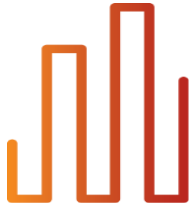


Access for children in need to the key services covered by the European Child Guarantee in the 27 EU Member States

ANNE-CATHERINE GUIO

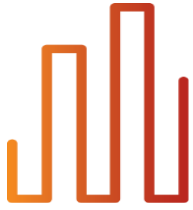


THE EUROPEAN CHILD GUARANTEE

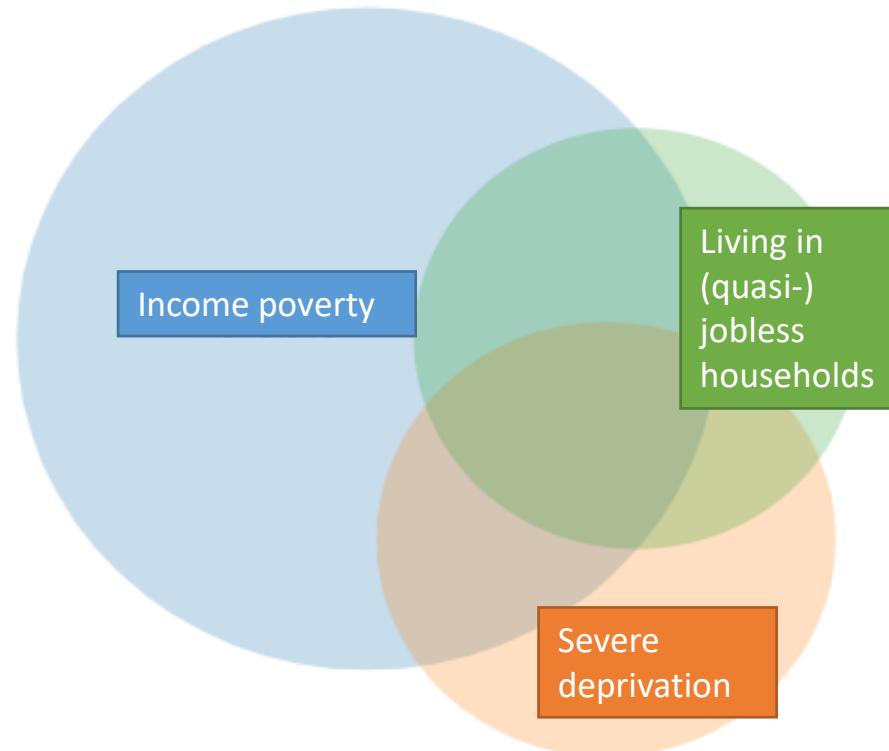
On 14 June 2021, the EU Member States unanimously adopted the Council Recommendation (EU) 2021/1004 establishing a “European Child Guarantee” (ECG).

Objective: guaranteeing for “**children in need**”:

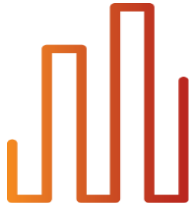
- **effective** and **free access** to four services: high-quality **early childhood education and care (ECEC)**, **education and school-based activities**, at least **one healthy meal each school day** and **healthcare**;
- **effective** access to two services: healthy **nutrition** and adequate **housing**.



CHILDREN IN NEED, EU LEVEL



In 2022, **24.7% (20 million)** of the children (aged less than 18 years) are at risk of poverty or social exclusion (AROPE) i.e. children living in a household that is at risk of poverty and/or severely materially and socially deprived and/or (quasi-)jobless



OBJECTIVE AND FOCUS OF THE PRESENTATION

Source: Baptista, I., Guio, A-C, Marlier, E. and Perista, P. (2023), [Access for children in need to the key services covered by the European Child Guarantee: An analysis of policies in the 27 EU Member States](#), European Social Policy Analysis Network (ESPAN), Luxembourg: Publications Office of the European Union.

Objective: Provide an EU comparative overview of the national situations, to set a baseline for monitoring the European Child Guarantee.

Inputs: 27 country-level analysis

Focus: Access for children in need to each of the 6 services covered by the ECG.

- **Effective access** means “a situation in which services are readily available, affordable, accessible, of good quality, provided in a timely manner and where the potential users are aware of their existence, as well as of entitlements to use them”
- **Free access** (ECEC, school meals, education, healthcare) means free-of-charge provision, either by organising and supplying such services or by providing “adequate benefits to cover the costs or the charges of the services”. The focus here is on free access; not on reduced prices.



LOW-INCOME CHILDREN

Focus on children (<18 years) living in **low-income** households. In each country, the criterion/criteria used for defining “low income” is/are the one(s) used in national policy related to the service.

In the ECG Recom., the focus is on “children in need” – *proxied* as children at risk of poverty or social exclusion (AROPE).

Low income is the best proxy to capture access of AROPE children in national policies.

But the population of AROPE children is wider, in some countries much wider, than the population of low-income children. → This needs to be kept in mind.

Focus on access to the six services as it is in reality, rather than (e.g.) what is said in principle in the constitution or in the law. Hence, for each service, national experts have been asked to identify (if any) the financial and non-financial **barriers** which, in practice, (may) hinder access in their country – i.e. some of the key challenges to be addressed by MSs to progress towards effective access.

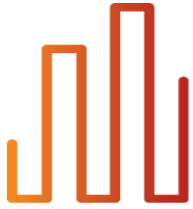


EFFECTIVE AND FREE ACCESS TO HIGH-QUALITY ECEC (0-3 YEARS)

3 aspects: legal entitlement to publicly funded childcare; priority access; free for low-income children

< 3 years	AT	BE	BG	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT	LT	LU	LV	MT	NL	PL	PT	RO	SE	SI	SK
Entitlement			✓	✓		✓	✓	✓			✓		✓	✓	✓				✓	✓			✓	✓	✓	✓	
Free access for ALL children			✓			✓											✓		✓	✓			✓				
Free access for LOW-INCOME children		✓		✓		✓	✓	✓			✓			✓				✓					✓		✓	✓	
Priority access for LOW-INCOME children		✓	✓	✓										✓		✓						✓	✓			✓	

- Regional/local diversity (e.g. BE, DE, EE)
- Different ages (e.g. 0 in FI and 18 months in EE)
- Compared to the value of the national AROP threshold, the low-income criterion for qualifying as a “low-income child” for access to childcare is:
 - Much lower (e.g. CY, SI)
 - Somewhat lower (e.g. BE, HU, LU)
 - Similar (e.g. PT) or much higher (e.g. FI)



EFFECTIVE AND FREE ACCESS TO HIGH-QUALITY ECEC (3 YRS – COMPULSORY SCHOOL AGE)

3 aspects: legal entitlement to publicly funded pre-school; priority access; free for low-income children

3 yrs – compulsory school age	AT	BE	BG	CY	CZ	DE	DK	EE	EL	ES	FI	FR	HR	HU	IE	IT	LT	LU	LV	MT	NL	PL	PT	RO	SE	SI	SK	
Entitlement	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Free access for ALL children	✓	✓	✓		✓	✓			✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓		✓	
Free access for LOW-INCOME children				✓		✓	✓	✓																		✓	✓	
Priority access for LOW-INCOME children			✓	✓																			✓			✓		

- Universal entitlement (except IT but *de facto* access)
- Different ages
- Regional diversity (e.g. AT, DE)
- Free access in theory (but may be hidden costs: material, transport, meals)



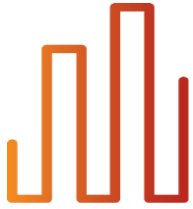
MAIN BARRIERS TO EFFECTIVE AND FREE ACCESS TO ECEC

Financial:

- High cost of ECEC for low-income children (in 19 MSs) & hidden costs (esp. in pre-school).

Non-Financial:

Lack of available places and waiting lists	Geographical disparities	Priority rules to employed parents	Complex bureaucratic processes	Understaffing/unpreparedness of professionals	Cultural and personal perceptions and attitudes
AT, BE, BG, CY, CZ, DE, DK, EE, EL, ES, FR, HR, HU, IE, IT, LT, LV, MT, NL, PL, PT, RO, SI, SK	AT, BG, CZ, DE, DK, EE, EL, ES, FR, HR, HU, IE, LT, MT, PL, PT, RO, SK	AT, BE, CY, DE, ES, HR, HU, IT, MT, NL, PT	BE, DE, IE, MT	BG, HR, HU, IE, NL, SK	BE, BG, CY, DE, EL, FI, HR, LT, NL, RO, SE, SK



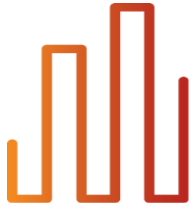
EFFECTIVE AND FREE ACCESS TO EDUCATION

Usually no tuition fees for either primary or secondary education.

But school-related costs:

1. compulsory basic school materials (schoolbag, pens, glue, scissors, etc.);
2. compulsory school materials (textbooks, notebooks, etc.);
3. compulsory specific clothing (uniform, sports clothing);
4. IT equipment requested by the school;
5. sports equipment or musical instruments requested by the school;
6. compulsory extramural activities part of the curriculum;
7. other fees or costs
8. transport costs to or from school.

N items not free²	0-1 item	2 items	3 items	4-5 items	6+ items
Primary education	DK, FI, MT, PL, SE	DE, EE, LV, NL	CY, EL, FR, HU, IE, LT, LU, SI	AT, CZ, HR, IT, PT, RO, SK	BE, ES
Secondary education	DE, DK, MT, PL, SE	EE, LV	CY, EL, FR, HU, LT, LU, NL	AT, BG, HR, IT, PT, RO, SI, SK	BE, CZ, ES, IE



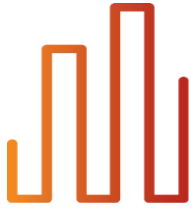
CASH BENEFITS TO COVER EDUCATIONAL COSTS

24 MSs provide cash benefits (universal and/or means-tested)

	Universal	Means-tested
One-off support	AT, BG, CY, EE, PL	AT, BE, CZ, DE, ES, FR, HR, HU, IE, IT, LT, LU, PL, PT, RO, SK
Regular benefits	EL, FI, LU, LV, PL, SE	AT, BE, HR, LU, PL, RO, SI
No benefits	DK, MT, NL	

Geographical disparities (e.g. EE, ES, HU, IT...).

Lack or insufficiency of studies/data on the extent to which existing cash benefits adequately cover educational costs when these are not free for low-income children.

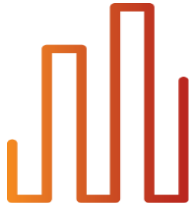


EFFECTIVE AND FREE ACCESS TO SCHOOL MEALS

Three main types of provision in 22 MSs:

- Universal free provision in compulsory education (EE, FI, SE), or at least at some ages (HR, LT, LU, LV)
- Free provision at (some) low-income children (CY, CZ, DE, ES, HU, MT, PL, PT, SI, SK) → risk of missing many children in need (depending on criteria and take-up).
- Provision in targeted schools/areas (BE, EL, IE, NL, RO) → risk of missing many children in need (poor children in non-poor schools/areas, disadvantaged schools not applying)

Five MSs have no or almost no provision of free school meals (AT, BG, DK, FR, IT).



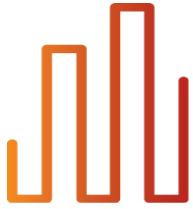
MAIN BARRIERS TO EFFECTIVE AND FREE ACCESS TO SCHOOL MEALS

Financial barriers:

- Where access to school meals is not free for all or for low-income children, parental contributions to the cost of school meals may be a significant financial barrier to participation.

Non-Financial barriers:

Geographical disparity	Limited scope of provision	Lack of infrastructure/ staff/ food suppliers	Lack of full-time classes	Fear about quality/ taste of food	Administrative burden for schools/ low application rate by eligible schools	Administrative burden for parents/ low take-up	Stigma of targeted children
AT, BE, CZ, DE, EL, ES, FR, IE, IT, LV, RO	BE, CZ, EL ES, IE, RO	BG, ES, IE, IT, HR, HU, NL, SI, SK, PT, RO	AT, CY, DE, IT	EE, HU, IE, PT, SI	CZ, RO	CZ, DE, ES, MT, PL	CY, CZ, DE, HU, LT, PL



EFFECTIVE AND FREE ACCESS TO HEALTHCARE

Outpatient care by **GPs**, services by **infant nurses** and **vaccination** prgms are the 3 healthcare services for which more EU countries provide free access for all children, not only low-income children.

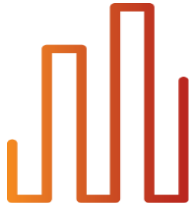
Care by **specialists** is free for all children regardless of income in 22 MSs and in 2 MSs for low-income children.

Dental care is free in 21 MSs.

Free access to **prescribed medicines** strongly depends on the income situation of the child: it is provided for free to all children in eight MSs and to low-income children (at least partially) in 11 other MSs.

Overall, only 10 MSs provide free access (at least) for low-income children to all six health services/products.

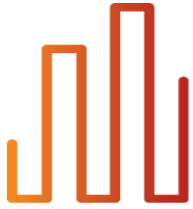
Lack of data on healthcare delivery and costs for (low-income) children – including access to available benefits and/or their adequacy, take-up...



MAIN BARRIERS TO EFFECTIVE AND FREE ACCESS TO HEALTHCARE

Non-Financial:

Understaffing	Long waiting times/lists	Organisational/ administrative barriers	Geographical disparities	Cultural and social barriers	Low health literacy
AT, DE, EL, ES, FI, FR, HR, HU, IE, IT, LT, LV, MT, NL, PL, PT, RO, SI	CY, EL, ES, FI, HR, HU, IE, LT, LV, MT, NL, PT, RO, SI	BE, EL, ES, HU, IE, LU, NL, RO	AT, BG, CZ, DE, EL, ES, FI, FR, HR, HU, IE, LT, LV, PL, PT, RO, SE, SK	CY, CZ, DE, DK, FI, FR, EL, HU, IE, LT, LU, SI, SK	BE, BG, CY, CZ, LT, MT, NL, SK



EFFECTIVE ACCESS TO NUTRITION

Non-financial barriers:

Low education and/or lack of knowledge/ illiteracy	Difficulty with accessing healthy food / supply of unhealthy food in low-income neighbourhoods	Fragmented policies/ no national framework
BE, BG, CY, CZ, DE, DK, EE, EL, ES, HR, HU, FI, IE, IT, LT, LU, MT, NL, PT, RO, SE, SI, SK	BE, CY, IE, LT, NL, SI, SK	BG, DE, EL, HU, IT, RO

Publicly funded measures supporting access to healthy nutrition:

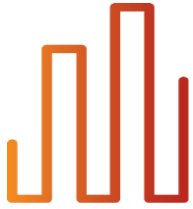
Food distribution	Cash benefits	No measures
BE, BG, CY, CZ, DK, EE, EL, ES, FR, HR, HU, IT, LT, LU, LV, MT, NL, PL, PT, RO, SI, SK	DE, FI, SE	AT, IE



EFFECTIVE ACCESS TO HOUSING

Main policies in place:

1. Housing allowances for low-income hhds exist in most MSs (not in BG, HU, RO and EE).
 - In 10 MSs for renters only (in some of them only for renters on private market), in 13 MSs allowances irrespective of the type of tenure.
 - Lack of studies analysing whether the current housing benefit adequately covers the housing costs of low-income households with children. When available, mixed results depending on the country.
2. Social housing
 - Overview of the provision of social housing in the EU hampered by a lack of common definitions and comparable data.
 - Based on available evidence, in only 3 MSs (AT, DK, NL) does publicly funded housing make up 20% or more of the total housing stock.
 - Eligibility conditions in general the same for low-income households with children but often priority access when children are present.



CONCLUSIONS

- ❌ Many gaps in provision and barriers to access
- ❌ Lack of holistic and coordinated approach and strong political determination backed by clear financial commitments in some MSs
- ❌ Lack of adequate monitoring framework, no targets in many MSs
- ❌ Lack of data on service delivery and costs for (low-income) children – including access to available benefits and their adequacy, take-up...

- ✅ Powerful role for the EU in reinforcing the child-centered approach of investing in children
- ✅ Compared to our mapping in 2020-2021, the situation has improved in some MSs
- ✅ Some MSs developed tools to assess the impact of policy measures on specific groups of children, making them more efficient and effective