is the serious health risks and deteriorated state of health of these socially excluded people compared to the majority society. Although homelessness is associated with a higher incidence of many diseases, adequate health care is, with few exceptions, virtually unavailable to homeless people, as are mainstream reimbursable social care services.

A large body of sub-data demonstrates the significantly worsened state of health of people facing housing deprivation. For people in a roofless situation⁶⁵, these are mainly groups of respiratory diseases, chronic wounds, tibial ulcers and skin diseases. Chronic heart disease, diabetes, stomach and intestinal disorders, musculoskeletal disorders, frostbite and neurological problems are also increasingly common. The mental health status of homeless people is also dramatically worsened, with a high incidence of addictions/dual diagnoses, depressive states, stress and adjustment disorders, a significant incidence of psychotic disorders, and also a significant amount of personality disorders. People without a roof are the most vulnerable group, but the situation in terms of health is similar among those who live in homeless hostels. Living in the inadequate conditions of accommodation facilities and socially excluded localities⁶⁶ always means living in a health-risk environment, in terms of physiological risks (e.g. mould), psychological risks (crowded dwellings, noise), infectious risks and, last but not least, in an environment with an increased risk of accidents (Dutka et al., 2018). The Homeless Population Survey 2019 conducted by the Research Institute of Labour and Social Affairs confirmed that the health of a significant proportion of homeless people is poor. More than half (53%) of homeless adults staying on the streets, in night shelters, municipal accommodation facilities and homeless hostels rated their health (physical, mental or both) as poor (Nešporová & Holpuch, 2020).⁶⁷ This is more than seven times the proportion found in the general adult population.⁶⁸ The deteriorated availability of medical care for homeless people brings about their specific behaviour, which is characterised by two extremes. While a significant proportion of homeless people reported that they had not visited a doctor at all in the last year (37% of those who sleep outside), another proportion needed and received medical care very often. Five percent of homeless people (including those without a flat) have visited a doctor more than 20 times and 4% more than 50 times in the last year (Nešporová & Holpuch, 2020).

⁶⁴ The impact on health and the de facto (un)availability of health care does not only affect those who sleep "on the streets", but also, to varying degrees of urgency, those who live in homeless hostels, accommodation facilities, socially excluded localities or poor families who move frequently.

⁶⁵ Cf. ETHOS typology categories p. 27-29.

⁶⁶ See also Decision of the European Committee of Social Rights of the Council of Europe of 17 May 2016 in Case No 104/2014 European Roma and Travelers Forum (ERTF) v. the Czech Republic. The decision shows that in the Czech environment, Roma families are harmed by unhealthy living conditions and do not have adequate access to health care.

⁶⁷ The research sample of the Homeless Persons Survey consisted of 1 013 persons without a roof or without a flat; the results are representative of this population.

⁶⁸ According to European Health Interview Survey (EHIS) conducted annually by the Czech Statistical Office, 7% of respondents in the Czech Republic rated their health as poor in 2019 (Pištorová, 2021).

Difficult or effectively inaccessible health care for homeless people and other groups of people living in inadequate housing stems from a number of factors, which can be divided into obstacles on the part of patients (non-adherence to or refusal of care, etc.) and on the part of health care facilities, where care is refused or terminated prematurely for a number of reasons. The confluence of the above-mentioned poor health, risks and limited access to health care for people facing housing deprivation requires a conceptual national approach, which should be comprehensive, using a range of tools and involving a range of actors. The Czech Republic currently lacks⁶⁹ a similar concept and in future efforts to address the health and health care of people excluded from standard housing, it will be necessary to prepare and implement a comprehensive strategy to combat the health impacts of homelessness. This means addressing opportunities to provide health care with minimal obstacles to people living “on the street”, making quality outpatient health care available to people facing housing deprivation, and improving access to inpatient and follow-up care. Legislative or administrative obstacles to fulfilling these needs are present at all levels (health services can only be provided in health care facilities and in the patient’s own social environment; a facility that is registered as a social service and a health care facility cannot pay for a health care worker from social services subsidies, etc.), which are detailed in the analysis prepared for the MoLSA in 2015, including a set of recommendations, most of which have so far been implemented only by the activities of the non-profit sector, which is dependent on the current funding opportunities and enthusiasm (Hradecký et al., 2015). Attention to the specificities of health care in social exclusion is marginalised in the health sector, even as soon as on the level of qualification training of health professionals, where thematically relevant teaching is included in the curriculum of enlightened medical faculties only as a compulsory elective subject. The actual implementation of health care for the homeless has been deepening in recent years in the wake of the Street Medicine movement, built on the voluntary work of medical students, with voluntary support from some educational institutions and donors, in collaboration with social service providers, i.e. in developing and increasingly sophisticated but non-systemic solutions from “below”.

Educational programmes in the form of health literacy are also essential in the sense of low-threshold and systematic activities aimed at the socially excluded themselves and in the form of education of the general public.⁷⁰

Mental health care forms separate area in health and social inclusion, as it stands at the boundary between the social and health systems. Czech society is only now joining the dominant trend of a number of European (and other) countries in the introduction of community care, which is associated with the deinstitutionalisation and reduction of the number of large psychiatric facilities and their at least partial transformation into community services. People with mental health problems, whose illness usually means a high socio-economic burden, are currently forced to use an outdated system of care that isolates them from their community, the labour market and mainstream society. Furthermore, health problems still present a stigma in the Czech Republic. The awareness of the public about mental health issues and illnesses is inadequate. Although there are some drug prevention programmes, there are few programmes for mental health promotion, prevention of stress and mental disorders. Primary care is insufficiently connected with the area of mental health care. Primary health care providers are not always fully educated in the field of early diagnosis and modern approaches to the prevention, therapy and rehabilitation of

⁶⁹ In terms of strategic materials approved by the Government by 2020, the need for a conceptual solution to the issue of access to health care for homeless people has been dealt with in the *Concept of Preventing and Tackling Homelessness Issues in the Czech Republic until 2015–2020*.

⁷⁰ For a comprehensive approach to preventing and addressing the health issues of homeless people, see the *Concept of Preventing and Tackling Homelessness Issues in the Czech Republic until 2015–2020*, Chapter 4.3, p. 37-42; for the specific design of the solution, see the measures contained in the same Concept on p. 51.

mental health disorders. Community facilities and services have been developing in recent years (mental health centres, crisis centres, day hospitals, sheltered workshops, sheltered housing, etc.), but they are insufficient in both number and capacity. Related to this is the unresolved issue of competencies and cooperation between the health and social care sector, especially in the area of integrated, long-term and follow-up care, including care for people with mental illness or palliative and hospice care. It is necessary to add that, in addition to the above, there is an absolute lack of outpatient clinics and inpatient capacities for child psychiatry in the Czech Republic. This fact was pointed out as early as in 2009 by the National Action Plan for the Transformation and Unification of Care for At-Risk Children (ÚZIS ČR, 2018; Raboch & Wenigová, 2012).⁷¹

The hospitalisation of children with mental health problems is the only way to provide acute health care to these children. Currently, the waiting time for an appointment at a child psychiatry clinic is 5 months. Therefore, child psychiatrists themselves recommend hospitalisation of children in psychiatric hospitals.

Due to the division of health and social affairs in the Czech Republic, as well as the fact that the MoLSA and the Ministry of Health are not always the joint managers of individual topics, it is necessary to constantly follow up and develop a discussion on the possible shortcomings of the socio-health border, not only by these two ministries. The topics of individual ministries intersect, for example, in this Strategy and, conversely, in the Health Strategy 2030 (MoH, 2020).⁷²

In the Czech Republic, the number of people who have been in a long-term unfavourable state of health is increasing, which increases their demands for health and social services provided simultaneously, in various intensities and changing proportions. It is necessary to focus mainly on the interconnection of the system of health and social services, because when they are provided legislatively and functionally separately, it is not possible to adequately respond to the changing needs of people with different levels of dependence on health and social care. The current system of health and social services needs to be restructured so that a quality, individualised, health and social service is available for people of all ages with different levels of dependence on care, in all its necessary forms (from outpatient/field, provided in the patient's own social environment to inpatient/residential, usable for temporary or permanent solution of the patient's life situation).

Palliative and hospice care is provided both in medical facilities and hospices, as well as in the patient's own social environment. The multidisciplinary teams providing palliative care include both health

⁷¹ The number of all children's hospital beds per 10 000 children is declining year-on-year; in 2016, 1 bed was adapted for this number of children. Source: Psychiatric care 2017, Health Statistics, Institute of Health Information and Statistics of the Czech Republic. Available at: <https://www.uzis.cz/publikace/psychiatricka-pece-2017>, p. 35

In connection with the demands of today and of the economically developed countries, the occurrence of anxiety and depressive disorders of children is increasing and is expected to increase, both due to high demands placed on children in schools and the worsening issue of child abuse and neglect. The issue of children from single-parent families, socially weak families and mental disorders related to addictive diseases is becoming more serious. Source: Mapping out the state of psychiatric care and the direction it is taking in accordance with the strategic documents of the Czech Republic (and other countries). Expert report from the project. The Czech Psychiatric Society o. s. 2012. https://www.ceskapsychiatrie.cz/images/stories/OZ_zkr_komplet.pdf, p. 121

⁷² The area of health care is comprehensively defined in the Strategic Framework for the Development of Health Care in the Czech Republic until 2030, the update of which was commissioned and approved by Government Resolution No 622 of 29 July 2015 on the Sustainable Development Agenda. This document further elaborates, among other matters, the area of disease prevention and increasing health literacy and the responsibility of citizens for their own health, primary care reform, including improving access to care, especially for at-risk groups, reducing regional disparities in access to health care, health and social care integration and continuing mental health care reform. The objective and tasks set out in the strategic document of the Ministry of Health presuppose continuous and effective cooperation between the Ministry of Health and the MoLSA.

professionals and social workers, as well as spiritual support. Therefore, this area is very important in terms of linking health and social services (MoH, 2020).

Risks and barriers:

1. Insufficient communication and interrelationship between health and social service providers: different organisation of social and health services, different legislation, different sources and methods of financing – the systems are incompatible with each other;
2. Insufficient cooperation of the Ministry of Health and the MoLSA in the areas of integrated, follow-up and long-term care and mental health care;
3. The overall low health literacy of the population, including socially excluded persons or persons at risk of social exclusion;
4. Regional differences in access to health care;
5. Ignorance of the rights and obligations of the patient and the insured on the part of persons who are socially excluded or at risk of social exclusion;
6. Lack of competence of the insured to comply with the regime set within the provision of health services;
7. Limited access to health care for at-risk groups;
8. Lack of competence in intercultural and inter-social communication of health care providers as well as the insured / patients.

Objective 4.7.a: Systematically address the de facto unavailability of health services for socially excluded persons, persons at risk of social exclusion and otherwise disadvantaged persons.

The measures will focus on levelling the availability of health services for the target group in a given area (municipality, district, region) regardless of its financial and socio-economic conditions. The application of the measures will lead to a reduction in inequalities between socially excluded and disadvantaged people and the majority population; cooperation between social workers in public administration, social services, health services and scientific institutions will be improved.

Objective 4.7.b: Increase health literacy in the area of rights and obligations applied in access to primary health care for socially excluded persons, persons at risk of social exclusion and otherwise disadvantaged persons.

Fulfilment of the objective will be focused on improving awareness about and orientation in the field of rights and obligations of the insured and the patient applied in access to primary health care, including prevention. Effective acquisition of knowledge about the rights and obligations of the insured and the patient aims to strengthen competencies in registration with primary care physicians and effective defence in the event of discrimination in the provision of health services. At the same time, it focuses on developing the ability to change the behaviour of the target group in favour of a healthy lifestyle.

Objective 4.7.c: Development of a model of a culturally and socially sensitive approach in health care.

The measures will be aimed at the development of education of health and community workers (lay and professional) in the field of socio-cultural specifics of the target group and at the development of skills in intercultural and inter-social communication and mediation in health. The implementation of the model presupposes the development of effective cooperation between the social and health sectors.

Objective 4.7.d: Support the deinstitutionalisation of psychiatric care, assistive technologies and related services; optimising and increasing the availability of care on the socio-health border.

The measures will aim at the gradual transformation of institutional and residential services into community-type services and care in order to reduce the socio-economic impact on the quality of life of people from the target group living with a chronic illness or other health disadvantage. The support presupposes the harmonisation of the social and health sectors in all areas (financing, legislation, management and organisation of work, development of competencies and skills, connection to other areas – affordable housing, employment support, etc.). The measures will lead to the setting of standards and competencies and cooperation in the field of care at the socio-health boundary.

Optimising the socio-health boundary will also help to develop the transfer of care to the patient's community/own social environment (e.g. psychiatric care, palliative care), thus increasing the availability of this care in all regions. A functionally and legislatively interconnected system of health and social services for all age categories of patients will enable the individual setting of health and social services according to the current needs of the patient. Patients' adaptation to independent living in the community requires support through social work.

Objective 4.7.e: Supporting access to low-threshold outpatient and outreach health care that takes into account the possibilities and limits of homeless people (limited health literacy and limited possibilities to follow a treatment regimen in a specific level of housing deprivation, limited possibilities to pay for indicated medical devices, medicines, food supplements, etc.).

The measures aim to improve the position of homeless people and people living in social exclusion in relation to the social and health services provided, including legislative anchoring. Measures must include an incentive-based approach to reimbursement and motivation related to health services, a multidisciplinary, integrated teamwork model should be developed with social and other public services, in contact with hospital and emergency care providers, and discussions should continue on making health care available on the street and setting parameters for operation, if necessary. The measure aims to connect homeless people with sources of food, clothing, and basic benefits, as well as safety, health, housing, and transportation options.

Objective 4.7.f: Methodological support for inpatient health care providers to work with social workers prior to discharge of a homeless patient.

The measure should include the development of a methodology for inpatient health care providers and social workers prior to the discharge of a homeless patient.

The measures must include an incentive-based approach to reimbursement of health services and a motivating element. Health care must be available – covered by public health insurance even if clients (citizens of the Czech Republic) do not pay health insurance.

4.8 Ensuring decent living conditions

In terms of comprehensive and coherent efforts in the fight against social exclusion, every person has the right to the resources and social assistance sufficient to lead a dignified life. Support for adequate income guaranteeing a dignified standard of living for people and their families is one of the fundamental pillars of active inclusion. The right to sufficient resources should be combined with an active readiness of a person to work or participate in professional training, with national policies necessary for economic and social integration of persons, and with the determination of resources necessary to lead a dignified life.

The primary factor which, in accordance with the European concept of active inclusion, is to contribute to the integration of people at risk of poverty or social exclusion and ensure a dignified life, is participation in the labour market and dignified remuneration for work. In official documents,⁷³ the Czech Republic considers a functional, flexible and open labour market and increasing employment to be the best contribution to the eradication of poverty and social exclusion in the society.

Minimum wage

In terms of ensuring a dignified income from employment, a minimum wage is the key tool to ensure a decent income and to reduce the risk of (income) poverty and social exclusion; the minimum wage is the lowest permissible level of pay in a basic employment relationship. Its basic legal regulation is laid down in the Labour Code (Act No 262/2006, as amended). The amount of the basic rate of the minimum wage, the derived rates of the lowest levels of the guaranteed wage and the rules for calculating the minimum wage and the highest levels of the guaranteed wage for other working hours are set by Government regulation.⁷⁴

The minimum wage has two basic functions in relation to employees and employers: the social-protective function and an economic-criteria function. The social-protective function of the minimum wage is intended to protect the employee from poverty and enable them to live at a level of modest material consumption and social contact. It aims to provide employers with a basic level playing field for wage competition (to prevent wage undercutting of domestic and foreign labour). The economic-criteria function of the minimum wage creates preconditions for the income-based motivation of citizens to seek, accept and carry out work activities, i.e. to provide benefit to employees with income from working over persons with only social income. For employers, it represents the lowest level of wage costs for their employees. Therefore, in order for the minimum wage to fulfil the above functions and in particular its incentive-motivational role, its level should be adequately set.

In the Czech Republic, as of 1 January 2022, the basic rate of the minimum wage for a fixed weekly working time of 40 hours was CZK 16,200 per month. The average gross monthly wage in that year was CZK 40,317 (CZSO, 2023). In 2022, the ratio of the minimum wage to the average wage was 40.2%; for 2023, it was expected to increase to 41% (MoLSA, 2022b). In the past, there were periods when the minimum wage was stagnant for a long time and ceased to fulfil its basic functions. This last occurred in 2007-2012, when the ratio of the minimum wage to the average wage fell to 31.9% in 2012.

⁷³ Such as the National Reform Programme of the Czech Republic

⁷⁴ Government Order No 567/2006, on minimum wage, on the minimum guaranteed wage levels, on the definition of unfavourable working environment and on the amount of wage supplement for working in unfavourable working environment, as amended.

Benefits systems

Complementary to employment policy, benefits systems constitute other elements of social protection in those fields of poverty and social exclusion which for various reasons cannot be addressed or completely resolved by labour market integration. Low-income persons and households in the Czech Republic are supported through social benefits paid from insurance and non-insurance systems. The system of State social support improves the financial situation of families with children and helps to reduce the economic risk of parenting.

The main system explicitly aimed at those who are poor and at risk of social exclusion is the system of assistance in material need, providing benefits and basic social counselling in situations where a person or family lacks sufficient income and their overall social and financial situation does not allow them to meet the basic necessities of life at a level acceptable for society.⁷⁵

Living and subsistence minimum

Act No 110/2006, on the living and subsistence minimum, was issued with effect from 1 January 2007. It sets the living minimum as the minimum socially recognised limit of the monetary income of natural persons to provide for food and other basic personal needs. Further, it sets the subsistence minimum as the minimum level of monetary income of persons which is considered necessary to ensure food and other basic personal needs at a level that allows survival.

The minimum subsistence level is the criterion for determining entitlement to and the amount of assistance in material need (it is not a benefit) and the criterion on which entitlement to the relevant assistance in material need is based. They are mainly used in Act No 111/2006, on assistance in material need, where they play a decisive role in the assessment of material need as well as a socially protective variable. They are also used in Act No 117/1995, on State social support, in determining entitlement to certain benefits. The living and subsistence minimum are also used in other areas – for example in court practice for determining the non-seizable amount in the case of executions (Government Decree No 595/2006), etc.⁷⁶

Neither the living minimum nor the subsistence minimum include from 1 January 2007 the necessary housing costs. Protection and assistance in the area of housing for individuals and families with low incomes is addressed separately within the system of state social support by providing a housing allowance and in the system of assistance in material need by a housing supplement.

Under the valorisation condition set out in the Act on the Living and Subsistence Minimum, the Government may increase the living minimum amount and the subsistence minimum amount by its regulation in the regular period from 1 January if maintenance costs and other basic needs increase by at

⁷⁵ Living allowance and housing supplement are paid repeatedly, while immediate emergency assistance helps to address one-off life situations. Social work is an integral part of assistance in material need.

⁷⁶ The subsistence minimum is also used in the Civil Code (Act No 87/2012 – in determining maintenance obligations), the Act on the Provision of Benefits to Persons with Disabilities (Act No 329/2011 – in determining the amount and entitlement to the allowance for a special aid), the Act on the Social and Legal Protection of Children (Act No 359/1999 – the amount of the contribution for the payment of residence and care), the Act on Asylum (Act No 325/1999 – financial support for asylum seekers), the Act on the Residence of Foreigners (Act No 326/1999 – sufficient means to stay in our territory), the Act on Temporary Protection of Foreigners (Act No 221/2003 – financial support for a foreigner enjoying temporary protection) and the Act on Radio and Television Fees (Act No 348/2005 – exemption from radio and television fee).

least 5% during the relevant period. When fulfilling the valorisation condition, the Government has the possibility, but not the obligation, to increase the amounts of the living and subsistence minimum. The law makes it possible to valorise the amounts of the living and subsistence minimum even in an extraordinary period.⁷⁷

The current amounts of the living and subsistence minimum, set on 1 January 2007, have been indexed several times so far, most recently from 1 January 2023. The amounts were increased to maintain their original fair value. As part of the last valorisation, the minimum subsistence amount increased by 5.2%.

Table 8: Living and subsistence minimum amounts applicable from 1 January 2023 (in CZK per month)

	Amounts applicable from 1 January 2023 (in CZK per month)
Amount of the living minimum	
Individual	4 860
First person in the household	4 470
Second and another person in the household that is not a dependent child	4 040
Child up to 6 years of age	2 480
Child between 6 to 15 years	3 050
Child between 15 to 26 years (dependent)	3 490
Subsistence minimum amount	3 130

Source: MoLSA

In-work poverty

The “in-work poverty” indicator is an internationally comparable indicator expressing the proportion of persons classified as employed persons aged 18-64 who work for more than six months in a calendar year and who are at risk of poverty. This means that they live on a balanced disposable income of less than 60% of the national median balanced disposable income.

The Czech Republic has one of the lowest poverty rates for working people in the EU. The income poverty rate of working people in the Czech Republic remained virtually unchanged between 2016 and 2022,

⁷⁷ In accordance with Section 9 of Act No 110/2006 – on the living and subsistence minimum

oscillating around 3.5%. According to a 2022 EU-27 comparison, the EU-wide income poverty rate for working people was 8.5% (Eurostat, 2023d).

Overview of the development of poverty and social exclusion in a time series

Table 9: Poverty in the Czech Republic (persons at risk of poverty in 2015–2022 in %)

Indicator	2015	2016	2017	2018	2019	2020	2021	2022
AROPE (at risk of poverty or social exclusion rate)	14.0	13.3	12.2	12.2	12.5	11,5	10,7	12,0
AROP (at risk of poverty rate)	9.7	9.7	9.1	9.6	10.1	9,5	8,6	10,2
MD (material deprivation)	5.6	4.8	3.7	2.8	2.7	1,9	1,8	2,1
VLWI (households with very low work intensity)	6.8	6.7	5.5	4.5	4.2	4,4	5,4	o

Source: CZSO

According to the indicator on the risk of poverty or social exclusion, there was a slight improvement in poverty in the Czech Republic between 2019 and 2021, but this improvement was erased between 2021 and 2022. According to the aggregate indicator, 12% of the population of the Czech Republic, i.e. 1,232 000 people, were at risk of poverty or social exclusion in 2022.

Risks and barriers:

1. A possible stagnation of the living and subsistence minimum, which cannot ensure decent living conditions due to inflation and price increases;
2. Insufficient enforcement of consumer rights. The value of the dispute is often low and consumers do not enforce their rights in courts. Court proceedings are lengthy and initial costs are high.

Objective 4.8.a: Ensure adequate income and prevent loss of income for people who are socially excluded or at risk of social exclusion

Ensure an income that enables a dignified life even for people who are socially excluded or at risk of social exclusion. Adjust and ensure a corresponding regular increase in the amounts of the living and subsistence minimum. Ensure a sufficient standard of living throughout the life cycle at a socially acceptable level. Regularly increase all minimum income categories, especially the minimum wage, the increase of which leads to a reduction in in-work poverty.

4.9 Ensuring security and public order

Crime prevention and civil coexistence

Effective crime prevention is a key factor in promoting sustainable development. Reducing crime and increasing safety improves business conditions and employment, allowing targeting resources in socio-economic development rather than crime control.

From the ethical, financial and practical perspective, it is not desirable or feasible to respond to crime only by repression or judicial resources. Social situational prevention, as recommended by the Department of Crime Prevention of the Ministry of the Interior, is an effective tool that is closely linked to the positive socialisation and education of people, related to the code of ethics and the applicable legal order. Social prevention constructed in this way seeks to ensure that individual members of society or groups thereof are exposed to positive factors, and thus diverted from inappropriate or socially undesirable behaviour. With the help of social prevention built in this way, they can be offered acceptable alternatives to the way of life and at the same time they can be protected from the influences that are able to steer them towards a delinquent life. Social prevention should adhere to the principle of an open democratic society in order to preserve the fundamental democratic values that are given to us by the Charter of Fundamental Rights and Freedoms. The Charter does not directly specify the right to security, but it clearly follows from the provisions of the right to life, the inviolability of the person, personal liberty and others that the right to security is recognised. Social prevention programmes promote the social inclusion of marginalised groups and facilitate their reintegration. Some programmes help victims or other vulnerable groups, which is another aspect of social inclusion.

In the Czech Republic, crime prevention is organised at three levels (MoI, 2023):

- At the inter-departmental level – the focus of cooperation across the governmental departments lies in creating the Government’s preventive policy in relation to traditional (general) crime and coordinating the preventive activities of individual departments represented in the Republican Committee for Crime Prevention and encouraging new activities. Situational crime prevention falls under the responsibility of the Advisory Board for Situational Crime Prevention.
- At the departmental level – crime prevention programmes are based on the substantive competence of individual ministries; they enrich their regular activities with new elements and approaches and influence the creation of relevant legislation.
- At the local level – involvement of public authorities, the Police, NGOs and other institutions which carry out activities at the municipal level. The system of crime prevention at the local level is based on the optimal distribution of competence in the areas of social and situational prevention with regard to the local situation, needs and possibilities.

Persons released from prison and persons serving an alternative sentence or measure, including persons from socially excluded localities

One of the basic conditions for integration of a person into society after being released from prison is to arrange housing, restore/create supportive ties to the family, resolve indebtedness and addictions and find employment, i.e. ensure legal income to meet basic needs. In doing so, low skills and motivation, indebtedness, prejudice of society or requiring a clean criminal record present are among the obstacles to

finding a job. According to data from the PS CR, 49% of prisoners have less than a high school education, 26% have no experience of legal employment, and 45% have experienced long-term unemployment (PS CR, 2018). The prevention of these problems is addressed through “treatment programmes”⁷⁸ in which prisoners already participate while in prison. These treatment programmes are individually prepared after commencing the sentence on the basis of the educational, psychological and social characteristics of each prisoner. It aims, inter alia, to prepare the convict for independent life after returning from prison (PS CR, 2023). The effectiveness of measures taken to prepare prisoners for release and to support the success of their integration into their free life is limited by existing personnel and material resources both in prisons and in the performance of social work in post-penitentiary care and parole supervision. With the support of the so-called Norwegian funds, the first project of a probation house operated by the PMS (providing accommodation with a re-socialization programme) is being implemented. However, this is not a social service provided under the Social Services Act, but a court-ordered measure under conditional release in accordance with criminal law. Likewise, other social services, specifically focused on the issue of integrating persons registered in the Criminal Register into everyday life, do not correspond to the size of demand on the part of potential users. Persons released from prison can also take advantage of social entrepreneurship. Social entrepreneurship programmes focus on increasing the competencies of convicts and other vulnerable groups in finding job opportunities through a temporary job in a social enterprise and the gradual acquisition of working habits, and possibly also through continuous work before and after release. However, the offering of these programmes is insufficient, their implementation within a comprehensive system is not ensured and, as a rule, it does not sufficiently respond to the accumulation of social disadvantage that is characteristic of socially excluded persons. A burning problem is the lack of continuity in working with people in prison and after release, which is reflected in a number of factors, most notably in the absence of affordable housing and employment, which could be used immediately after leaving prison and which would prevent the deepening of social exclusion and reduce the risk of repeated crime.

The Revision of the Prison System Concept until 2025, approved by Government Resolution No. 338 dated 10 May 2023,— contains, among others, the strategic objective "Systemic support for penitentiary and post-penitentiary care", the main purpose of which is to improve the link between penitentiary and post-penitentiary care and to support the reintegration of convicts. The main objective of the prison service reform is an inter-departmental and multidisciplinary approach, which should result in the successful integration of convicts back into society and effective protection against recidivism.

⁷⁸ Prague Pankrác Remand Prison, Prison Service, Treatment Programmes. [online]. [qtd. 09/03/2019]. Available at: <https://www.vscr.cz/vazebni-veznice-praha-pankrac/o-nas/vykon-vezenstvi/programy-zachazeni/>

Risks and barriers:

1. Higher levels of vulnerability to certain types of crime, where people living in social exclusion become victims, often repeatedly;
2. Increased tolerance for certain types of crime, such as domestic violence;
3. An increase in social tension between the majority and the minority in connection with complaints about administrative offences in the field of public order and civil coexistence and the trivialisation of problems in socially excluded localities;
4. High latency of crime in socially excluded localities, caused for example by low trust in institutions;
5. A significant share of persons living in socially excluded localities released from prison, as well as the share of persons living in these localities who are serving an alternative sentence or measure;
6. Higher levels of prejudice by the majority and the threat of hate crimes.
7. Lack of a system of continuous support for the person coming out of prison before and after release;
8. Overuse of criminal repression in cases where it would be more effective to deal with criminal activity at liberty using a combination of alternative sentences and programmes to address the causes of crime (probation and re-socialisation programmes).

Objective 4.9.a: Promoting preventive approaches to ensuring security and public order

The implementation of the objective will be aimed at integrating preventive activities into local policies and planning processes. The measures will focus on supporting and coordinating the cooperation of key stakeholders in the approach to solving security problems in municipalities where socially excluded persons or those at risk of social exclusion (including persons from socially excluded localities serving an alternative sentence or measure) are located. Emphasis will be placed on further education, communication, participation, reducing social tensions and creating a safe environment in the community, as well as reducing the manifestations of anti-Gypsyism and the dehumanization of people in public space. Measures will focus on improving the prevention of domestic violence and combating biases related to domestic violence. The activities will be in accordance with the Crime Prevention Strategy for the Czech Republic for the years 2022-2027 and the Action Plan for the Prevention of Domestic and Gender-Based Violence for the years 2023-2026.

Objective 4.9.b: Support for the preparation of prisoners for release from imprisonment and their subsequent integration into society

The aim is to prepare the convict for independent life after returning from the EPS. The Prison Service of the Czech Republic, in accordance with the conceptual documents of the Ministry of Justice, and especially in accordance with the provisions of Section 1 of Act No. 169/1999 Coll., on the execution of imprisonment, provides professional services and implements treatment programmes that lead to the fulfilment of the objective. Further, ensure that appropriate services are linked to the specialist services provided in preparation for release from the EPS in order to reduce the risk of possible re-offences or social exclusion. Provide support to persons released from the EPS to create conditions for subsequent, especially working, life through continuous work with involved entities (PMS, LO CR, municipalities, non-profit organizations, social service providers). It is essential to support the agenda of social curators of municipal authorities and to link them with other actors who are also involved in penitentiary and post-penitentiary care.

4.10 Preventing and reducing harm associated with substance use and addictive behaviour

Substance abuse and other addictive behaviours (e.g. gambling) together with other adverse socio-economic factors can dramatically affect life expectancy and also contribute to social exclusion. Different addictive substances have different levels of harmfulness and contribute to the overall burden to varying degrees, with tobacco and alcohol being the most severe contributors due to their prevalence and relatively easy availability. The impact of substance abuse, other forms of risky behaviour and socio-economic determinants of health (poverty, unemployment, loss of social cohesion, low access to health care) combine, overlap and reinforce each other.

Globally, substance abuse is one of the most important risk factors for overall mortality and morbidity. In the study of the global health burden conducted by the WHO in 2016, tobacco ranked fourth and alcohol together with illicit drugs ranked eighth out of a total of 84 monitored preventable risk factors and their groups. In 2016, substance abuse accounted for 28.5% of the global health burden as measured by DALYs (*Disability-Adjusted Life Years*), i.e. years of life lost due to morbidity and mortality explained by monitored risk factors, and 12.9% of DALYs in total (Gakidou et al., 2017). In developed countries, substance abuse is at the forefront of the ranking of risk factors, e.g. tobacco is the most important risk factor in the most developed countries.

Individuals in lower socio-economic status groups report a lower overall rate of alcohol consumption than individuals in higher status groups, but the morbidity, mortality and social impacts are higher in socio-economically disadvantaged groups. This phenomenon is referred to as the “alcohol damage paradox”. Possible explanations include riskier patterns of use (higher presence of binge drinking) and coexistence with other risk factors such as smoking, excess weight and the associated inappropriate diet (Bellis, et al., 2016; Lewer et al., 2016). In addition to opioid analgesic abuse, the current “opioid crisis” in the US is also caused by excessive alcohol consumption and rising mortality from alcohol-related illnesses, an increased number of suicides related to the unfavourable socio-economic situation following the 2008 economic crisis, unemployment, declining real incomes and loss of social cohesion, as well as the low availability of health care for a significant part of the population, including the low availability of specialised addictions programmes (Kolodny et al., 2015; Rehm et al., 2016).

The co-occurrence of substance abuse, risky behaviour, health disorders and negative impacts and factors in the social field has a synergistic character, i.e. the character of mutually influencing and potentiating phenomena and processes increasing the vulnerability of people (Singer et al., 2012). The Czech Republic is one of the countries with the highest rate of alcohol use in the world and its rate of tobacco smoking is approximately average in the European context, but the rate of compliance with the recommended measures in the field of alcohol and tobacco is assessed as average to insufficient (WHO, 2018, Feliu et al., 2018). In addition, for example, the rate of illicit drug use by injection in the Czech Republic is one of the highest in Europe and rates of substance use in socially excluded localities are higher than in the general population and with specific problems such as early onset of substance use or abuse, multigenerational use and the production and sale of illegal drugs (European Monitoring Centre for Drugs and Drug Addiction, 2017; Mravčík et al., 2018).

Gambling also contributes to the further deepening of social inequalities (Abdel-Ghany & Sharpe, 2001).⁷⁹ The gambling “supply” tends to move to socio-economically disadvantaged regions and localities. The incidence of problematic gambling in socio-economically disadvantaged groups results in relatively higher damage, as people with lower incomes spend a relatively higher proportion of their income on gambling, which further exacerbates their disadvantaged social situation (and thus gambling acts as a regressive tax as it burdens people with lower incomes more) (Abbott et al., 2013). This phenomenon is also present in socially excluded localities in the Czech Republic (Mravčík et al., 2018).

Addictive behaviour is also associated with stigma, which contributes to the social exclusion of people with addictive behaviour and to the increased individual and public health risks associated with substance use and other addictive behaviours. Destigmatization is therefore an essential and integral part of modern policies.

Legislative regulation of the topic

Act No 65/2017, on the protection of health from the harmful effects of addictive substances, as amended, which is effective from 31 May 2017, newly obliged the Government to approve a national drug policy strategy at least once every 10 years. At present, the National Strategy for the Prevention and Reduction of Damage Associated with Addictive Behaviour is valid for the period 2019–2027 (Mravčík et al., 2018).

Inclusive services for people who are addicted or at risk of addiction

Substance use, gambling and other addictive behaviours are one of the factors which, in the complex life situation of the individuals concerned or entire specific groups of people, directly contribute to their social exclusion. It must be said that drug use has its social context and, just as social exclusion encourages the use of addictive substances, there is also a significant barrier between substance users and society. The social context of substance abuse thus includes, for example, unemployment, an unstable or missing family background of an individual, mental health problems, poor and unstable housing and homelessness, and other factors; these often occur in combinations.

Services for the target group of people addicted or at risk of addiction help to eliminate, reduce or prevent such social exclusion. Their approach is comprehensive and also focuses on protecting public health or minimising the risks associated with addictive behaviour. In terms of social services in the Czech Republic, there are mainly field programmes and contact centres for the target group of people addicted to non-alcoholic drugs, as well as homes with special regimes and aftercare services. Some of these services include therapeutic support, and there are specialised therapeutic communities for addicts. It is important that all types of programmes and services for all forms of addiction work for people with addictions and people at increased risk, with prevention and social services both in the inpatient or outreach form, as well as residential (such as wet houses). However, these services can provide comprehensive support to the target group only in functional cooperation with the health sector and health services that provide treatment for addiction-related disorders in a relatively wide range, from harm reduction programmes, through outpatient and residential addiction treatment such as psychiatric hospitals, to substitution treatment. The principle of case management is key in the case of interdisciplinary cooperation. The availability of standard housing with the professional support of social workers, psychiatrists and other professionals is essential for the target group of people suffering from alcohol-related or non-alcoholic

⁷⁹ BECKERT, J. & LUTTER, M. 2009. The inequality of fair play: Lottery gambling and social stratification in Germany. *European Sociological Review*, 25, 475-488.

drug addiction; for this reason, it is necessary to strengthen the development of the concept of social housing in the Czech Republic, especially the Housing First model, which will enable the target group to receive housing and psychosocial support. Equally important are other socially innovative elements that will be able to respond to the changing structure of the population threatened by various forms of addiction and changing patterns of addictive behaviour in society (e.g. digital addictions).

Preventive, educational and information activities are also necessary. The 2018 interim evaluation of the Action Plan on Illicit Drugs noted shortcomings in the systemic provision of school-based primary prevention and the overall low availability of primary prevention programmes for risk behaviour, including low availability of specific selective and indicated prevention programmes and low availability of addiction services, including outpatient health services and social reintegration programmes for people with addictive behaviour.

Risks and barriers:

1. Use and abuse of legal and illegal drugs, which are often intergenerational;
2. Unavailability of addictology services in socially excluded localities, absence of psychological help for at-risk persons;
3. High availability of legal addictive substances in terms of location, time and price;
4. Disproportionately higher rates of substance abuse and gambling in socially excluded localities;
5. Production and sale of narcotics and psychotropic substances in socially excluded localities;
6. A low level of implementation and accessibility of preventive, treatment, reintegration and harm reduction measures in general and for socially excluded persons or persons at risk of social exclusion in particular;
7. Lack of a social housing system for the target group (e.g. missing wet houses, i.e. shelters for people with addictions);
8. The need to respond to changes in the addictive behaviour of the at-risk population and in patterns of addictive behaviour.
9. High levels of stigmatisation of people with addictive behaviour.

Objective 4.10.a: To reduce the social exclusion of people with addictive behaviour and reduce the impact of substance use in the population of people who are socially excluded or at risk of social exclusion

Support activities that contribute to reducing the social exclusion of people with addictive behaviour. Support activities aimed at destigmatising substance users in the context of destigmatising mental disorders and preventing social exclusion. At the level of public administration, promote the use of appropriate non-stigmatising language using the definition of addictive disorder through intensity of use (e.g. heavy or harmful use versus alcoholism or drug addiction) in policy and strategy documents. In the area of care for socially excluded persons or persons at risk of social exclusion, support the implementation of verified preventive-treatment and reintegration addiction programmes within the scope of the department's competence, with the aim of contributing to the reduction of negative health and social impacts associated with addictive behaviour, including the reduction of the level of social exclusion of persons with addictive behaviour. Support the development and evaluation of new types of services or measures that respond to the changing structure and needs of people at risk of addiction, to changing patterns of addictive behaviour in the population and contribute to reducing the level of social exclusion

of people with addictive behaviour (e.g. low threshold services for intensive alcohol users, wet houses, Housing First programmes in the field of social housing or integrated care programmes for people with psychiatric comorbidity). Strengthen support for services at the social-health interface and promote a multidisciplinary approach to addiction services. Support (financially and methodologically) the involvement of regions and municipalities in the provision of addiction services and strengthen cooperation with non-governmental non-profit organizations in the field of addiction services. The activities will be in line with the National Strategy for the Prevention and Reduction of Harm Associated with Addictive Behaviours 2019-2027 and its action plans.

5. Implementation and monitoring of the Social Inclusion Strategy 2021–2030

The Committee for Social Inclusion, established as a permanent advisory and coordinating body of the Minister of Labour and Social Affairs in the field of social policy with a view to combating poverty and social exclusion, regularly monitors the implementation and evaluation of the effectiveness of the measures set out in the Strategy's Action Plan; its members are entities that are important in terms of protecting the interests of people facing poverty and social exclusion. Just as the Committee has been involved in the preparation of the Strategy, it is expected to be involved in drawing up the Strategy's Action Plans.

From the point of view of future implementation of the Strategy, social dialogue is a very important tool which helps to align the interests of employees and employers in order to develop business and ensure social harmony. This dialogue is supported, among other things, by the meetings of the Committee for Social Inclusion, where possible changes in the field of social inclusion are discussed. Not only representatives of the State administration meet here, but also representatives of local governments, non-profit and academic areas and trade unions and employers' organisations, which guarantees greater pluralism of opinion. We also cannot exclude other possible partners who are actively involved both in working groups at the level of ministries (at the national level) and at the regional level – non-profit and voluntary organisations, local action groups, and projects aimed at, for example, inclusive education.

During the implementation of the entire Strategy, an Action Plan will be compiled for a period of three years as a tool for strategic management, which will contain a set of measures, the implementation of which will lead to the fulfilment of the Strategy's objectives. Based on the Action Plans, the managers of all areas, which are elaborated in individual chapters of the Strategy, will also be specifically identified. At the same time, the Action Plans for the Strategy will clearly set the indicators of the implementation of individual measures, using the SMART method (specific, measurable, achievable, relevant and time-bound).

Objective 5.a: Creation of an evaluation plan of the Social Inclusion Strategy and ensuring its implementation

The Committee for Social Inclusion, established as a permanent advisory and coordinating body of the Minister of Labour and Social Affairs in the field of social policy with a view to combating poverty and social exclusion, regularly monitors the implementation and evaluation of the effectiveness of the measures; its members are entities that are important in terms of protecting the interests of people facing poverty and social exclusion. Just as the Committee for Social Inclusion has been involved in the preparation of the Strategy, it is expected to be involved in drawing up the Strategy's Action Plans.

List of Abbreviations

Agency	Department for Social Inclusion (Social Inclusion Agency)
ASLPC	Act on Social and Legal Protection of Children
CAS	Czech Academy of Sciences
CR	Czech Republic
CZSO	Czech Statistical Office
EPS	Execution of a prison sentence
ESF	European Social Fund
EU	European Union
EU-SILC	Living Conditions
HDI	Human Development Index
GDP	Gross domestic product
IHIS	Institute of Health Information and Statistics
IS CAS	Institute of Sociology of the Czech Academy of Sciences
MID	Mild intellectual disability
MID	Mild intellectual disability
LAG	Local action group
MoRD	Ministry of Regional Development
MoLSA	Ministry of Labour and Social Affairs
MEYS	Ministry of Education, Youth and Sports
MoI	Ministry of the Interior
MH	Ministry of Health
FC	Substitute family care (foster care)
NTUS 2	Nomenclature of territorial statistics units (cohesion regions)
MEP	Municipal authority of a municipality with extended powers
UN	United Nations

ASLPC	Authority for Social and Legal Protection of Children
MADP	Municipal authority with delegated powers
FEP PE MMD	Framework education programme for primary education of pupils with mild mental disabilities
FEP PE AO	Adjusted outputs of the Framework education programme for primary education
SDGs	Sustainable Development Goals
LO CR	Labour Office of the Czech Republic
NGO	Non-governmental non-profit organisation
OECD	Organisation for Economic Co-operation and Development
OG CR	Office of the Government of the Czech Republic
PMS	Probation and Mediation Service
PS CR	Prison Service of the Czech Republic
PT	Public transport
RILSA	Research Institute of Labour and Social Affairs
SPLC	Social and legal protection of children
SEL	Socially excluded locality
SEL-SILC	Statistics on Income and Living Conditions of Socially Excluded Localities
SIPH	State Institute of Public Health
SCC	School counselling centre
SPF	School pedagogical facilities
WHO	World Health Organization

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