

European Social Policy Analysis Network (ESPAN)

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

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SECOND ANNIVERSARY MEETING OF THE NATIONAL CHILD GUARANTEE COORDINATORS

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SYNTHESIS REPORT (SR)

Source of SR: National reports prepared by the ESPAN country teams in the 27 EU Member States (MSs).

Objective: Provide an EU comparative overview of the national situations, and help the COM to set a baseline for monitoring the European Child Guarantee (ECG).

Focus: Access for low-income children to each of the 6 services covered by the ECG:

- (i) **effective** and **free** access to high-quality early childhood education and care (ECEC)
- (ii) **effective** and **free** access to education and school-based activities
- (iii) **effective** and **free** access to at least one healthy meal each school day
- (iv) **effective** and **free** access to healthcare
- (v) **effective** access to healthy nutrition
- (vi) **effective** access to adequate housing.

NB: **Free** 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, or in such a way that financial circumstances will not pose an obstacle to equal access” (Article 3e). The focus is on free access; not on reduced prices.



LOW-INCOME CHILDREN

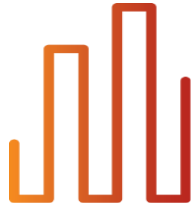
The ESPAN national reports focus on children (<18 years) living in **low-income households**. In each country, the criterion/criteria used for defining “low income” is/are the one(s) used in national policy related to the service.

In the ECG Recom., the focus is on “children in need” – *proxied* as children at risk of poverty or social exclusion (AROPE), i.e. children living in a household that is at risk of poverty and/or severely materially and socially deprived and/or (quasi-)jobless.

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.

The COM asked ESPAN experts, to the extent possible and based on available evidence (studies and other data), to assess the 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, 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.



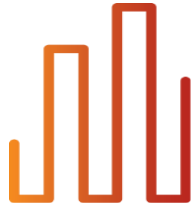
REGIONAL/LOCAL DIVERSITY

In a number of countries, one or several of the six services covered by the ECG are primarily or solely regulated at **sub-national level**.

→ **National reports** then seek to present a general picture and illustrate the geographical disparities by providing an example of both a “well-performing” sub-entity and a “low-performing” sub-entity.

The **SR** cannot describe in detail this regional diversity. It focuses on the general situation, when available, and/or highlights the regional diversity.

→ Please look at the individual **national reports** for more information.

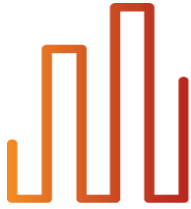


EFFECTIVE AND FREE ACCESS TO HIGH-QUALITY ECEC

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)

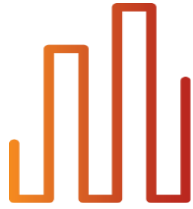


EFFECTIVE AND FREE ACCESS TO HIGH-QUALITY ECEC

3 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 reports) & 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, 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

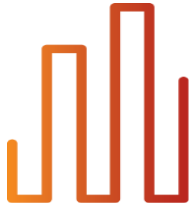
Usually no tuition fees for either primary or secondary education.

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 free ²	0-1 item	2 items	3 items	4-5 items	6+ items
Primary education	DK, FI, MT, PL, SE	DE, EE, IE, LV, NL	BG, CY, EL, FR, HU, LT, LU, SI	AT, CZ, HR, IT, PT, RO, SK	BE, ES
Secondary education	DE, DK, MT, PL, SE	EE, FI, LV	CY, EL, FR, HU, LT, LU, NL	AT, BG, HR, IT, PT, RO, SI, SK	BE, CZ, ES, IE

[+ School-based activities (see Synthesis Report)]



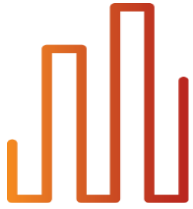
CASH BENEFITS TO COVER EDUCATIONAL COSTS

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.



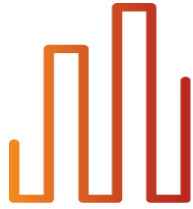
EFFECTIVE AND FREE ACCESS TO SCHOOL MEALS

Three main types of provision:

- Seven MSs prioritise universal free provision in compulsory education (EE, FI, LU, SE), or at least at some ages (HR, LT, LV)
- Ten MSs target their 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).
- Five MSs target some schools/areas (BE, EL, IE, NL, RO) → risk of missing many children in need (poor children in non-poor areas, disadvantaged schools not applying)

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

Compared to the mapping provided in the 2020-2021 ECG Feasibility Study, the situation has improved: some MSs have either launched new schemes for certain age groups for whom no provision existed (e.g. NL) or have extended/ are extending the existing schemes (e.g. CY, HR, IE, LU, SK).



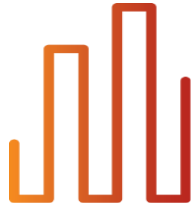
MAIN BARRIERS TO EFFECTIVE AND FREE ACCESS TO SCHOOL MEALS

Financial:

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

Non-Financial:

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, IT	EE, HU, IE, PT, SI	CZ, RO	CZ, DE, ES, MT, PL, SK	CY, CZ, DE, HU, LT, PL



EFFECTIVE AND FREE ACCESS TO HEALTHCARE

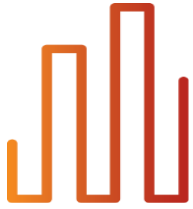
Outpatient care by **GPs**, services by **infant nurses** and **vaccination** prgms are the 3 healthcare services for which more EU countries provide free access for all children, not only low-income children – with some restrictions in access reported in a few MSs.

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 covered by the SR.

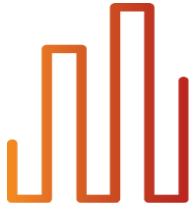


EFFECTIVE AND FREE ACCESS TO HEALTHCARE

In several MSs, there is no free access at the point of delivery but there are mechanisms in place to help meet healthcare costs. E.g.: reimbursement mechanisms, exemptions from co-payments or lower co-payments, annual caps for co-payments, specific complementary healthcare plans, medical cards or special allowances.

National low-income criteria is lower than AROP threshold in a few countries (e.g. EL, HU, MT, PL).

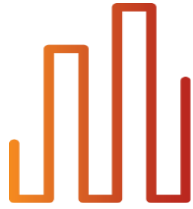
Lack of data on healthcare delivery and costs for (low-income) children – including access to available benefits and/or their adequacy, take-up...



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, DE, 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



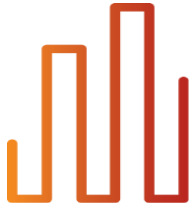
EFFECTIVE ACCESS TO NUTRITION

Financial barriers:

Low-income / Poverty	Low adequacy of social transfers	Low salaries	High(er) prices of healthy food	Inflation / Rising prices
BG, DE, EL, ES, FR, HR, HU, IE, IT, LT, LU, NL, RO, SK	BE, CY, CZ, DE, DK, EE, EL, HR, HU, LT, LU, LV, MT, PT, SK	HR, LU, PT	BG, CY, CZ, DE, DK, EL, IE, LT, LU, NL, SI	BG, DK, EE, HR, HU, IE, LT, LV, MT, PL, PT, RO, SK

Non-Financial barriers:

Low education and/or lack of knowledge/ illiteracy	Unhealthy eating habits	Difficulty with accessing healthy food / supply of unhealthy food	Institutional barriers
BE, BG, CY, CZ, DE, EE, EL, ES, FI, IE, IT, LT, LU, MT, NL, PT, RO, SE, SK	CZ, DK, EE, EL, ES, FI, HR, HU, IT, LT, LU, MT, PT, SI, SK	BE, CY, IE, LT, NL, SI, SK	BG, DE, EL, HU, IT, RO



EFFECTIVE ACCESS TO NUTRITION

Publicly funded measures supporting access to healthy nutrition:

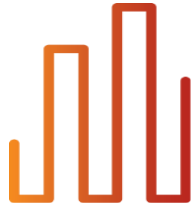
Food distribution	Cash benefits	No measures
BE, BG, CY, CZ, EE, EL, ES, FR, HR, HU, IT, LT, LU, LV, MT, NL, PL, PT, RO, SI, SK	DE, FI, SE	AT, DK, IE



EFFECTIVE ACCESS TO HOUSING

Main policies in place:

1. Housing allowances for low-income hhds exist in most MSs (not in BG, RO and HU).
 - In 12 MSs for renters only (in some of them only for renters on private market), in 11 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 (positive impacts of this support in enabling low-income households to access housing, inadequacy of existing support schemes, or erosion of its adequacy due to rising housing costs).
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.



MAIN BARRIERS TO EFFECTIVE ACCESS TO SOCIAL HOUSING

Financial:

High rents or other financial contributions	Means testing	Hidden costs	No financial barriers
AT, DE, DK, FR, LT, NL, SK	IT, LV, MT, SK	MT	BG, CY, CZ, EE, ES, FI, HR, IE, LU, PT, RO, SI

Non-Financial:

Low or insufficient supply	Waiting times	Geographical disparities	Eligibility rules	Legal and/or administrative obstacles	Housing typology/ conditions	Discrimination and/or stigmatisation
BE, BG, CY, DE, ES, FI, FR, HR, HU, IE, IT, LT, LV, LU, MT, NL, PL, PT, RO, SI, SK	AT, BE, DK, ES, FI, LT, LU, MT, NL, PL, SI, SK	AT, DE, DK, EE, ES, FI, HU, IE, IT, NL, PT, RO, SI, SK	BE, CY, CZ, IT, PL, PT	BG, CY, CZ, ES	FR, HU, IE, RO, SK	DE, HU, LT, MT, RO, SK