

DELIVERING ON THE CHILD GUARANTEE

AN ASSESSMENT OF THE NATIONAL
PLANS' RESPONSES TOWARDS FIGHTING
INEQUALITIES IN ACCESS TO CHILDCARE

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EXECUTIVE SUMMARY

EXECUTIVE SUMMARY

Inequalities begin when a child is born and during the first years of life. This is a sensitive period when most of the skills and competencies that will accompany an individual throughout their life start to be learned. Inequalities, determined mainly by inheritance, as a result of the socio-economic conditions of the family into which the child is born, also begin to arise. Conclusive scientific evidence outlines that early learning and welfare interventions – in particular, quality childcare – can break the cycle of disadvantage. This is why, at the peak of the COVID-19 pandemic, progressive forces called for a Child Union, a union that ensures every child has access to quality childcare.

The EU also recognised the role of childcare as an equaliser and essential component of the Pillar of Social Rights. Two major initiatives have, therefore, been launched to promote equal access to childcare. The Child Guarantee Initiative, sponsored by progressives in European institutions, requests that member states provide free and universal access to basic social rights, including childcare and early learning, for all European children, above all those most vulnerable. In addition, the Council's recommendation on the Care Strategy calls for member states to expand the coverage of childcare services to 45% of children under 3 years old, while also reducing inequities in access between the poorest and the rest of the population. More importantly, a mechanism of monitoring, within the EU Semester, has been put in place, with member states required to submit Child Guarantee National Action Plans (CGNAPs), identifying key actions to reach this objective, with means, financing and tools to assess progress.

The CGNAPs might then represent a key instrument, on one hand, for member states to push their childcare agenda forward, and, on the other hand, for European institutions to monitor the progress of member states in reducing inequalities in access to

childcare. The objective of this study is to assess the efficacy of CGNAPs in addressing inequalities in access to childcare, taking four member states as case studies: Belgium (Flanders and Brussels' Dutch-speaking community); Finland; Italy; and Spain.

The study shows that, even though the four countries differ in terms of coverage of childcare services (with Flanders having the highest rates, followed by Spain, Finland and Italy), they all acknowledge substantial inequalities in access, with low-income children disadvantaged, due to the following factors: the lack of offering in marginalised territories; excessive costs for services, preventing the poorest families from affording the enrolment of young children; criteria to access favouring working/middle-income families; and low quality, with specific reference to workforce qualifications and working conditions. These inequality drivers are, to a large extent, explained by limited public spending and mechanisms for allocating existing funds not targeting municipalities (which are usually in charge of the provision of services) or areas within bigger cities, where the most vulnerable children live. In addition, these local authorities, very often, lack the capacity and means to develop and implement a relatively "new" service, such as childcare.

However, among the CGNAPs assessed in this study, only two – Italy and Spain – somewhat address the main causes of inequalities in access to childcare and propose responses, with measurable targets, actions and budgets. Alternatively, Belgium (Flanders and Brussels' Dutch-speaking community) and Finland presented CGNAPs that neither included analyses of inequalities nor specific objectives, targets and spending. This makes it hard for both EU institutions and national stakeholders to use the plans to promote equitable childcare policies in these countries.

Regardless of the specificities of the EU member states, the findings of the study suggest that, at present, CGNAPs, might limitedly support the promotion of equitable childcare policies across the EU, apart from few member states (such as Italy and Spain) that have invested in childcare provision through the Recovery and Resilience Facility, and therefore, have developed plans to monitor results and spending.

A number of actions can be taken, at the EU level, to enhance the effectiveness of the plans. Specifically:

- (1) increase the availability of granular data (at the territorial level) on access, the characteristics of beneficiaries, the quality of services and financial resources, in order to plan concrete and appropriate actions and targets and to monitor results;
- (2) build the capacities of local authorities for planning equitable and quality services by mobilising best experiences across the EU in support of the most marginalised areas; and
- (3) an EU initiative to promote the quality of the childcare workforce, with reference to the qualifications of educators, working conditions and salaries.

In addition, the expansion of childcare provision cannot be ensured with stringent fiscal control from the EU, which prevents municipalities from investing. Childcare must be pulled out of the stability pact and considered as an investment in present and future social and economic cohesion, and not mere spending.

Finally, progressives must continue to fight, in member states and EU institutions, for a Child Union, a union that recognises (and invests in) childcare as a right, and the foundation for the education and emancipation of European citizens in the 21st century. It is a paramount welfare policy to promote present and future fairness, prosperity and resilience of European societies and economies.

1. INTRODUCTION

1. INTRODUCTION

1.1 The need for a European Child Union: reducing inequalities through childcare

In the EU, even before the COVID-19 pandemic, 23 million children were at risk of poverty or social exclusion.¹ The impact of the pandemic on children's lives has been uneven and alarming, increasing material and educational poverty and inequalities across Europe.

There is a large consensus among academics and policymakers on the positive effects for children (and parents) of participation in childcare programmes. Inequalities already appear in the early years of life, and they are shaped by the environment into which the child is born and grows up. Scientific research shows, for instance, that already children aged 4 from low-income families cumulate important gaps in numeracy, literacy, physical development and in skills such as the capacity to adapt to changes and manage stress, which are considered to be essential in present and future labour markets and societies.²

Early inequalities in the acquisition of the key capabilities to live in the 21st century³ lead to higher

school dropout levels and fewer competencies in early living, making these children, once they become adults, more likely to experience unemployment and lower earnings, perpetuating the transmission of poverty and social exclusion from one generation to the next. Inherited inequalities are detrimental to the economy, because they prevent talents from emerging and actively contributing to the growth and development of countries, and for social justice, stability and cohesion.

Childcare is demonstrated to be an effective intervention to reduce inequalities. According to a recent FEPS study, children aged 3, from the poorest families, enrolled in quality childcare, are about 15% more likely to attain the same levels of competencies as their peers when teenagers.⁴ Quality refers to the inclusiveness of programmes able to meet each child's needs and empower them. The availability of childcare services increases employment opportunities for women and, therefore, also represents an essential means to reduce present gender inequalities, raising household incomes and reducing the risks of poverty and social exclusion. In summary, childcare is a key policy to break the intergenerational transmission of disadvantage.

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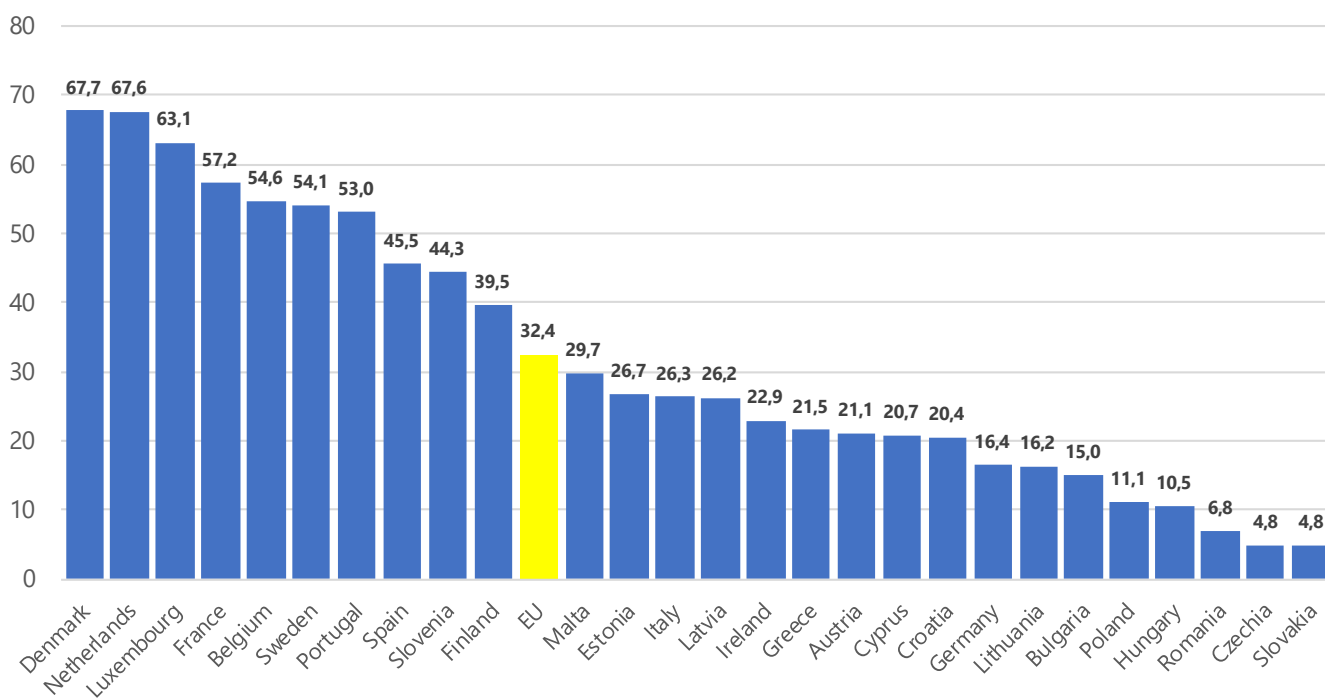
Childcare is a key policy to break the intergenerational transmission of disadvantage.

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Even though the positive effects of participating in childcare, especially for the most disadvantaged children, are well documented, in most European countries, childcare services are unavailable and/

or unaffordable. At present, less than half of EU member states offer childcare services to more than 33% of their children below age 3 (see Figure 1).

Figure 1. Percentage of children in childcare programmes in the EU.



EU-SILC 2020

In addition, services are, in some cases, of short duration, and therefore, do not match parents' working needs. Quality, in terms of staff qualifications, for instance, or the implementation of inclusive curricula, is generally low across EU member states. In addition, the offer is extremely limited in marginalised suburban or remote and rural areas, and in the majority of member states services are run by private providers.⁵ As a result, disadvantaged children usually do not access childcare services or are enrolled in low-quality programmes that are thus unable to provide appropriate learning and care experiences and enhance their educational and development opportunities.

It is for this reason that progressives have called for a Child Union, aiming at guaranteeing equal access to quality early childhood education and care, as an essential element to reduce inequalities and fight poverty and social exclusion. The Child Union initiative calls for progressives to promote reforms, in member states and EU institutions, to make childcare a legal entitlement, and therefore, guaranteed to all children, regardless of the environment in which they are born and grow up. This can only be achieved through substantial public investments, aiming at expanding the offer and quality of childcare, especially in areas where the most disadvantaged children live, and making services free for them.

1.2. Childcare within the social agenda of the EU

The EU recognises the key role of childcare in reducing present and future inequalities and promoting social and economic development, as well as the need to expand access to childcare services across Europe, while ensuring, in particular, that the most disadvantaged also benefit from early learning and care.

The 2013 European Commission recommendation “Investing in children: breaking the cycle of disadvantage” underlined the essential role of childcare in reducing poverty and social exclusion and strengthening economic growth and the well-being of European society. The recommendation calls on member states to allocate adequate resources to ensure access to affordable and quality childcare services, particularly for children most in need.⁶

The Structural Reform Support Programme 2017-2020 included technical support for member states to implement reforms aimed at expanding accessibility, quality and inclusiveness of early childhood care and education services, prioritising the most disadvantaged children, also those in institutions and with disabilities, and with migrant and ethnic minority backgrounds. In addition, in 2017, the European Council adopted the “Pillar of Social Rights”, aiming at improving living standards, working conditions, social protection and the inclusion of European citizens.⁷⁸ Principle 11 of the Pillar states the right of children to affordable and quality childcare as a key element to ensure a reduction in the number of children at risk of poverty or social exclusion by at least 5 million and halving the gender employment gap by 2030. Accordingly, the expansion of quality and affordable childcare has become part of the country-specific recommendations for a number of member states, the progress of which has been monitored through the Social Scoreboard within the European Semester.

In 2019, the European Council also adopted a recommendation on “High-quality early childhood education and care systems”, establishing a

framework of quality indicators to support member states in planning quality and affordable childcare systems, with specific reference to governance and financing to expand access to the most disadvantaged children, and ensuring both structural quality (e.g. children-staff ratio, staff qualifications, adequate learning environment) and process quality (curriculum implementation and relationships between staff and children and with parents).⁹

The pledge from the EU to promote childcare has been taken further with the adoption of two major initiatives in recent years.

Firstly, the Child Guarantee was established in 2021, with the objective of ensuring that “every child in Europe at risk of poverty or social exclusion has access to the most basic of rights like healthcare and education”.¹⁰ An initiative developed by the European Parliament, in a first stance in 2015,¹¹ and subsequently confirmed in a resolution in 2019,¹² the Child Guarantee supports member states in their efforts towards fighting poverty and social exclusion, by guaranteeing equal access to welfare services, including early childhood care and education, that are essential to reduce inequalities.

As previously outlined, access to childcare across Europe is extremely unequal, favouring mainly middle- to high-income children. As a result, the Child Guarantee requires that member states undertake concrete actions to enhance participation in childcare programs for the most disadvantaged children, notably, those in material poverty and experiencing severe housing deprivation; children with disabilities, a migrant background, and from a racial or ethnic minority background (in particular, Roma children); and those living in institutions and other alternative care settings.

Moreover, the European Commission proposed, in 2022, the “European Union Care Strategy”.¹³ The strategy updates the so-called Barcelona targets on early childhood care and education, established in 2003, which demanded that member states guaranteed at least 33% of children below age 3 participated in childcare programmes, by increasing the target to at least 50% of children. In addition,

a number of sub-targets are suggested, focusing specifically on reducing inequalities in access and increasing quality. Specifically:

- (1) to provide sufficient hours of childcare services to align with the working hours of parents;
- (2) to strengthen quality, inclusiveness, accessibility and affordability, and introduce a legal entitlement to childcare;
- (3) to improve staff working conditions and close the gender gap; and, more importantly,
- (4) to close the gap in participation in childcare between the most disadvantaged and the remaining children.

The European Commission also engages in providing assistance to member states for their efforts towards expanding childcare and will monitor progress through the European Semester tools.

1.3. The Child Guarantee National Action Plan: an instrument to increase access to quality childcare across Europe for vulnerable children

The EU possesses the capacity for policy innovation and the political strength to facilitate a new era of support and development for all European children and families and to address rising inequalities.

On one hand, the Care Strategy sets common goals and measurable targets to expand (while reducing inequalities in) access to quality, and inclusive, childcare services. On the other hand, the Child Guarantee solidifies the strategy's equity principle, by demanding member states take concrete, monitorable and budgeted sets of policy actions and programmes to guarantee free access to childcare to the most disadvantaged children: those in poverty and social exclusion; those in precarious family situations; those with a disability; those residing in institutions; and migrant and refugee children.

The European Council's recommendation also outlines that financial resources from the Recovery and Resilience Facility (RRF) can be used by member states to pursue this objective, which contributes to mitigating the effects of COVID-19 and the economic recession, and achieving the goals of the European Pillar of Social Rights. In addition, within the European Social Fund Plus (ESF+), for 2021-2027, 5% of funds have been earmarked for the implementation of the Child Guarantee for those countries with levels of children at risk of poverty or social exclusion higher than the EU average (in 2017-2019). The European Regional Development Fund, which focuses on enhancing social infrastructures and services, can also be employed, along with the Technical Support Instrument, which aims to support member states in designing and implementing the reforms necessary to reduce children's inequalities and social exclusion.

The key aspect of the European Council's recommendation is that member states, after entry into force of the Child Guarantee, are obliged to present a Child Guarantee National Action Plan (CGNAP), detailing the actions that the country will undertake to ensure equal access to quality childcare by 2030, including regular and EU budget resources which they intend to use in this respect. This instrument, which will be integrated into the revised EU Social Scoreboard, will allow the European Commission to effectively monitor the implementation of planned actions, as part of tracking the progress made by member states towards the achievement of the "new Barcelona" targets for care and the objectives of the EU Pillar of Social Rights, within the European Semester coordination process.

It is of paramount importance, therefore, that CGNAPs are accurate, coherent and effective, and thus, contain analyses of the main drivers of inequalities in access to childcare services, for vulnerable children; the description of measures to tackle inequalities, both present and future, with measurable targets and monitoring and evaluation mechanisms; and the financial resources needed to achieve the target.



Child Guarantee National Action Plans should be accurate, coherent, and effective, and therefore contain analyses of the main drivers of inequalities in access to childcare services, for vulnerable children; the description of measures to tackle inequalities, both present and future with measurable targets and monitoring and evaluation's mechanisms; financial resources needed to achieve the target.



Member states might, according to national specificities and conditions, prioritise specific groups of children that are particularly in need and/or in highly socially disadvantaged areas and territories.

The CGNAP must be developed and implemented in a participatory manner, involving local authorities, such as regions, provinces and municipalities; the latter, in general, are responsible for the delivery of childcare services, along with civil society, non-governmental organisations, and the beneficiaries – children and parents – themselves.

In addition, the CGNAP must illustrate the governance structure of the Child Guarantee, as the body responsible for coordinating actions and monitoring the implementation of the plan, with adequate and specific resources allocated for these purposes.

1.4. A review of CGNAPs of four member states: Belgium (Flanders regions); Finland; Italy; and Spain

The scope of the present study is to assess the accuracy, coherence and effectiveness of the CGNAPs in four countries – Belgium (Flanders and Brussels' Dutch-speaking community), Finland, Italy and Spain – in pursuing the goal of reducing

inequalities among children in the early years of their lives in their respective countries.

In particular, the study investigates whether the GCNAP includes:

- analyses of the inequalities in access, which are possibly disaggregated at the territorial level;
- correctly identified factors that undermine access to childcare for disadvantaged children;
- measurable objectives and targets to increase publicly funded places by 2030, with a focus on the territories where the most disadvantaged children live, and reduced costs or gratuity for the most disadvantaged children;
- indications of the funds allocated to achieve the objectives and targets (in particular, the RRF);
- proposals to increase the quality and inclusiveness of childcare;
- actions to strengthen demand, also in terms of reducing cultural barriers in relation to the participation of young children in childcare programs; and
- effective modalities and budgets to monitor the implementation of actions.

2. COUNTRY CASE STUDIES



2.1 BELGIUM

2. COUNTRY CASE STUDIES

2.1. Belgium (Flanders and Brussels' Dutch-speaking community)

2.1.1. Status of childcare in Belgium

Early childhood education and care in Belgium are the competence of “language communities”: Flanders; the Federation Wallonie-Bruxelles (FWB); and the German-speaking community (*Deutschsprachige Gemeinschaft*). In the Brussels capital region, both Flemish and Francophone (FWB) communities are competent for the childcare of their respective language populations (Dutch and French). As a result, while the Federal Department of Social Integration (*FOD Maatschappelijke Integratie/SPP Intégration sociale*) was responsible for the Child Guarantee report from Belgium, the report actually consists of separate reports for each community. The focus of the case study is mainly on Flanders and Brussels (Dutch-speaking community).

In each community, early childhood education and care are organised as a split system, with childcare (0 to 3 years) as a competence of the Ministry of Welfare or Ministry of the Family, and preschool education (*kleuterschool/école maternelle* for children aged 3-6) as the competence of the Ministry of Education.

As in most EU countries, enrolment in preschool education in Belgium is almost universal. Over 97% of children are enrolled in preschool. Universality eradicates inequalities in access, since children from poor families are also enrolled. Coverage of childcare services for the youngest children (aged 0-3) is also high. In Flanders, slightly over 50% of children attend childcare, while in the FWB it is slightly under 50%. In both cases, targets proposed by the EU Care Strategy are already achieved.¹⁴

In addition, both Flanders and the FWB seek to ensure accessibility for vulnerable families by offering mostly publicly funded childcare services and establishing financial contributions from parents in relation to their income (for 75% of childcare places). Lower income families pay less in the FWB than in Flanders and high-income families pay slightly more in the FWB than in Flanders). The minimal fee across Flanders is €6 for a full day, and the maximum is €33.31 (from 1 January 2023).¹⁵ Childcare centres can add administrative costs and costs for nappies and special nutrition. Yet, there is the possibility to obtain a further reduction in fees (below the minimum threshold) for families living in poverty. However, it is decided on a case-by-case basis by the municipal welfare office.

In spite of the high coverage, the presence of publicly funded services and progressivity in parental financial contributions, inequalities in access to childcare are noticeable. While more than 70% of children in the 20% highest income families regularly attend childcare, this is the case for only around 20% in the lowest income group.¹⁶ The gap between rich and poor has widened in the last decade.

In addition, in both communities, childcare workers are only trained to a post-secondary non-tertiary education level. As a result, Belgium has childcare staff educated to a lower level than in most EU member states, in which a tertiary education qualification is necessary to work in these services. In addition, adult-child ratios are among the highest in Europe: seven children per adult in the FWB and eight to nine children per adult in Flanders.¹⁷ The combination of lower educational levels, high ratios and few regulations on continuous professional development and leadership is a serious challenge to the quality and inclusiveness of childcare and can further exacerbate inequalities.

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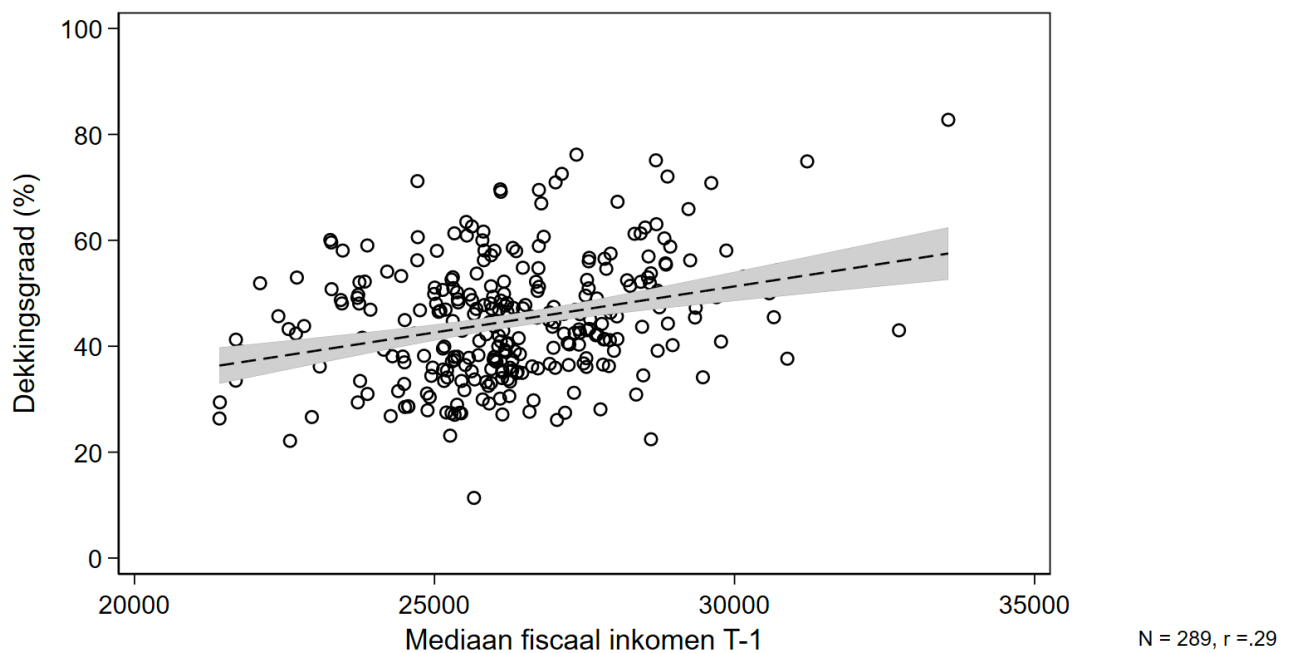
2.1.2 Main factors responsible for inequality in access to quality childcare

Territorial inequalities

The first factor responsible for inequality in access to childcare in Flanders is geographical inequality – among municipalities and within areas of metropolitan cities. Municipalities and neighbourhoods with a higher average family income had more childcare places per 100 children

than municipalities and neighbourhoods with lower income families (see Figure 2). While this is the case over all municipalities, it is also the case across neighbourhoods within most of the 13 main cities,¹⁸ apart from some notable exceptions (such as the city of Ghent, which is described as an example of inspiring practice in the FEPS study on the Child Union).¹⁹ This is a historically constructed inequality that is reinforced over time. The main reason is determined by the governance and modalities of allocation of resources by the Flemish community.

Figure 2. Relationship between median fiscal revenue and number of childcare places per 100 children in all municipalities in 2017.



Source: Van Lancker and Vandenbroeck (2019).

Services have developed over time mainly where middle- to high-income households were located, in which both parents were employed, and therefore, demand for childcare services was higher.

In addition, recently, when the budget was made available for additional childcare places, the community's agency in charge of allocation of funding, *Opgroeien*, used an algorithm to define in which municipalities and/or cities or areas of cities new places could be developed and funding disbursed. The algorithm used different criteria, including the number of available places per 100 children, as well as economic (employment) and social (income levels) indicators. This type of algorithm tends to privilege areas where the offer of childcare services is already available and middle- to high-income households and employed parents live, largely neglecting social factors.²⁰ As a result, the governmental agency planned to revise the

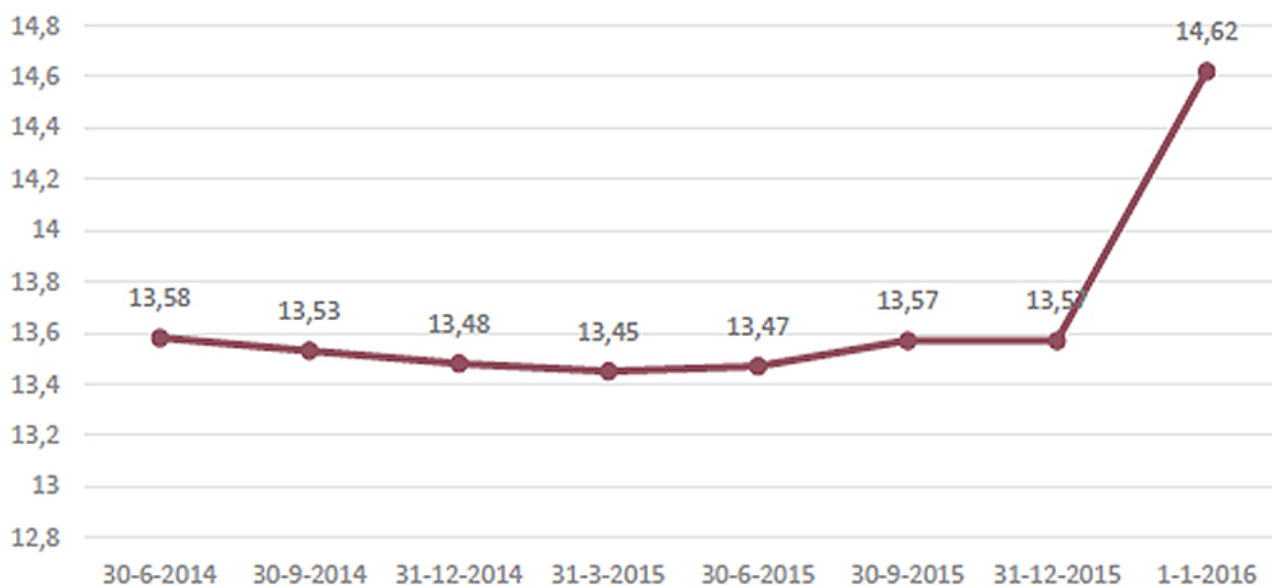
algorithm and increase the weight of social criteria, such as percentage of low-income families. The results of that revision still need to be evaluated.

Similar dynamics have been observed in Brussels (Dutch-speaking community), with families from a migrant background and single-parent families (usually economically poorer) having significantly less chance to obtain a childcare place than employed and middle- to high-income parents.²¹

Affordability

A second determinant of inequalities in access to childcare in Flanders and Brussels (Flemish-speaking community) is related to the costs of services for families. With the childcare decree of 2014, parental fees for the lowest income groups have significantly increased (see Figure 3).

Figure 3. Average parental fees and the influence of the 2014 decree.



Source: *Kind en Gezin*.

As previously mentioned, poorer and severely disadvantaged families can ask for permission from the municipal welfare service (Openbaar Centrum voor Maatschappelijk Welzijn, OCMW) to obtain a reduction in their fee. However, it is a municipal competence, so the criteria for obtaining a fee reduction for poor families may vary substantially from one municipality to another. In some cases, criteria to access are too stringent and/or the reduction is limited. As a result, data show that the uptake is marginal. It varies from 0.63% of users in Bruges to 5.39% in Kortrijk (www.Opgroeien.be).

Criteria for access

Bureaucratic measures are also factors that increase inequalities to access. The 2014 decree stipulates that parents need to make a contract that fixes which days the childcare will be used, and it forces parents to pay for the reserved days, even if the child does not attend. How many exceptions are possible and what counts as exceptions (e.g. child's illness, holidays) significantly differ from provider to provider. What parents need to pay for a no-show also significantly differs: it can vary between the normal daily price and a fixed maximum possible price. Studies have shown that this measure is a deterrent for parents in precarious labour situations and parents in poverty.²²

In addition, some childcare managers favour dual-income families seeking full-time places, as this facilitates administration, yet no clear figures are available for the entire Flemish community. A study conducted in Brussels instead shows there may be significant differences in priorities for managers and how these are acted out. A few examples from that study include:²³

- 50% of childcare centres claim to give absolute priority to a crisis situation, but none reserve places to do so;
- 31 managers claim to give absolute priority to the lowest income, but none of these childcare centres has more than 10% of users from low-income groups; and

- 17 managers claim to prioritise parents in a training program, but none of the centres has more than 10% of users in such conditions.

This shows that priorities play a role and the mentality favours social criteria, but this does not necessarily mean that practice is also changing.

Lack of quality

Ensuring quality of childcare services remains a challenge. In 2016, a comprehensive study on the quality of Flemish childcare was conducted.²⁴ It revealed that educational support was below average. This means that childcare is underachieving at the beneficial potential effects on children's development and inequality reduction. The unfavourably high adult-child ratio, combined with low qualifications (ISCED 4), no child-free hours and lack of legislation on the right to continuous professional development jeopardises the overall quality. In addition, low salaries lead to high turnover, and the combination of these factors determines important staff shortages. The starting wage for a childcare worker is approximately €16,000 yearly (in public service; in private service, it may vary substantially, but will usually be less). At present, Flanders spends €2.90 per hour per child in childcare (compared to €6.20 in the Netherlands or €8.80 in Sweden).²⁵ To guarantee quality and accessibility for children in poverty, significant additional budgetary investments will be necessary.

2.1.3. Does the CGNAP effectively address inequalities and propose solutions?

The Belgian CGNAP mentions some recent or ongoing initiatives to map the problems of accessibility (e.g. the 2019 study on the use of childcare and a VIONA²⁶ study), but does not provide any concrete targets for the future. The studies mentioned are also not explained in the CGNAP, nor does it mention any conclusions that may lead to actions.

For the Flemish community, there are no figures for how much access to childcare for children in poverty needs to increase, the numbers of places to create, geographical targets, or any other key indicators or objectives to reach regarding accessibility, availability or affordability of childcare for children in poverty. In other words, the CGNAP does not mention any benchmarks. There is a rather general reference to the role that *Huizen van het Kind* (parent support centres) may play in alleviating child poverty. As a result, there are no budgetary commitments made in the CGNAP.

This needs to be nuanced for the Dutch-speaking community in Brussels, where the *Vlaamse Gemeenschapscommissie* (the competent body for childcare policy for the Dutch-speaking community in Brussels) uses a comprehensive study to guide it towards a social policy for accessibility and availability of childcare. The CGNAP mentions a commitment to have a social childcare policy guided by this study.²⁷ In addition, investments are made for the close monitoring of access through the “*lokaal loket kinderopvang*” (the service that, among others, centralises all childcare demands and stimulates a social policy regarding childcare uptake). While both intentions are well noted in internal discussions in the *Vlaamse Gemeenschapscommissie*, again no quantitative or budgetary targets are mentioned in the CGNAP.

Regarding the quality of childcare, the picture is rather similar. References are made to ESF projects by some NGOs aimed at creating additional

childcare places for urgent childcare needs and for reinforcing professional competences, but there are no clear targets or commitments from the Flemish authorities.

2.1.4. Concluding remarks

Flanders is one of the few European regions that is typified by a higher-than-average availability of childcare, combined with a higher-than-average inequality of enrolment for the youngest children. Consequently, there is an urgent need to address access to high-quality childcare for children in poverty in Flanders. These issues are related to inequalities in availability, affordability and accessibility, as well as to key aspects of structural quality conditions.

There are several monitoring instruments in place: every five years, the government commissions a large-scale study on the offer, demand and uptake of childcare for the whole of Flanders;²⁸ several larger cities (i.e. Brussels, Ghent and Leuven) centralise all demands and can, therefore, continuously monitor who gets the childcare places and who does not; and every five years a comprehensive study is commissioned to monitor the quality. In addition, the Flemish government, in close collaboration with *Agentschap Opgroeien*²⁹ and a large group of stakeholders, developed an action plan, called *Vroeg en Nabij*,³⁰ in which a vision text on the future of childcare in Flanders is elaborated. In that text, the ambition is clearly stated to have high-quality childcare places for all children, including for children in vulnerable situations.³¹



The CGNAP lacks a clear state of affairs and quantified analysis of the thresholds for the accessibility of childcare for children in poverty or any other vulnerability.



In contrast with the fact that all these monitoring instruments are in place, the CGNAP lacks a clear state of affairs and quantified analysis of the thresholds for the accessibility of childcare for children in poverty or any other vulnerability. It also lacks targets in terms of the number of places to build and addressing geographical inequality, priorities, parental fees or quality issues, as well as budgetary commitments and a monitoring and evaluation system. As a result, the CGNAP simply acknowledges a problem, in terms of coverage and access for vulnerable children, but does not provide any concrete solutions and, more importantly, action plans to address inequalities.



2.2 FINLAND

2.2. Finland

2.2.1. Status of childcare in Finland

In Finland, early childcare and education is a legal entitlement.

Every child has the right to have a place in childcare services, after the end of parental leave, and municipalities are obliged to provide access to children requesting it. The share of private institutions offering childcare services is minimal and the affordability of public services is ensured through the setting of a maximum cap of €288 per month for parental financial contributions, with no fees required from lower income households.³² Finland also invests in quality of services. The annual expenditure for early childhood education and care programs is relatively high (equivalent to \$23,353 per child) and the average ratio of number of children per care staff member is nine, which is lower than the Organisation for Economic Co-operation and Development (OECD) average (15 children per teaching staff member).³³

As a result, Finland appears to be on track to achieve the objectives of the Child Guarantee and targets proposed by the 2022 EU Care Strategy, with specific reference to ensuring affordable and quality childcare services, as a legal entitlement to children.

However, looking at data on enrolment, between 3 and 5 years old, 85% of children participate in preschool education programs, reaching over 90% at age 6, but the percentage decreases to less than 40% for children below age 3 (and particularly for children aged 1 and below), which is the lowest rate of intake among Nordic countries.³⁴

Not only is participation in childcare in Finland lower than that in many EU countries, especially for children below age 3 – and far from the target proposed by European Commission to reach 50% by 2030 – there are also consistent inequalities in access. Particularly penalised are children from lower income families, which are concentrated in urban areas in the south of the country, particularly

in the greater Helsinki area, along with children living in rural, remote areas.³⁵

The same geographical disparities are actually observed when looking at later educational achievements, notably results from the OECD Programme for International Student Assessment (PISA) tests in mathematics, reading and science for Finnish children aged 15, thus reinforcing the strong association between inequalities in accessing early learning and long-term school performances.³⁶

A large share of low-income children also have a migrant background. Finland has seen a rise in immigration in recent decades. In 1990, the foreign-born population accounted for just 1% of the total population, while in 2019 it reached 7%.³⁷

2.2.2. Main factors responsible for strengthening inequalities in access to quality childcare

Territorial inequalities

Childcare is considered a learning experience; the beginning of the educational path of a child. The Ministry of Education is responsible for developing and implementing national curricula, pedagogical guidelines, establishing quality criteria and evaluation, along with coordinating the workforce network.

Yet, the responsibility for the provision (and financing) of services lies with municipalities, which have great autonomy in the way services are organised, curricula and how evaluations are performed. Government transfers to municipalities cover only 25% of costs of childcare services. The remaining 75% is financed by municipalities through local taxation and parental contributions (accounting for approximately 10%, among the lowest share of EU countries).³⁸ As a result, those municipalities located in areas with a high incidence of low-income families, which provide limited financial contributions directly through childcare fees and indirectly through taxation, might have less

budgetary means to invest in childcare provision and/or offer lower quality services.

Lack of quality

Since municipalities have the responsibility for managing the costs of services, including implementation of the curriculum, quality standards and professionalisation of staff. Since financial resources are lower for marginalised municipalities, quality might also be negatively affected. In particular, with reference to process quality, and the capacity of services to implement inclusive pedagogical approaches and practices, it is essential to create an appropriate learning environment, particularly for the children of newcomers. These municipalities also struggle to recruit and retain care staff and teachers, who are called on to operate in marginalised, difficult territories, with limited means, and lower salaries, compared to primary education teachers.³⁹

Competing welfare services

Affordability is not a major factor undermining access to childcare, since fees for parents are low and poorer households are not required to provide any financial contribution. However, there is another factor fuelling inequalities in access to early learning experiences by vulnerable children, which is the presence of “competing” welfare measures: the homecare allowance, an alternative scheme to enrolment in childcare services. After the end of parental leave, parents can choose either to enrol children in a childcare service or to receive a monetary allowance for homecare (a basic allowance provided by the government, along with an eventual top up provided by municipalities). Only a few municipalities permit combining the homecare allowance and participation in childcare, but only to so-called “open Early Childhood Education and Care”, typically organised two or three times a week for a few hours. These services are, therefore, limited in time, possibly having little impact on children’s learning achievements, and they are not available in scarcely populated and rural areas. Evidence suggests that the homecare allowance is widely utilised by the lowest income parents, particularly

those with an immigrant background. These families clearly opt for cash, primarily to increase the household income. This dynamic is reinforced by fewer employment opportunities in marginalised areas, where most poor families and those with migrant backgrounds live, along with cultural factors (notably, the reticence to enrol young children in care outside of the family).⁴⁰

To summarise, the combination of limited financial resources for marginalised areas and territories, where most vulnerable children live, and the alternative scheme of a homecare allowance undermine both the offer of and demand for quality childcare services, increasing inequalities in early learning.

2.2.3. Does the CGNAP effectively address inequalities in childcare and propose solutions?

The Finnish CGNAP certainly has important strengths. In particular, it creates a link between the Child Guarantee and the National Child Strategy, also adopted in 2021; rightly identifies most vulnerable children; and outlines participatory approaches adopted to develop the plan (involving children’s representatives), while also indicating important future actions to appropriately monitor the plan. However, for the part pertaining to childcare, there is no accurate analysis, using available data and research, of the major challenges facing the childcare system in ensuring equal access to quality services, particularly to vulnerable children:

Early childhood education and schooling

Compared to many other countries, Finland has a low rate of participation in early childhood education, but almost all children undergo preschool education. An interruption in school attendance and weak learning results in comprehensive school pose a major exclusion risk. There is also the concern that disparities in learning between boys and girls are the largest in Finland among the OECD countries. At their best, early childhood education and schooling serve to secure a child’s right to learning and offer a good

space for peer relations, communality and long-term welfare. Therefore, welfare must be considered in conjunction with learning, and strong support and student welfare must be maintained. Learning generates welfare and welfare supports learning. Functional practices and resources are needed for anti-bullying and anti-violence efforts. In addition to skills and resources, it must be ensured that children are heard and included in early childhood education and schooling, consistently and comprehensively.⁴¹

In addition, the CGNAP, even though it includes a specific objective to expand childcare, “the objective is to increase children’s participation in early childhood education (particularly children under the age of 3)”⁴², does not mention any measurable target to reduce the gap in access between vulnerable children and the rest of the population, nor has a national budget been allocated to this scope (RRF Finland does not include funding for childcare). Furthermore, no indicators and targets are set to reinforce quality (in terms of either an increase in the workforce and improved working conditions or the implementation of inclusive curricula and practices), apart from a generic indication of a reform adopted in 2022:

“The reformed Act on Early Childhood Education and Care is set to enter into force on 1 August 2022. Even before the reform, children had the right to support, but the reform will further specify the levels and forms of support in accordance, with the three-tiered model, including how the support is given. The aim is to ensure equality for all children everywhere in Finland. The model of three-tiered support classifies support tiers into general, intensified and special support. The need for support is assessed based on the individual needs of each child. The reform introduces changes to the working methods of early childhood education. Among other things, children will have the right to any aids necessary to participate in early childhood education, and the reform mandates a personal early childhood education plan for every child. The principle of inclusion will also be specified, that is, enabling the full participation of every child in early childhood education with consideration for their capability.”⁴³

As a result, the CGNAP of Finland appears to be conceived more as reference document than an actual programme, with concrete actions and measurable goals. A document, therefore, that basically lists (and refers to) existing strategies and programs of the Finnish government, aiming to tackle children poverty and inequalities, while adding recommendations about how to monitor the implementation and results of these strategies, with specific reference to an impact on target groups of vulnerable children.

For childcare, the CGNAP mainly refers to the right to learn program. The reform program has been launched by the Finnish government specifically to tackle drivers of learning inequalities, by improving equality and quality of education, in particular, early childhood care. The program for early years focuses on lowering compulsory education (today starting at age 6) to age 5; mobilising additional funds for municipalities to cope with the costs of childcare, but also establishing a positive-discrimination scheme (to increase funds for services in areas where social inequalities are higher); and increase the professionalisation of staff.

The program is certainly an important step towards increasing equality in access to quality childcare. However, it might risk falling short in tackling factors undermining access for vulnerable children, and therefore, ultimately not contributing to achieving the objectives of the Child Guarantee. In particular, criteria to allocate positive-discrimination schemes might eventually include, apart from the socio-economic condition of territories where actual services are, the lower presence of childcare services themselves, to enable targeting areas where vulnerable children live and where services are scarce. In addition, staff policies should also address the matter of poor working conditions for staff in childcare services and not only professionalisation and salary levels.

Finally, the program does not consider a revision of the homecare allowance – which, at present, represents the major obstacle in relation to the enrolment of vulnerable children – towards allowing, for instance, low-income parents to combine cash and the enrolment of children in childcare to increase

revenues and decrease income inequalities and risk factors for children, while also offering them early learning opportunities.⁴⁴ Even though the CGNAP has been conceived more as a recollection of existing strategies, emerging bottlenecks should be attentively considered and exposed in the CGNAP, with proposals for possible solutions.

2.2.4. Concluding remarks

Finland is reputed to be among the best education systems in the world. Yet, in recent years, the country has seen an increase in educational inequalities. A debate has been launched about the role of early childhood education and care in tackling these inequalities. Finland acknowledges lower enrolment rates in childcare for children below age 3, compared to other Nordic countries. Inequities in access are

high and penalise children from low-income families and migrant backgrounds. The CGNAP could have been a valid occasion to establish clear objectives, measurable targets and program appropriate actions to tackle drivers of inequities in childcare. However, as it stands, the plan is simply a reference document, listing existing strategies adopted by the government to ensure access to quality childcare to vulnerable children and outlining the need to monitor their implementation and effects on targets within the Child Guarantee. The plan does not include any analysis of the possible bottlenecks of these strategies, nor does it propose solutions and further policy actions, for example, the absence of reforms of the homecare allowance, which is among the major factors undermining participation in childcare for low-income children and with migrant backgrounds.

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The plan is simply a reference document, listing existing strategies adopted by the government to ensure access to quality childcare to vulnerable children and outlining the need to monitor their implementation and effects on targets within the Child Guarantee.

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2.3 ITALY

2.3. Italy

2.3.1. Status of childcare in Italy

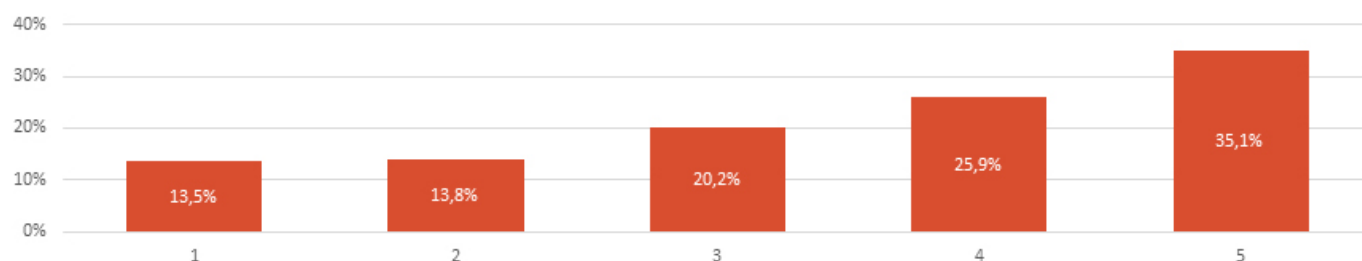
Early childhood education services in Italy are organised and administered differently according to age group. The services for children below age 3 and childcare (*Nidi d'Infanzia* or *Servizi Integrativi*) are highly decentralised, with different regulatory and management responsibilities delegated to the three levels of government.

The attendance rate of childcare services in Italy is relatively low for children below age 3 and are only slowly rising. *Istituto Nazionale di Statistica* (ISTAT), which is the national institute for statistics, estimates that around 25% of girls and boys below age 3 are enrolled in childcare. Slightly more than half of them (around 15% of all children below 3) are enrolled in public or publicly financed institutions.⁴⁵ Since 2007, there have been very minor increases in coverage rates. Attendance increases with age. Many parents simply prefer to enrol their children later in life, often

starting at 2 years old. The childcare coverage rate for children between 24 and 36 months was equal to 46% before the onset of the pandemic, whereas the same coverage rate for children between 12 and 24 months was equal to 26% (below age 1 was equal to 6%).

A lack of services, in particular, undermines the possibilities for vulnerable children to be enrolled: only 14% of the lowest income quintile send their children to nursery, compared to 35% for the highest quintile (Figure 4). If we measure social class by the education level of the parents, the picture is confirmed. Parents with a university degree tend to enrol children in childcare more often than average (49.5%). Again, also in this case, social class works through two mechanisms. Highly educated and high-income households are more often dual earners than less educated and low-income households (needing to reconcile/being able to pay the fees). Furthermore, medium to highly educated households frame childcare as a form of “social investment” in their children’s “human capital” more often than other type of households.

Figure 4. Households with children below age 3 accessing childcare, by income quintile.



Source: ISTAT (2021).

Thus, Italy is far from achieving the newly established EU care target for childcare coverage of 45% by 2030 and in reducing the gap in attendance between vulnerable children and the rest of the population.

Preschool participation, instead, for children aged 3 to 5, is higher than that for childcare. However, it is declining, from 96% coverage in 2010 to 89% in 2019.⁴⁶ The drop in coverage rate is mostly related to difficulties in attendance for children

with parents without Italian citizenship. Full-time is not always guaranteed and the cost of school meals (€735, on average, per year) discourages attendance, especially for children with a migratory background. Nevertheless, preschool education (*Scuola dell'Infanzia*), which is centrally managed by the Ministry of Education, together with the private sector and municipalities, relies on stable state funding, and this increases the distribution of services across the country and enrolment.

2.3.2. Main factors responsible for inequality in access to quality childcare

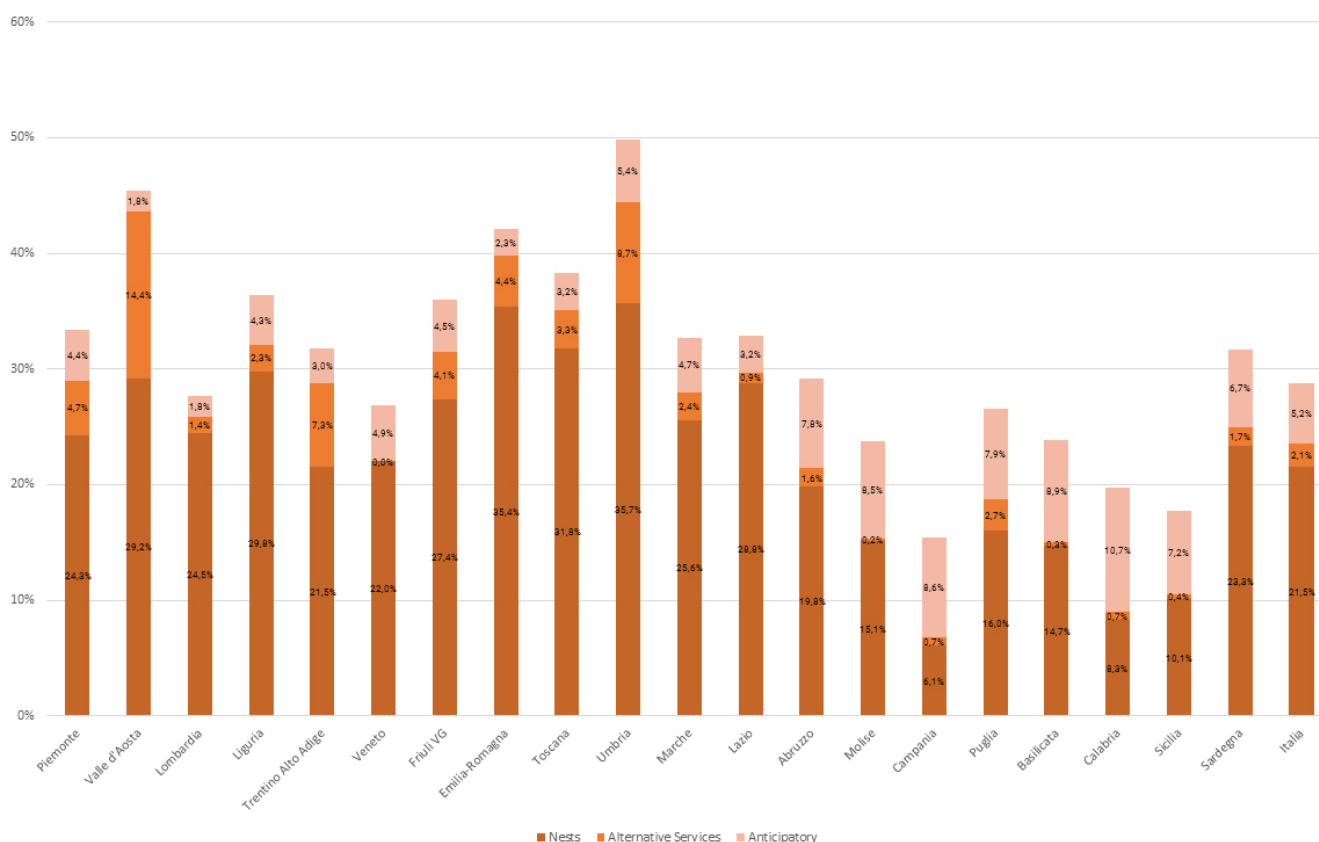
Territorial inequalities

Regions and municipalities are responsible for the management of childcare, for which the state provides a partial contribution. In 2018-2019, spending on childcare services for children below age 3 amounted to €1.5 billion, of which €1.2 billion was borne by municipalities (including the state and regional transfers) and €288 million (19.8% of total spending) by parents.⁴⁷ As a result, areas where less affluent households live are also those with less budgetary capacity to finance childcare services.

As a result, the childcare coverage rate varies significantly by region and within regions in Italy. The main line of differentiation is between, on one hand, central-northern Italy, which is economically

richer and, on the other hand, southern Italy. In the former, the overall coverage rate (public and private) is around 35% (slightly above the European target, at least before it was recently increased), whereas, in the latter, it is around 15% (Figure 5). At the regional level, the highest levels of coverage are recorded in Valle D'Aosta (43.9%), followed by several regions in the centre and the north, all above the European target. Since 2019, Lazio and Friuli-Venezia Giulia also exceed 33% (34.3% and 33.7%, respectively). On the opposite side, Campania and Calabria are still below 11%. In addition, inequalities are also present within regions and among cities.⁴⁸ Given that municipalities are the main funders of these services, and that southern Italy is, on average, economically poorer than central-northern Italy, local authorities can raise less per capita revenues than in the rest of the country and less afford to provide adequate childcare services.

Figure 5. Coverage of educational services for children aged 0-2 in Italy, by region.



Source: ISTAT (2021).

Criteria for access

It is important to bear in mind that childcare services for children below age 3 are still often framed as services for working parents. This means that the municipal access criteria often give priority to families with two working parents, which has significant implications for social inequalities. In southern regions, in particular, the female (especially mothers') participation rate in the labour market is very low and, therefore, a service cognitively framed for helping dual-earner households does not easily include single-earner/unemployed families.⁴⁹

Criteria for access also negatively affect children with a migratory background. Depending on the survey/source of information used, the results change. Some analyses show that there is a migration gap for childcare in nurseries, while other analyses do not find such a gap.⁵⁰ Partially, these mixed findings are the result of the fact that the majority of migrant families are dual-earner working-class households living in the centre-north of the country. Being working class should reduce their participation in childcare services, but, at the same time, their being often dual earners and living in the centre-north increase the opportunities to participate. However, there is a migratory gap in preschool attendance for the reasons explained above.

Lack of quality

Standards criteria have been established in Italy in relation to staff qualifications. Staff working in childcare are required to have a specific university degree (educational science with a focus on young children). However, since the costs of maintenance of services, including staff, must be guaranteed by municipalities, those located in marginalised areas, with fewer financial resources, eventually opt to increase the share of less-qualified staff (administrative staff that do not require a university degree) or reduce the number of staff, undermining the quality and inclusiveness of childcare services.

2.3.3. Does the CGNAP effectively address inequalities and propose solutions?

The Italian CGNAP has a specific and well-organised section on childcare and how to address social inequalities, also thanks to preparatory work done through the UNICEF “Deep Dive” study.⁵¹ In particular, the CGNAP includes a description of what institutions are responsible for childcare, with data about inequalities in access (disaggregated at the regional level and by parents' social class). More importantly, it also includes quite a detailed analysis, correctly identifying the factors undermining access to childcare for vulnerable children.

The CGNAP sets a target of 33% public coverage rate for childcare (reaching 50% with private provision, and therefore, achieving the EU care target). Furthermore, it also agreed with the setting of a specific coverage-rate goal at the regional level, to sustain southern regions, in particular, and reduce territorial disparities in provision. It also establishes a threshold of gratuity for children in poverty. Furthermore, to foster the implementation of the actions, it proposes to introduce a new type of service: “outreach services”, meant to reach each household with a child at different times during the child's life (from birth to 18 years old), supporting families in their decisions (including access to childcare).

These actions are conceived to tackle the main drivers of inequalities.

It also describes very clearly the multilevel governance model for implementing the actions, with an attempt to overcome a major problem in this field of policies: the low level of policy integration among different ministries at the national and regional levels (e.g. Ministry of Health, Ministry of Education, Ministry of Social Affairs, the Department of Family).

It also outlines resources to achieve expected targets. The recent (2021) next-generation recovery plan for Italy foresees a strong investment in ECEC that could have very positive effects. 2.4% of the total resources of the next-generation recovery plan,

equal to €4.6 billion, have been allocated to ECEC, especially nurseries. Thanks to this investment, 228,000 new places will be created. If such an investment goal is achieved, the number of places in nurseries will double, bringing the public ECEC coverage rate for children below age 3 to around 33%. The RRF also established criteria for the allocation of resources, privileging marginalised regions and areas where vulnerable children live.

The CGNAP discusses quality (in terms of curriculum and pedagogical practices), making reference to the 2022 innovation in this direction by the Ministry of Education, which has introduced pedagogical guidelines.

There is less in the CGNAP on solutions to tackle other drivers of inequalities. First, the fact that the RRF only covers capital costs, and not management costs, might discourage municipalities in marginalised areas from applying for funding.⁵² In December 2021, a bill financing the state budget for childcare for 2022 introduced further resources to help municipalities cover childcare running costs, especially given the increase in coverage rates that has been envisaged in the next-generation recovery plan. However, these resources are not enough to cover all costs of new places and, more importantly, were allocated after the RRF tenders were finalised. A first analysis conducted by the research services of the Italian parliament confirmed that a

significant number (around 1,500) of municipalities in disadvantaged areas, with poor or no childcare provision, did not actually apply for RRF funds. In addition, the plan raises the question of adequately expanding the workforce to cover the needs of new childcare services, but no concrete solutions are provided.

Finally, a set of indicators are proposed in the CGNAP to monitor its implementation. The indicators are quite detailed, although the plan recognises that further data (and data collection) would be necessary to improve the monitoring capacity.

2.3.4. Concluding remarks

The next-generation RRF potentially represents a major breakthrough for childcare services in Italy, which has among the lowest coverage in the EU, to sensitively reduce inequalities. However, there are three types of uncertainties that might jeopardise its implementation, which are not adequately considered in the CGNAP: financial and “technical” support for municipalities; workforce shortages; and political difficulties.

The first year of implementation of the next-generation recovery plan showed that there were some difficulties (especially in geographical areas where there is a limited tradition of childcare services) in actually convincing local authorities to

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There are three types of uncertainties that might jeopardise its implementation, which are not adequately considered in the CGNAP: financial and “technical” support for municipalities; workforce shortages; and political difficulties.

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use national resources to strengthen their supply. Partially, this is due to the fear by some local administrators that future resources from the central state will not be enough to cover the running costs of new childcare facilities once the Stability Pact is unfrozen.⁵³ Furthermore, some municipalities are in need of (external) professional/technical support to develop good-quality ECEC services and, so far, central government has been only partially able to provide such support.

In addition, doubling the childcare public coverage rate will require at least around 40,000 new professional educators and teachers,⁵⁴ which are currently not available. The fact that planning such an increase has not yet been a government priority might jeopardise either the capacity of municipalities to use new ECEC services once built or the quality of services, with the decision by municipalities to employ workers with lower qualifications.

Lastly, the whole recovery plan and CGNAP were drafted by a different government majority than the one now in place since October 2022. It will be important to see if the government will maintain the same priorities as the two previous ones had on childcare.



2.4 SPAIN

2.4. Spain

2.4.1. Status of childcare in Spain

Early childhood education and care in Spain are split between childcare services for children aged from 0 to 3 (first cycle, children enter the year of their second birthday) and preschool education for those aged 3 to 6 (second cycle, children enter the year of their third birthday). The government is legally obliged to provide free-of-charge places for all children only in preschool, and therefore, provision has become virtually universal. Instead, for childcare, public provision is not guaranteed or free of charge, and coverage is lower.

In 2020,⁵⁵ there were 469,758 childcare places, representing 41.1% of the total population aged 0-3. Among them, the private provision is prevalent. Table 1 indicates that public centres hold 244,319 places, covering 21.4% of the population aged 0-3

and sharing 51.5% of the total with private centres. In addition, since the regions are responsible for providing childcare services, high disparities are observed between and within regions. Private provision and territorial disparities undermine access, particularly to vulnerable children in poorer households or with unemployed parents or those in precarious working conditions. According to last available data from 2016, 26.3% children from households belonging to the poorest quintile of income access childcare, while 62.5% of those in households in the highest income quintile access childcare.

As a result, although Spain is on track to reach, by 2030, the overall EU care target for coverage of childcare, it is far from achieving other relevant targets, in particular, that of reducing the gap in attendance between poorer children and the rest of the population, and that of ensuring quality of services, in particular, of workforce conditions.



Although Spain is on track to reach, by 2030, the overall EU care target for coverage of childcare, it is far from achieving other relevant targets: reducing the gap in attendance and ensuring quality of services.



2.4.2. Main factors responsible for inequality in access to quality childcare

Territorial inequalities

Childcare service provision is decentralised to the regions (autonomous communities) and municipalities, which share the cost of provision with the central state but define their own service cost and access priorities. Since in Spain the Comunidades

Autonomas (CCAA) have large autonomy, and are responsible for delivery childcare services, there are significant territorial differences in coverage. Table 1 shows the significant gap between the Basque Country's maximum of 56% and the Region of Murcia's minimum of 21%. Involvement of the public sector in childcare provision also varies significantly. In the Principality of Asturias and Extremadura, public places represent more than 85%, and in the Valencian Community and Canary Islands, it is less than 40%.⁵⁶

Table 1. Places distribution and key resilience plan statistics.

Region	Total places	Net schooling rate	Public places	Public coverage
Andalusia	105,223	48%	39,816	18.2%
Aragon	11,296	37%	6,975	22.5%
Principality of Asturias	4,264	25%	3,775	22.0%
Balearic Islands	8,713	28%	5,572	17.7%
Canary Islands	10,478	23%	4,756	10.3%
Cantabria	3,704	32%	2,966	25.4%
Castile and Leon	11,013	24%	7,645	16.7%
Castilla La Mancha	18,014	36%	11,781	23.7%
Catalonia	78,279	40%	49,536	25.2%
Valencian Community	45,566	38%	20,200	16.9%
Extremadura	7,731	32%	6,922	28.7%
Galicia	25,679	50%	15,019	29.0%
Madrid Community	92,782	53%	43,030	24.4%
Region of Murcia	9,320	21%	4,549	10.2%
Community of Navarre	5,215	31%	4,326	25.5%
Basque Country	27,608	56%	14,933	30.3%
La Rioja	3,370	45%	1,669	22.2%
Ceuta	499	18%	302	10.9%
Melilla	1,004	27%	547	14.5%
Spain	469,758	41%	244,319	21.4%

Source: Ministerio de Educación y Formación (2022)

Criteria for access

Access to publicly provided childcare depends on criteria set at regional and/or municipal levels, which weigh up an array of socio-economic individual and household circumstances, such as family income, both parents' employment, single-parenthood situation, single working mother, minimum income perception and disability. Most regions prioritise parental or single-parenthood employment situations over family income (see Table 2). The objective is to

allow mothers' early incorporation in the job market. Progressively, regions have been introducing specific criteria to help especially vulnerable groups, such as low income, disabled, single-parent households or victims of gender violence.⁵⁷ However, parental employment is still a decisive criterion for access, undermining vulnerable children's enrolment in childcare.

The design of application procedures also affects enrolment. For example, parents with low

educational skills find paperwork so burdensome to comply with that they fail to complete it properly or give up during the process.⁵⁸ They may also not be aware of the service's characteristics and benefits for their children. Furthermore, parents' job instability may reduce motivation to enrol their children in childcare. Atypical hours, location changes and job discontinuity hinder parents' options to balance their job with their children's school attendance.

Affordability

Concerning the cost of the services, most *Comunidades Autonomas* (Spanish regions) have introduced a special price for vulnerable families, except in Catalonia (some Catalan municipalities,

such as Barcelona, have introduced it). The cost reduction is total or very significantly below an income threshold or is applied to those families who receive a regional minimum-income subsidy. In addition, Madrid and Pamplona have already introduced a gratuity for the first cycle of infant education (0-3), and Andalusia will go the same way in 2023. Others, such as Barcelona and Valencia, established a gratuity for preschooling for 2 year olds, intending to extend free access to the entire cycle in the future. However, the service cost is still a critical barrier to access for most families. For example, access criteria in the metropolitan area of Barcelona show that the cost of sending children to childcare varies considerably, depending on whether the municipality has some kind of social pricing in place.⁵⁹

Table 2.⁶⁰ Access score to childcare public centres, by autonomous community

	Both parents' employment	Single working mother	Single-parenthood situation	Family income	Minimum-income perception	Disability or social exclusion
Community of Navarre	High	High	High	Medium	Low	Medium
Basque Country	Medium	Medium	Low	Medium	Low	Low
Valencian Community	Low	Low	Medium	Low	High	Medium
Andalusia	Medium	Medium	Medium	Low	Medium	Medium
Galicia	High	High	Low	Medium	Low	Low
Madrid Community	High	High	Low	High	Low	Medium
Catalonia	Low	Low	Low	Low	Medium	Medium

Note: High, above 25% of the total score; medium, between 10 and 15%; low, below 10%.

Source: Author's elaboration on Navarro Varas, L. (2022) «La importancia del coste de los servicios de educación y atención de la primera infancia en la ocupación laboral femenina de la metrópolis de Barcelona». *Papers*, 3(107) : e3076. DOI: 10.5565/rev/papers.3076

Lack of quality

Quality aspects also matter to reduce inequalities in access. Quality is defined at the regional level. We find important variation here too. The child-educator ratio for those below age 1 is 7-8; for children aged 1 to 2, it is 13-14; for those aged 2 to 3, it is 18-20 (except Aragon, which is 6-7, 10-12 and 16-18, respectively).⁶¹ Regarding teachers' educational level, the minimum requirement is short-cycle tertiary education in all the communities.

As seen in Table 3, there is a critical education gap between pre-primary and primary levels and childcare teachers. Childcare employees also have a more precarious status (Table 5) and low incomes (Table 4). Finally, the curricula are still defined at the regional level but with some guidelines set up by central law.⁶² In this regard, the most recent National Law of Education (2020) highlights the importance of a curriculum aimed at developing competencies in three areas: growth in harmony; discovery and exploration of the environment; and communication and representation of reality.

Table 3. Composition of the workforce (%) with teaching responsibility in the ECEC industry and share of teachers holding a university degree, by segment and country.

	ITALY			SPAIN		
	Childcare	Pre-primary	Primary	Childcare	Pre-primary	Primary
Primary and ECEC teachers	69.5	91.9	99.2	37.7	87.3	86.4
Other teachers and teaching professionals	2.3	3.8	0.3	7.4	2.5	6.1
Childcare workers and teachers' aides	12.8	2.3	0.2	40.8	9.5	5.9
Social professionals	15.4	2.1	0.3	14.1	0.7	1.5
Total	100	100	100	100	100	100

Source: León, M., C. Ranci, S. Sabatinelli et al. (2019) "Tensions between quantity and quality in social investment agendas: working conditions of ECEC teaching staff in Italy and Spain". *Journal of European Social Policy*, 4(29): 564-576. DOI: 10.1177/0958928718808401

Table 4. Average working hours, average monthly (net, Italy; gross, Spain) and hourly wages, length of employment by segment and relative gaps (only full-time teachers, Italy).

	Childcare	Pre-primary	Primary	Childcare/ pre-primary gap	Pre- primary/ primary gap
Italy					
Percentage of teachers with a monthly salary lower than €1,000	31.4	9	5.7	-	-
Average net monthly wage (€)	1,129	1,312	1,407	-13.9	-6.7
Average weekly working hours	31	27	25	14.8	8
Average net hourly wage (€)	9.11	12.1	14.7	-25	-17.7
Spain					
Average gross monthly wage (€)	1,661	2,124	2,614	-21.8	-18.7

Source: León, M., C. Ranci, S. Sabatinelli et al. (2019) "Tensions between quantity and quality in social investment agendas: working conditions of ECEC teaching staff in Italy and Spain". *Journal of European Social Policy*, 4(29): 564-576. DOI: 10.1177/0958928718808401

Table 5. Share of teachers with non-standard or part-time contracts and average number of years of work with the same employer, by segment and country.

	Italy			Spain		
	Childcare	Pre- primary	Primary	Childcare	Pre- primary	Primary
Non-standard	29.3	14.8	13.3	32.8	25.8	19.6
Part time	30.3	12.1	8.4	28.3	12.1	7.3
Average number of years worked with the same employer	12.3	16	19.1	7.6	10.1	12.9

Source: León, M., C. Ranci, S. Sabatinelli et al. (2019) "Tensions between quantity and quality in social investment agendas: working conditions of ECEC teaching staff in Italy and Spain". *Journal of European Social Policy*, 4(29): 564-576. DOI: 10.1177/0958928718808401

2.4.3. Does the CGNAP effectively address inequalities in childcare and propose solutions?

The Spanish CGNAP approved in 2022 sets up the objective of guaranteeing universal access to the first cycle of early childhood education (0-3). Besides the Child Guarantee plan, the recovery, transformation and resilience plan (2021)⁶³ works on increasing ECEC places and improving curricula and professional training.

The plan includes information about the government level responsible for childcare measures implementation: the Ministry of Education; autonomous communities; or municipalities. In addition, it outlines data about inequalities in access and main drivers of the lack of enrolment for most vulnerable children. Accordingly, the CGNAP identifies four types of obstacles in policy implementation: (1) economic barriers (access costs); (2) institutional barriers (eligibility criteria, long and complex bureaucratic procedures, limited information, etc.); (3) structural or spatial barriers (spaces that do not take into account the special needs of children, and distance to services and transport difficulties); and (4) heterogeneity of services at the regional and local levels (different ways of targeting vulnerable children, access, resources and service quality).

To address the objective of universal access, the plan proposes several measures:

- an increase in the number of places in public centres;
- in concordance with current policies at the regional level, free access to the first cycle for all children who live in households below the poverty threshold;
- measures to make vulnerable families aware of the benefits of ECEC and a special accompaniment in the application processes to address access problems regarding information and procedures, especially for low-income, low-education households;
- the revision of access criteria aims to prioritise low-income families and other vulnerable groups' enrolment, which is the actual trend in most autonomous communities;
- reforms attempt to introduce greater flexibility in the provision of the service (for instance, in daily schedules) to better cater for work-life balance needs, especially for vulnerable and single-parents families – another essential aspect of opportunity cost and the family's decision to send children to childcare; and
- new state regulation of minimum requirements for the first cycle of infant education.

More importantly, the plan proposes concrete targets and indicators. Table 6 describes the CGNAP's intermediate and final goals for 2025 and 2030, with specific reference to inequality reduction.

Table 6. CGNAP goals to guarantee universal access to the first cycle of early childhood education.

Intermediate goal (2025)	Final goal (2030)
1-year-old enrolment rate: 50%	1-year-old enrolment rate: 55%
2-year-old enrolment rate: 75%	2-year-old enrolment rate: 85%
	First quartile enrolment rate (0-3 years old): 50%

Source: Spanish CGNAP.

Moreover, the CGNAP outlines the investment necessary to reach the targets: €983 million. Central, regional and municipal governments will invest €287 million, and European funds (FSE+) will invest €696 million. In addition, it is important to consider that Spain will invest part of the RRF in expanding and ameliorating the childcare system. In summary, the RRF proposes €670.99 million for the creation of 65,382 new places (infrastructure and equipment) and the running expenditure of 43,588 places (staff and others). The investment calendar is €200.96 million in 2011, €333.82 million in 2022 and €136.21 million in 2023, prioritising children between 1 and 2 years old. The criteria for distribution⁶⁴ among communities rely on the total population aged 0-2 multiplied by a weighting factor. This factor is composed of (1) the average education level of the population aged 18-65 (40%); (2) net rates of schooling in childcare (40%); and (3) population dispersion (20%). Then, the central government transfers the budget to the autonomous communities, which maintain and create new places. Autonomous communities also have to demonstrate the results of the investment in new places annually. In addition, the resilience plan will invest €360 million in the orientation and development of centres with special educational complexity, such as vulnerable or rural areas (objective of contracts with 3000 centres), and will invest €124,710 million in the creation of “personal and family support and guidance units” for educationally vulnerable students (objective of 1148 units). Also, following the National Education Law (2020), an additional €2.4 million will be allocated to the design and application of a new curricular model by key competencies, prioritising fundamental learning and regulation of an inclusive academic organisation.

In spite of the well-structured plan, a number of criticalities can be observed, mainly related to budget shortages or the modalities of allocation. The RRF, which is the main source of funding, will only increase publicly funded childcare coverage from 21.4% to 27%, with no certainty that the most marginalised areas will be priorities, since criteria for allocation do not specifically focus on households’ socio-economic indicators.⁶⁵ In addition, although the RRF allocates funds for the running expenditure

of new childcare places, this will cover 43,588 (66%) of the total number of places and will finish in 2023. After this date, the autonomous communities will be responsible for the entire running costs of the new places. The risk is that municipalities in marginalised areas, with lower budgetary means, will no longer be able to afford the provision of services, or, alternatively, they will lower the quality.

All these features might undermine the achievement of the CGNAP’s target of reducing inequalities in access. Finally, it is important to underline that the plan does not include appropriate monitoring and evaluation mechanisms, making it difficult to track the achievement of targets and spending.

2.4.4. Concluding remarks

Spain has a relatively high enrolment level in childcare, but there is a lack of access to public – and therefore, affordable – places, and vulnerable children are negatively affected. The CGNAP is certainly a quality analytical and programmatic document that includes actions to tackle deeply entrenched inequality and increase access to achieve a target of 50% of vulnerable children being enrolled by 2030. The plan also proposes several measures to support vulnerable families with the application process and during course attendance. However, a number of criticalities have emerged. The plan does not include concrete information about budgetary provision, governance and a specific schedule for implementation, along with an appropriate monitoring and evaluation system. As an example, the resilience plan seeks to address part of the problem of creating 65,382 new places in two years, but these places are insufficient to reach the expected target of the CGNAP, and criteria for allocation do not actually ensure that funds will be mainly directed towards marginalised areas where vulnerable children live. Finally, quality issues do not occupy any central consideration, in particular, reform curricula and to improve staff qualifications, training and working conditions. These criticalities, in the end, might in fact jeopardise the success of a well-structured and ambitious plan.

3. CONCLUSIONS AND RECOMMENDATIONS

3. CONCLUSIONS AND RECOMMENDATIONS

Table 7. Summary of the analysis of inequalities in access to childcare in four countries (Belgium, Finland, Italy and Spain), and efficacy of CGNAPs in addressing inequalities.

	Belgium (Flanders)	Finland	Italy	Spain
Drivers of inequalities in access to quality childcare				
Territorial inequalities	Between and within regions. Funds not prioritise to marginalised areas.	Between and within regions. Funds not prioritise to marginalised areas.	Between and within regions. Funds not prioritise to marginalised areas.	Between and within regions. Funds not prioritise to marginalised areas.
Affordability	Progressivity in Fees but amounts too high and no gratuity for poorest children		Progressivity in Fees but amounts too high and no gratuity for poorest children	Progressivity in Fees but amounts too high and no gratuity for poorest children
Criteria for access	Favouring employed and middle-high earners, not unemployed and poorest		Favouring employed and middle-high earners, not unemployed and poorest	Favouring employed and middle-high earners, not unemployed and poorest
Lack of quality	Workforce low qualifications, and salaries, shortage	Workforce low salaries, shortage	Workforce low salaries, shortage	Workforce low qualifications, and salaries, shortage
Other		Home Care Allowance alternative to enrollment in childcare		
Child Guarantee Action Plan objectives				
Analysis of main drivers of inequalities in access to quality childcare	Only a mention of existing studies analyzing inequalities in access in Brussels Capital is present		Affordability, criteria for access, territorial inequalities	Affordability, criteria for access, territorial inequalities
Measurable objective and targets to increase places (publicly funded)			Increase coverage to 50% with 33% publicly funded services	1-year-old enrollment rate: 55%. 2 years old enrollment rate: 85%.
Measurable objective and targets for gratuity for poorest children			Gratuity for children below poverty line	Gratuity for children below poverty line
Measurable objective and targets to reduce gap in access for vulnerable children			The overall objective is to reduce inequalities in access for vulnerable children, but no concrete target is established	First quartile enrollment rate (0-3 years old): 50%
Proposals to increase accessibility and quality of childcare (staff qualifications, working conditions, inclusive practices)			Inclusive practices for reaching out vulnerable children; but no actions on labour shortage, salaries, and revision criteria to access.	Curriculum reform, family support, minimum requirements quality, and revision criteria to access; but no actions on labour shortage, qualifications, salaries
Indication of funds allocated to achieve above objectives and targets (in particular RFF)				
Child Guarantee Action Plan implementation				
Coherence between funds allocated and expected objectives and targets			The proposed targets of coverage are coherent with allocation of resources through RFF (which also prioritise vulnerable territories). But lack of sufficient regular budget for maintenance costs of services might undermine achievements	The proposed targets of coverage are somewhat coherent with allocation of resources through RFF and regular budget for maintenance. However, it might result limited to achieve targets, and no priorities are given to vulnerable territories
Monitoring and evaluation of objectives and targets			The plan includes monitoring and evaluation mechanisms. However, indicators are limited, with regards to analysing access for vulnerable children	



Inequality driver



Present



Partially present



Absent

The four countries selected for the study – Belgium (Flanders), Finland, Italy and Spain – although they differ in the coverage rates of childcare – with Belgium reaching above 50%, Spain around 40%, Finland 35% and Italy 25% – they have a main commonality: inequalities in access are substantial and particularly penalise children living in poor households (very often from migrant backgrounds) with unemployed parents, in contrast to objectives and targets of the Child Guarantee and the EU Care Strategy.

Inequalities across the countries studied are largely determined by the lack of publicly available services in marginalised areas. Territorial inequalities are mainly the result of mechanisms of the allocation of funds between central (or regional) government and the local authorities (municipalities), which do not prioritise, in these countries, territories where most of the vulnerable children live. These areas need higher funding to build new childcare places and to be able to maintain services, ensuring quality and gratuity for the poorest children.

The lack of prioritisation in relation to children most in need is also reflected in the criteria for accessing services, favouring children with employed parents, and therefore, middle-high earners, and the lack of gratuity for children living in families below the poverty threshold. In Finland, this is not the case,

but the presence of a homecare allowance, as an alternative to enrolment in childcare services, discourages participation, in particular, of children with low-income parents.

In addition, all countries selected for the study have issues related to the quality of services, with shortages of qualified staff, due to a high workload for very low financial compensation (in general, lower than preschool educators).

The CGNAPs might be effective tools to propose solutions to tackle drivers of inequalities in access and promote the expansion of quality childcare as a legal entitlement for all children, especially the most vulnerable. However, to fulfil this scope, the CGNAP must include specific and measurable objectives, with concrete actions to achieve them, along with an adequate budget provision and monitoring and evaluation system.

The analysis of the CGNAPs in the four countries selected revealed that only two of them, Italy and Spain, although not entirely, responded to these criteria. In both cases, a review correctly identifying the main factors determining unequal access to childcare services is present, along with specific objectives and targets (to reach 50% and above coverage, with particular attention to increasing public coverage; affordability and, therefore, enrolment of vulnerable

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The CGNAPs might be effective tools to propose solutions to tackle drivers of inequalities in access and promote the expansion of quality childcare as a legal entitlement for all children, especially the most vulnerable. However, to fulfil this scope, the CGNAP must include specific and measurable objectives, with concrete actions to achieve them, along with an adequate budget provision and monitoring and evaluation system.

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children), to overcome inequality drivers. A budget is allocated for this purpose, mainly referring to the RRF as the main source of public investment. The fact that part of the RRF has been allocated to expand childcare (and therefore, this spending must be adequately monitored through measurable indicators) certainly has helped the respective governments to produce more adequate and precise CGNAPs. Some criticalities nevertheless emerged. In particular, there is little attention in the plan with respect to adequacy of funding (in particular, regular funding from the government to municipalities) and modalities of delivery (that might not necessarily prioritise marginalised territories).⁶⁶ In the case of Spain, there is also a lack of coherence between the budget allocated and expected results and the absence of an effective system of monitoring of implementation. Meanwhile, in the Italian CGNAP, indicators and data to track progress are presented but limited. In both plans, finally, almost no consideration is given to the quality of services, in particular, the issue of staff shortages and the need to ameliorate their working conditions.

Even though these criticalities might undermine the implementation of activities and appropriate monitoring of results, it is nevertheless positive that Italy and Spain, which are countries with very low coverage of public childcare services and high inequalities, have proposed accurate and ambitious plans.

The same cannot be said for Belgium (Flanders and Brussels' Dutch-speaking community) and Finland. The former, even if already reaching the EU care target of 50% coverage of childcare, has not yet achieved equity either in access or in quality. Finland, instead, acknowledges lower coverage rates, compared to other Nordic countries, and is far from the targets established at the European level. In both cases, the CGNAP is more a "reference" document, referring to existing programmes or strategies, with no concrete analyses of inequality drivers and, more importantly, no indication of objectives and measurable, time-bounded targets or budget allocated, along with monitoring and evaluation instruments. It is hard to see how these plans can represent useful tools

to promote the expansion of childcare in the two member states.

Findings of the study suggest a number of actions that the EU can undertake to improve the process and the quality and effectiveness of the CGNAPs:

(1) Data and indicators are key to analyse the status of childcare, develop accurate plans, appropriately monitor results, and adjust and adapt policy actions. Yet, member states usually lack granular data enabling them to investigate inequalities in access to services at the micro-territorial level and their main drivers. In some cases, actually, detailed data at the lower administrative level (e.g. municipal) about access and the character of children's households, criteria to access and quality of services do exist, especially for publicly funded services, but they are not treated and aggregated by central administrations. This is, in part, due to the lack of financial resources by member states to perform such data collection, but also by the fact that existing European common indicators to monitor the EU Pillars of Social Rights and the Care Strategy, within the EU Semester and the Social Scoreboard, are limited (to participation in childcare at the national level only, along with weekly hours of services and possible disaggregation between children at risk of poverty or not), and therefore, member states have no leverage to collect more detailed information. It is of paramount importance that the EU reviews and upgrades existing common indicators to monitor childcare, by expanding scopes and capacities, while also providing adequate funding to member states to perform data collection.

(2) Technical assistance. Another factor undermining appropriate planning is the lack of capacities of member states' governments and local authorities to assess and design effective childcare policies. Childcare policies have been largely neglected compared to other welfare policies or preschool and primary education. Knowledge and expertise in this field is scarce. Yet, there are, across Europe, experiences of childcare policies, mainly carried out by progressive cities and regions (e.g. Berlin in Germany, Ghent in Belgium, Reggio Emilia in Italy), which are recognised as best practices at the international level. These models can share knowledge and guide and support other territories willing to plan and implement positive childcare policies to reduce inequalities. A European childcare knowledge hub should be created, in this respect, to promote cooperation among European policymakers and practitioners.

(3) Promoting common European standards for quality workforce. The early years are sensitive times when key competencies to live and grow up as active citizens in a globalised world and economy start to form (and so do inequalities), and therefore, the personnel involved in childcare programmes have a paramount societal role. However, the shortage of qualified staff is common across member states and represents one of the major determinants of inequalities in both access and quality of provision of childcare, with negative effects on child development. Staff shortages are mainly due to the absence of "recognition" of the value of this profession, as testified by the

lack of qualifications required to enter the service, limited investments in training, heavy workload and salary levels that are substantially lower than those of preschool or primary school teachers. The EU Care Strategy is an important step forward in this respect, since it recognises the importance of the quality of the workforce. However, it fails to promote decent working conditions and reduce salary gaps. This is also reflected in the CGNAPs, where the issue of the quality of workforce is generally absent. Therefore, a common European initiative, setting the standards for the recognition of the childcare profession, qualifications, decent working conditions and adequate financial compensations, is needed.

(4) Childcare as an investment from the Stability Pact. Territorial inequalities in the coverage of childcare, which are the key factor undermining access for vulnerable children, are usually the result of an unequal distribution of financial resources, penalising areas where low-income families live. The RRF, in some cases, like in Italy, aims to rebalance the allocation of funds, by increasing available resources to expand childcare services in municipalities in marginalised areas. However, the RRF only covers capital costs. Running costs must be ensured by either government or local authorities. The Stability Pact has been a brake, in recent years, on the growth of investments in social services, particularly by local administrations. As the Stability Pact will soon be unfrozen, after the pause during the COVID-19 pandemic, the risk is that marginalised areas will not be able to fully exploit the possibility of the RRF and be unwilling to build infrastructure to create

childcare places and settings that will be unable to run, or they will opt to reduce quality. In both cases, inequalities risk being exacerbated rather than reduced. It is time to consider childcare as an investment to promote present and future economic and social development of the EU, and not mere spending, and therefore a strategy social infrastructure for, subject to the strict rules of the Stability Pact.

(5) Towards a Child Union. Most of CGNAPs submitted to the European Commission at present have shown little commitment towards ambitious goals to expand childcare and reduce inequalities. Campaigns and initiatives must be promoted by European progressive forces, targeting policymakers in central and local governments, to raise awareness about the need for a Child Union. A Union that guarantees all children their legal entitlements to quality childcare, as a means to promote their early learning and emancipation and break the intergenerational cycle of inequalities.

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The EU recognises the role of childcare as an equaliser and essential component of the Pillar of Social Rights. As part of the initiatives that have been launched to promote equal access to childcare, a mechanism of monitoring within the EU Semester has been put in place. Member states are therefore required to submit Child Guarantee National Action Plans (CGNAPs), identifying key actions to reach this objective, with means, financing and tools to assess progress.

These plans represent a key instrument, on one hand, for member states to push their childcare agenda forward, and, on the other hand, for European institutions to monitor the progress of member states in reducing inequalities in access to childcare. The objective of this study is to assess the efficacy of CGNAPs in addressing inequalities in access to childcare, taking four member states as case studies: Belgium; Finland; Italy; and Spain.

The findings of the study suggest that, at present, CGNAPs might provide limited support for the promotion of equitable childcare policies across the EU, apart from a few member states that have invested in childcare provision through the Recovery and Resilience Facility, have action plans, and monitor results and spending.

Progressives must continue to fight, in member states and EU institutions, for a Child Union, a union that recognises and invests in childcare as a right and the foundation of education and emancipation of European citizens in the 21st century. This is a paramount welfare policy to promote present and future fairness, prosperity and the resilience of European societies and economies.

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