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Accompanying the document

Proposal for a Council Recommendation

establishing a European Child Guarantee

{COM(2021) 137 final}

INTRODUCTION

"It is our collective shame that almost 25 million children under the age of 18 are at risk of poverty or social exclusion. Children living in poverty are more likely to become adults living in poverty. We need to break this dangerous cycle. We must do better. To support every child in need, I will create the European Child Guarantee" – President-elect Ursula von der Leyen in her political guidelines for the next European Commission 2019–2024.

The Commission proposal for a Council recommendation establishing a European Child Guarantee stems from the European Pillar of Social Rights and supports a number of its principles[1]. It is an important and concrete deliverable of the European Pillar of Social Rights Action Plan[2] and will contribute to the ambitious target set herein to lift at least 5 million children in the European Union out of poverty or social exclusion. The initiative follows from the 2013 Commission Recommendation 'Investing in Children: breaking the cycle of disadvantage'[3] and complements the EU Strategy on the Rights of the Child 2021 - 2024, adopted alongside this proposal[4]. Altogether, these initiatives form a strong package to support children and boost investment in future generations.

Social exclusion is a complex and multidimensional phenomenon. Its key drivers are insufficient resources and poverty, but also lack of equal access to goods and services due to various forms of disadvantage, preventing full participation in the society[5].

Breaking the intergenerational cycles of disadvantage starts with investment to reduce the gap in access to key services between children in need and their better-off peers. The objective of the proposal is to prevent and combat social exclusion of children by guaranteeing access of children in need to early childhood education and care, education (including school-based activities), healthcare, nutrition, and housing. It delivers on the commitment to enhance equal opportunities and leave no child behind. While most children in the EU already have access to these services, inclusive and truly universal access is vital for ensuring equal opportunities for all children, and in particular those who experience social exclusion either due to poverty or other forms of disadvantage.

The European Child Guarantee targets 'children in need', which refers primarily to children at risk of poverty or social exclusion. Alongside poverty, other forms of disadvantage create barriers for inclusion and participation in the society. Thus, the proposal caters for the specific needs of: (i) homeless children or children experiencing severe housing deprivation; (ii) children with disabilities; (iii) children with a migrant background; (iv) children with a minority racial or ethnic background (particularly Roma); (v) children in alternative (especially institutional) care; and (vi) children in precarious family situations.

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[1] In particular principle 1 'Education, training and lifelong learning', principle 3 'Equal opportunities', principle 11 'Childcare and support to children', principle 14 'Minimum income', principle 16 'Healthcare', principle 17 'Inclusion of people with disabilities' and principle 19 'Housing and assistance for the homeless'.

[2] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions of 4 March 2021, 'The European Pillar of Social Rights Action Plan', COM(2021) 102 final.

[3] Commission Recommendation of 20 February 2013, 'Investing in children: breaking the cycle of disadvantage', 2013/112/EU.

[4] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions 'EU strategy on the rights of the child', COM(2021)142.

[5] See Communication from the Commission 'Towards a Europe of Solidarity: Intensifying the Fight Against Social exclusion, Fostering Integration', COM(92)531 and 1989 Council Resolution on 'Combatting social exclusion. 'The multi-dimensional analysis of social exclusion'.

The focus on children in need is meant to prevent them from remaining at risk of poverty or social exclusion as adults.

Although the risk of poverty or social exclusion for children in the EU decreased between 2014 and 2019, nearly one in four children are still exposed. The impact of COVID-19 and its economic consequences are likely to be harsher on children from disadvantaged backgrounds or living in low-income households.

Investing in children is vital for a sustainable, efficient and competitive knowledge economy and a fair society. Future growth prospects and the sustainability of social protection systems depend on today's children. Public expenditure incurred to correct the consequences of childhood poverty throughout a person's life is significantly higher than necessary investments to improve their life chances by supporting them during childhood. Targeting children from disadvantaged socio-economic backgrounds holds the promise of breaking the intergenerational cycle of disadvantage by levelling the playing field in child development.

The proposal for a European Child Guarantee is particularly relevant in the context of the socio-economic consequences of the COVID-19 pandemic. This pandemic risks worsening inequalities, and puts additional pressure on the availability of services. For children already living in poverty, school closures often meant that, on top of missing education, they no longer had access to school meals. Home-schooling also highlighted the educational divide and the digital divide, including in rural and remote regions. Children with disabilities faced additional risks of exclusion or discrimination due to a lack of accessible content, platforms and specialised support. This proposal will help mitigate the negative effects of the pandemic: it will work towards closing the gaps in access to quality services, foster social inclusion, and promote equality of opportunity.

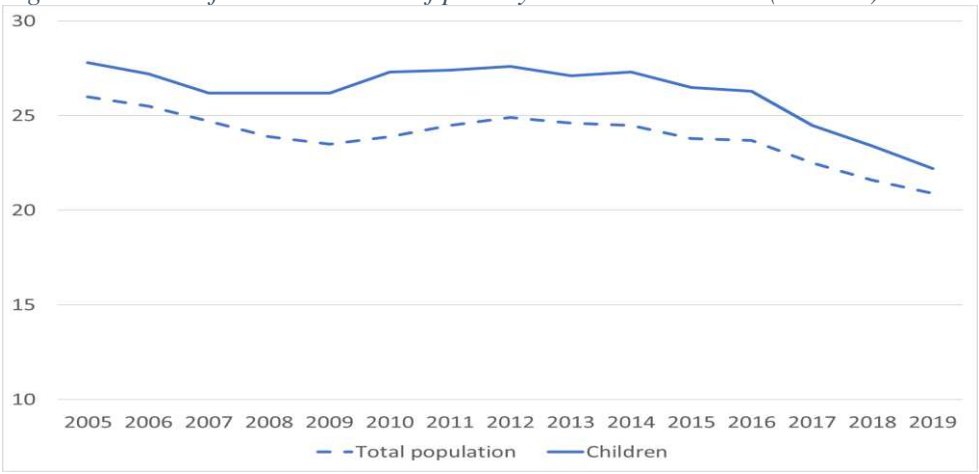
This staff working document accompanies the Commission proposal for a Council recommendation establishing a European Child Guarantee. It: (i) presents the challenges addressed by the initiative; (ii) proposes the responses to these challenges; and (iii) discusses the likely impact of these responses. Stakeholders were consulted over the period July to November 2020 on the preparation of the proposal. The main results from this consultation – and the positions expressed in it – have been taken into account throughout the process. A summary of the stakeholder consultations is included in Annex C to this document.

1. THE SOCIAL CHALLENGES UNDERPINNING THE PROPOSAL

The EU has some of the highest levels of social inclusion and cohesion in the world[6]. However, it cannot be complacent about its child poverty problem. Children in the EU remain structurally more exposed to poverty – which is a key driver of social exclusion – than the rest of the population (Figure 1).

[6] For instance, overall income inequality in 2018, as measured by the S80/S20 ratio, was 8.4 for the US but only 5.05 for the EU-27. Other leading economies either lacked recent and reliable data (the China estimate for 2011 was 28.3), or were above the EU level (UK 5.6, Japan 6.2). Despite a slightly lower overall Human Development Index (0.920 for the US vs 0.894 for the EU-27 in 2019), an average European lives 2.4 years longer than an average American (life expectancies being respectively 80.9 and 78.5 years in 2018).

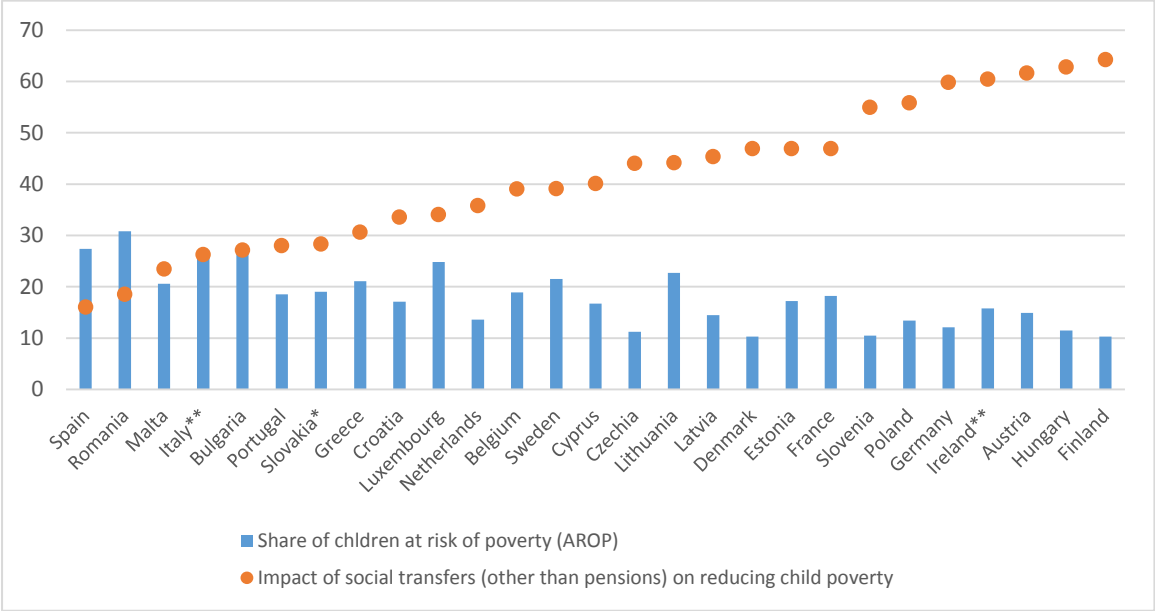
Figure 1: Share of children at risk of poverty or social exclusion (AROPE) in the EU, 2005-2019



Note: Being at risk of poverty or social exclusion (AROPE) denotes living in a household: (a) that has disposable income (i.e. income after taxes and social transfers) that adjusted for household size is below 60% of the median equivalised disposable income in given country; or (b) that cannot afford at least four of the following nine items: (i) to pay their rent, mortgage or utility bills; (ii) to keep their home adequately warm; (iii) to face unexpected expenses; (iv) to eat meat or proteins regularly; (v) to go on holiday; (vi) a television set; (vii) a washing machine; (viii) a car; (ix) a telephone; or (c) where the members of working age worked less than 20 % of their total potential during the previous 12 months. Much of the drop in child AROPE for EU-27 between 2016 and 2017 was, amongst others, due to rapid improvements in three Member States: Poland, Romania and Bulgaria. Overall, in two thirds of Member States risk of poverty among children is higher than among the general population. Source: Eurostat, [ilc_peps01], extracted 28.01.2021

Furthermore, the overall impact of various social benefits (not only family-related benefits or child-related benefits) on child poverty varies greatly among Member States. The strongest poverty-reduction impacts are observed in countries with low or medium levels of child poverty (e.g. Finland, Hungary, Denmark, Ireland, Poland, Germany, Austria and Slovenia, see Figure 2).

Figure 2: Share of children at risk of income poverty (AROP) and impact of social transfers (other than pensions) in reducing child poverty, 2019



Note: Being at risk of poverty (AROP) denotes living in a household that has disposable income (i.e. income after taxes and social transfers) that adjusted for household size is below 60% of the median equivalised disposable income in given country. (*) 2018 data for impact of social transfers; (**) 2018 data for impact of social transfers and child AROP.
Source: European Commission, JAF

Greater investment in children holds the promise of breaking the cycle of intergenerational disadvantage[7] and has a high multiplier effect[8]. A key role in breaking this cycle is played by early childhood education and care (ECEC), education and healthcare systems.[9] Everywhere in the EU, public schools provide tuition-free education at the primary and secondary level. Most Member States also provide at least a year of pre-school ECEC universally and free of charge. Free healthcare for children – both curative and preventive – is also widely available, thanks to which only 3% of EU children at risk of poverty report unmet medical needs[10]. The EU and its Member States also make efforts to support healthy lifestyles and adequate nutrition for children.

However, while social protection expenditure levels on family benefits have on average increased per capita since 2008, the divergence between Member States has also increased. Family expenditure per child as a proportion of GDP per capita slightly increased between the 2008 crisis and 2018[11]. Nevertheless, expenditure levels since 2011 have diverged across Member States. In 2016, expenditure per child ranged from around 6% of GDP per capita in Ireland, the Netherlands, Greece and Malta to above 16% in Denmark, Luxembourg and Germany. The highest increases were registered in Poland, Italy, Bulgaria, Latvia and Croatia (more than 25%), while Ireland and Lithuania registered sharp decreases (of above 30%).

Children from disadvantaged backgrounds (including those living in low income households) still have difficulties in accessing the services they need. For instance, even under a tuition-free education regime, schoolbooks, school transport, meals and additional school activities (i.e. recreation, sport and cultural) place a burden on family budgets. In 2016, in 15 Member States, at least half of all households considered those expenses as significant[12]. Affordability of ECEC is also an issue. This is because parents on moderate incomes find costs of ECEC for youngest children to be very high in around one third of Member States[13]. As for ECEC availability, the enrolment rates in most Member States are still below the target levels set in Barcelona.[14] In several Member States[15], only some healthcare-related services for children are fully free of charge. In 2014, 4% of EU children lived in households that could not afford daily fruit and vegetables or sources of protein for all of their children[16]. In six Member States[17], more than 10% of children experienced severe

[7] See the Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions of 20 February 2013, 'Towards Social Investment for Growth and Cohesion – including implementing the European Social Fund 2014-2020', COM(2013) 83 final (a.k.a. Social Investment Package).

[8] Hemerijck1, A., Burgoon, B., di Pietro, A., Vydra, S., *Assessing Social Investment Synergies (ASIS)*, European Commission, Brussels, 2016.

[9] D'Addio, A., *Intergenerational Transmission of Disadvantage: Mobility or Immobility Across Generations?*, OECD Publishing, Paris 2007.

[10] Feasibility study for a child guarantee. Final report, p.58, available at https://op.europa.eu/en/publication-detail/-/publication/c312c468-c7e0-11ea-adf7-01aa75ed71a1/language-en. The incidence of unmet dental needs is more than twice as large, see Table B11 in Annex B.

[11] See Figure B2 in Annex B for details.

[12] Feasibility study for a child guarantee. Final report.

[13] 'Moderate income' is defined as 67% of average wage. Feasibility study for a child guarantee. Final report, p. 58, see also OECD data for 2019.

[14] By 2019, 12 Member States have met the target for children under 3 years old (33% of population enrolled in ECEC), and 13 for the older age group (between 3 years and the mandatory school age, 90% enrolment). See Figure B1 in Annex B.

[15] Belgium, Estonia, France, Slovakia. Feasibility study for a child guarantee. Final report, p. 59.

[16] Feasibility study for a child guarantee. Final report, p. 67-68. This proportion varied enormously between Member States, from 1% to 42%.

[17] Romania, Hungary, Latvia, Bulgaria, Lithuania and Poland.

housing deprivation[18]. Homelessness has increased in all Member States except Finland, and this is also affecting children.[19]

The COVID-19 pandemic is likely to have a negative impact on the situation of children living in disadvantaged households. Thanks to the bold and swift policy measures adopted both at Member State and EU level, the immediate employment and social effects of the pandemic have been mitigated.[20] Nonetheless, the pandemic has increased socio-economic risks for people who were already vulnerable in the labour market, such as precarious workers, single parents, people with disabilities, people with a migrant background and people living in areas and households with limited or no digital connectivity, e.g. in rural or remote regions. Low-income and middle-income groups are at a higher risk of income loss, due to fewer telework possibilities and increasing unemployment[21]. Before the pandemic, the proportion of at-risk of poverty households with children that reported arrears on utility bills was approximately three times the average of the total population. Single-parent households were twice as likely as total population to have arrears, even if they were not at risk of poverty[22].

The direct impact of COVID-19 on the educational achievements of young Europeans, and on their living and social environments, has also been significant. Although online learning has a lot of potential, it is more effective when children, teachers and schools are well prepared and equipped. This was not the case during the spring 2020 lockdown, when most teachers (67%) had to teach online for the first time[23]. Both the financial resources of parents and their support are key for successful learning at home. For this reason, children from disadvantaged backgrounds are likely to experience, as result of the lockdown, a larger decline in learning outcomes than their more advantaged peers.

2. CHILDREN IN NEED

The effects of social exclusion on children can last a lifetime and be carried on into future generations. Without the necessary support, children from disadvantaged backgrounds or low-income families are likely to experience the intergenerational transmission of disadvantage.

As part of the targeted consultation on a European Child Guarantee, stakeholders were asked to assess how easy or difficult it is for various categories of children in need to access key services that could be potentially covered by the initiative. For children from economically precarious families (i.e. households experiencing poverty or material deprivation), decent

[18] Feasibility study for a child guarantee. Final report, Figure. 3.1, p. 51. Severe housing deprivation is defined as experience of overcrowding combined with the presence of at least one of the following housing deprivation factors: (i) a leaking roof, damp walls/floors/foundation, or rot in window frames or floor; (ii) lack of bath or shower in the dwelling; (iii)lack of indoor flushing toilet for sole use of the household; (iv) not enough light. A person is considered as living in an overcrowded household if the household does not have at its disposal a minimum number of rooms equal to: (i) one room for the household; (ii) one room per couple in the household; (iii) one room for each single person aged 18 or more; (iv) one room per pair of single people of the same gender between 12 and 17 years of age; (v) one room for each single person between 12 and 17 years of age and not included in the previous category; (vi) one room per pair of children under 12 years of age.

[19] European Commission Annual Review 2019 on Employment and Social Developments in Europe, 'Sustainable Growth for all: choices for the future of social Europe', available at https://ec.europa.eu/social/main.jsp?catId=738&langId=en&pubId=8219, Section 1.5.

[20] Joint Employment Report 2021 adopted by the Council on 15 March 2021.

[21]European Commission Annual Review 2020 on Employment and Social Developments in Europe, Leaving no one behind and striving for more: fairness and solidarity in the European social market economy, available at , p. 15.

[22] Eurofound (2021), *Education, healthcare and housing: How access changed for children and families in 2020.*

[23] Di Pietro , G., Biagi, F., Costa, P., Karpiński Z., Mazza, J, *The likely impact of COVID-19 on education: Reflections based on the existing literature and international datasets*, Publications Office of the European Union, Luxembourg, 2020.

housing appears to be the most difficult service to access. The situation is not much better for other services: responses 'very difficult' and 'rather difficult' exceed 70% across all sub-categories and across all services.[24]

This chapter examines the categories of children that face situations of disadvantage that would warrant extra support in access to key services.

2.1. Children at risk of poverty or social exclusion

Low incomes and joblessness in households with children remain the key factors driving social exclusion of children. In order to monitor poverty and social exclusion, the Union has used the notion of being at risk of poverty or social exclusion (AROPE)[25], which combines three different aspects of disadvantage: income poverty[26], severe material deprivation[27] and living in a household with very low work intensity[28] (see Figure 3 for details). Children at-risk-of-poverty or social exclusion (17.9 million overall in EU-27 in 2019)[29] are a very diverse group. The risk of poverty or social exclusion for children (22.2% for EU-27) varies from 11.7% in Slovenia to 35.8% in Romania.

The total number of children living in EU-27 at risk of income poverty (AROP) in 2019 was estimated at 14.9 million (18.5% of all children), around 930 000 fewer than the year before[30]. The highest shares of children at risk of income poverty were recorded in Romania (30.8%), Bulgaria (27.5%), and Spain (27.4%), with lowest incidence reported in Finland, Denmark, Czechia and Slovenia (all close to 10%).

In 2019, more than 4.5 million children (5.7%) across the EU-27 lived in households experiencing severe material deprivation (SMD). There are great differences between the Member States in SMD rates. For instance in Luxembourg, Sweden and Germany, fewer than 15% of all children at risk of poverty or social exclusion live in households experiencing SMD. In most Member States, about half of those experiencing SMD do not have an income below the poverty line.

Very low work intensity (VLWI) poses a challenge principally as a driver of poverty and deprivation. This is because VLWI households with dependent children are significantly more likely to fall into poverty than VLWI households without dependent children (respectively 70.2% and 55.6% in the EU-27 in 2019). At the individual level, living for a long time in a household with very low work intensity can adversely affect child's aspirations of finding a job, as their parents have a very weak link to employment. In 2019, some 1.2

[24] See report on consultation with stakeholders in Annex C.

[25] The AROPE rate denotes the share of the total population, which is at risk of poverty or social exclusion and is a headline indicator to monitor the poverty target of EU 2020 Strategy.

[26] Denotes a situation when the disposable income (i.e. after taxes and social transfers) adjusted for household size is below 60% of the median equivalised disposable income in given country. While the 60% of median is the EU agreed poverty threshold, information is available also for other thresholds (40%, 50% and 70% of median). It is worth noting that the statistical adjustment of income for household size is done by attributing a weight to all members of the household: 1.0 to the first adult, 0.5 to the second and each subsequent person aged 14 years and over, and 0.3 to each child aged under 14 years. This implies that, maintaining the same income level, a household can drop below the threshold of poverty not only due to a new birth, but also when a child's statistical weight changes on their 14th birthday.

[27] Denotes the enforced inability to pay for at least four of the following nine items: (1) rent, mortgage or utility bills; (2) keeping home adequately warm; (3) unexpected expenses; (4) eating meat or proteins regularly; (5) holidays; (6) a television set; (7) a washing machine; (8) a car; (9) a telephone.

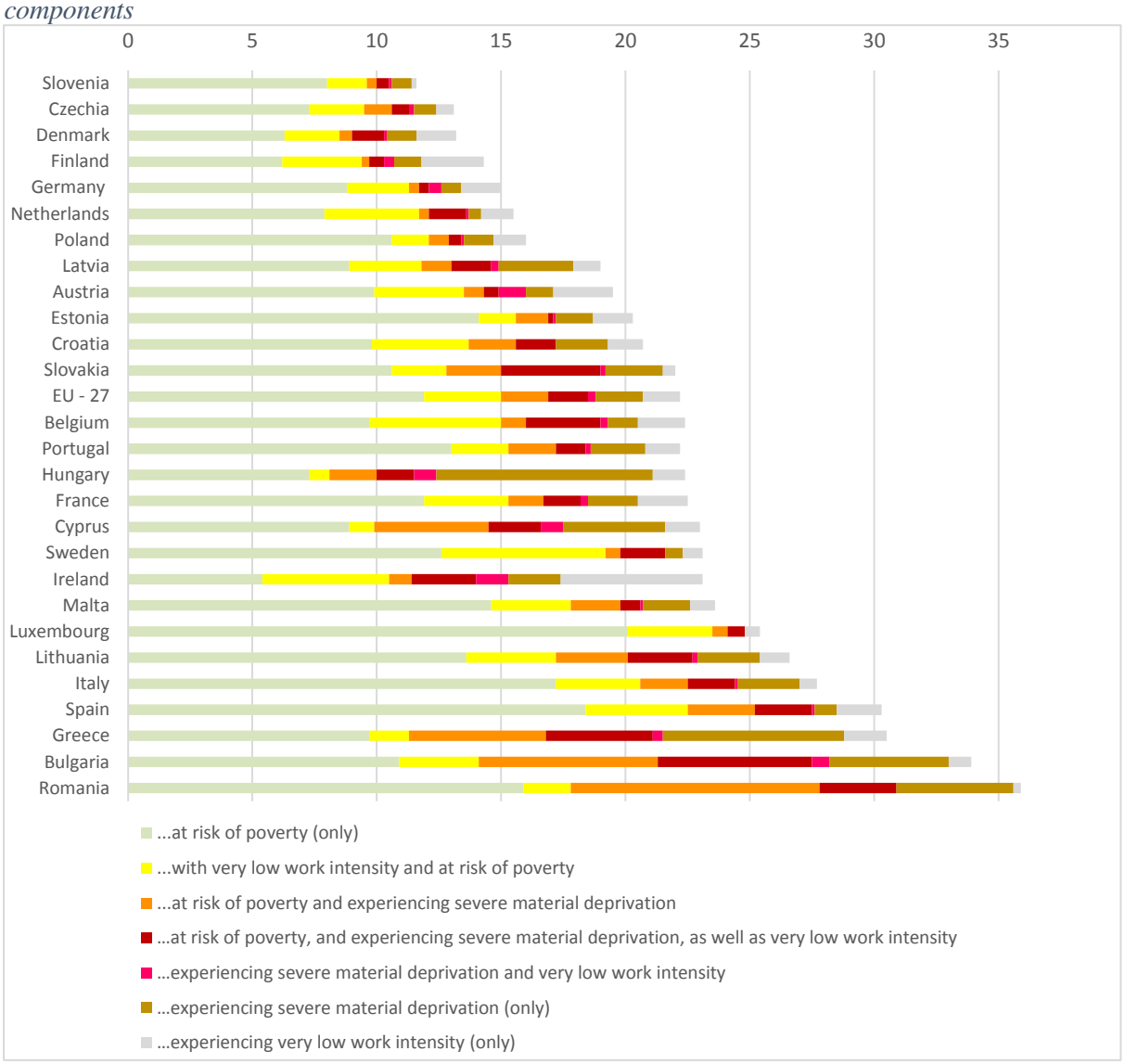
[28] Understood as a situation when the total working hours of its working-age members amount to less than 20 % of their total potential during the previous 12 months.

[29] In terms of distribution between Member States, the largest number of children at risk of poverty or social exclusion live in France (3.0 million, compared to 3.1 million in 2018), followed by Italy, Spain, Germany, Romania and Poland. See Figure A1 in Annex A for details.

[30] Data from 2019. Eurostat, SILC [ilc_li02], extracted 9.12.2020.

million children lived in households with very low work intensity, but were neither income poor, nor severely materially deprived.

Figure 3: Risk of poverty or social exclusion (AROPE) in 2019 for children. Intersections between its components



Source: EU SILC [ilc_pees01], extracted 2.12.2020.

The depth and persistence of poverty seem to have remained higher among children than among the rest of the population over the last decade. The poverty gap[31] in 2019 was slightly higher among children (25.4%) than among the rest of the population (24.3%), with the difference slowly declining over recent years. Furthermore, the persistence of poverty[32] remains higher among children (14.1%) than among the rest of the population (10.8%) and neither the levels nor the difference with the rest of the population have significantly decreased over the last decade. This slow progress hampers equality of opportunities. Children from lower-income households fare worse throughout their lives, scoring lower on

[31] Relative median at-risk-of-poverty gap that helps to quantify how poor the poor are and is calculated as the difference between the median equivalised disposable income of people below the at-risk-of-poverty threshold and the at-risk-of-poverty threshold, expressed as a percentage of the at-risk-of-poverty threshold.

[32] The persistent poverty rate is the share of persons living in a household with an equivalised disposable income below the poverty threshold in the current year and in at least two of the preceding 3 years.

tests of cognitive skills in early childhood, being more likely to drop out of school and less likely to attain tertiary education[33].

2.2. Homeless children

Homelessness is an extreme manifestation of social exclusion. Even a short spell of homelessness can lead to persistent social exclusion, as well as to rapid deterioration in physical and mental health, in employability and in social skills. The homeless suffer from limited access to healthcare, social services and other services. They are also not always able to exercise their basic human and civil rights. The longer-term consequences of homelessness can be irreversible.[34]

More and more European families with children experience homelessness, even if these families usually manage to stay in temporary or insecure accommodation rather than being forced to sleep rough.[35] The risk that young people leaving institutional care will become homeless is also greater because they are often forced to become self-sufficient at a much younger age than their peers growing up in a family home. Other groups of children who are especially at risk include: Roma children, unaccompanied asylum-seeking children, and undocumented or non-registered children[36].

While data on children and family homelessness are scarce and often not comparable, the figures collected during the preparatory action for a child guarantee[37] indicate that there were at least 90 000 homeless children in the EU-27 in 2018-2020[38]. Homeless children can be divided into three sub-categories: (i) members of a homeless family (in some national contexts this category also includes families experiencing severe housing deprivation); (ii) survivors of domestic violence (who are often accompanied by other family members, usually mothers, and likely to stay in temporary shelter); and (iii) unaccompanied adolescents (this group includes runaway or throwaway youths, migrant children and children leaving in institutions).[39]

For victims of domestic violence, the main challenge is the sometimes alarmingly long periods that children spend in temporary shelters and accommodation. Such unstable living situations increase psychological stress and can lead children to dropping out of school, which negatively impacts their development and chances to succeed later in life[40].

Falling out of the education system is an additional risk run by street children, runaway children and throwaway youth. Access to healthcare is also a challenge, due to missing

[33] Salovey P., Sluyter, D. J., (Eds.), *Emotional development and emotional intelligence: Educational implications*, Basic Books, 1997; Duncan, G. J., et al. 'The Importance of Early Childhood Poverty' *Social Indicators Research*, August 2012; Thévenon, O. et al., *Child poverty in the OECD: Trends, determinants and policies to tackle it*, OECD Publishing, Paris 2018.

[34] See FEANTSA 2019, Homeless in Europe Autumn 2019.

[35] The European Typology of Homelessness and Housing Exclusion (ETHOS) sets a framework for defining homelessness across Europe, looking at three aspects of possessing a home – physical, social and legal. The following types of homelessness appear in ETHOS: (i) rooflessness i.e. sleeping rough, in the street or in a night shelter, (ii) houselessness, i.e. having a temporary place to sleep, in an institution or shelter, (iii) living in insecure housing, either because of illegal tenancies, or due to a risk of eviction, or domestic violence, and (iv) living in inadequate housing (e.g. in unfit housing or in extreme overcrowding).

[36] Commission Staff Working Document 'Confronting homelessness in the European Union', Social Investment Package, 2013.

[37] See Study on the economic implementing framework of a possible EU Child Guarantee Scheme including its financial foundation. Final Report, available at http://ec.europa.eu/social/BlobServlet?docId=23764&langId=en.

[38] See Table A3 in Annex A. These data were gathered between 2018 and 2020 and only cover certain categories of homelessness in certain EU-27 cities and Member States. They are therefore not be considered as comprehensive.

[39] Child homelessness in Europe – an overview of emerging trends, FEANTSA 2007.

[40] FEANTSA 2007, p. 22.

documents, and a lack of awareness of the availability of healthcare. This lack of awareness is present among most of the homeless adolescents who migrated to the EU from non-EU countries[41]. Unaccompanied homeless children are also at high risk of becoming victims of crime, such as trafficking in human beings[42]. Vulnerable children and unaccompanied minors continue to be at higher risk of trafficking and exploitation along migration routes towards and within the EU.

2.3. Children with disabilities

Children with disabilities[43] face specific challenges in fighting social exclusion, and often struggle to have the same opportunities as their peers without disability. In most Member States, around 1% of children (aged 0-15) have a disability. The share of children experiencing less severe limitations varies across Member States. It ranges from less than 2% in Cyprus, Greece and Italy to more than 8% in Estonia, Lithuania, Denmark, and Finland, and 11.4% in Latvia[44].

Access to inclusive, quality, accessible and mainstream education remains problematic for many children with disabilities[45]. Evidence shows significant gaps between the educational outcomes of learners with disabilities and those without disabilities. Many learners with disabilities leave education and training early (19.9%), as compared to 9% for pupils without disabilities (figures for 2018). Statistics on inclusive education published by the European Agency for Special Needs and Inclusive Education (EASNIE)[46] indicate that the placement of children with an official decision[47] of SEN (special educational need)[48] in inclusive settings[49] is far from being a generalised practice across Europe[50]. In addition, mainstream schooling settings often lack an adequate degree of accessibility in relation to physical environment and information and communication technologies, which includes teaching and non-teaching material and online systems used for education. There is a general lack of teachers specialized in the provision of education for learners with disabilities and an overall low awareness among mainstream teachers of the diversified needs of children with disabilities and of the necessity to tackle them as much as possible within inclusive settings. Whole-school approaches implementing inclusive practices and creating a diversity-friendly school

[41] See Table A3 in Annex A.

[42] The majority of the child victims of trafficking in the EU are EU citizens (75%) and girls (78%). Children are predominantly trafficked for sexual exploitation (60%), but also for labour exploitation (6%), forced criminality (pick pocketing, shoplifting) and begging, for drug-related crimes, such as cannabis cultivation, and for forced, early age and sham marriages. For more information on child trafficking and policy measures to address it, see Directive 2011/36/EU of the European Parliament and of the Council of 5 April 2011 on preventing and combating trafficking in human beings and protecting its victims, and replacing Council Framework Decision 2002/629/JHA (OJ L 101, 1 15.4.2011).

[43] The EU follows the approach of the UN Convention on the Rights of Persons with Disabilities, according to which persons with disabilities "include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others". For more information on the situation of children with disabilities and the EU policy response please see Commission communication 'Union of Equality: Strategy for the Rights of Persons with Disabilities 2021-2030, COM(2021) 101 final.

[44] See Figure A4 in Annex A.

[45] As also documented in European Semester country reports and country-specific recommendations.

[46] See European Agency Statistics on Inclusive Education, available at https://www.european-agency.org/data.

[47] An official decision leads to a child/learner being recognised as eligible for additional educational support to meet their learning needs.

[48] A special educational need is defined as the need for additional support and adaptive pedagogical methods in order to participate and meet learning objectives in an educational programme. Reasons may include (but are not limited to) disadvantages in physical, behavioural, intellectual, emotional and social capacities (see http://uis.unesco.org/en/glossary-term/special-needs-education). Therefore, SEN and disability do not coincide, but in the majority of cases children with disabilities are recognised as bearers of special educational needs.

[49] An inclusive setting refers to education where the child/learner with SEN follows education in mainstream classes alongside their mainstream peers for the largest part – 80% or more – of the school week.

[50] Datasets from EASNIE include non-EU countries such as Norway, Iceland and the United Kingdom.

culture need to be encouraged across the EU, including through raising awareness of school leaders, whose crucial role was highlighted by the United Nations Committee on the Rights of Persons with Disabilities[51].

Children with disabilities placed in institutional care experience particularly difficult situations and they can find obstacles in accessing quality education and healthcare. Often these children are not included in statistics[52]. In some countries, children with disabilities are cared for in boarding schools, creating a sort of "hidden" institutionalisation of children, as they do not appear in the official statistics of children in residential care[53]. In addition, there is an over-representation of children with disabilities in alternative care.[54]

Stakeholders who participated in the targeted consultation[55] assessed all the services to be covered by the child guarantee. They highlighted two of these services as the most difficult to access by children with disabilities: quality education and extracurricular activities. Moreover, exactly half of the interviewed experts assessed access to healthcare as being very difficult or rather difficult for children with disabilities. This is a high share, given that especially those with rare diseases are likely to need special health assistance. These children also need to receive adequate services in relation to rehabilitation and habilitation, which must be well coordinated with schooling.

2.4. Children with a migrant background

Being a migrant or having a migrant background[56] is by itself correlated with a lower income and thus a higher risk of poverty or social exclusion. It also poses additional challenges for children, among which stigmatisation, racism and lack of support networks are the most prominent.

Overall, in the EU-27, more than 16 million children have parents who are non-EU nationals or parents who are EU citizens with migrant background. This number is the largest in Germany and France (more than 3 million each), followed by Italy and Spain (more than 1 million each), and then by the Netherlands, Sweden, Belgium and Austria. Altogether, the remaining 19 Member States host only 10% of EU-27 children with a migrant background[57].

Language barriers are a major obstacle to quality participation of children with a migrant background in education. Schools also face a challenge in determining the educational level of newly arrived children who often do not have any school certificates. Being placed in classes either above or below one's abilities can result in low self-esteem, frustration, and hamper social integration and good education outcomes. In addition, in most Member States,

[51] General comment No.4 (2016) on the right to inclusive education states that "the committed leadership of educational institutions is essential for introducing and embedding the culture, policies and practices needed to achieve inclusive education at all levels and in all areas, including in classroom teaching and relationships, board meetings, teacher supervision, counselling services and medical care, school trips, budgetary allocations, any interaction with the parents of learners with and without disabilities and, when applicable, the local community or wider public".

[52] For instance, people living in institutions are not included in EU-SILC.

[53] Feasibility Study for a European Child Guarantee Final Report, p. 23.

[54] For example, in Germany, where the share of children with disability in total child population was below 5%, out of 95,582 children in residential care at the end of 2014, 13,281 (13.9%) had a disability. In Romania in 2017, 7.6% of the child population, but as much as 30% of children in residential care were children with disabilities.

[55] See Report on consultation with stakeholders in Annex C.

[56] 'Children with a migrant background' means third country national children, irrespective of their migration status, and children with nationality of a Member State who have a third country migrant background through at least one of their foreign-born parents.

[57] For details please see Table A5 in Annex A.

despite introduction of relevant policy responses, provision of healthcare to migrant children remains a challenge[58].

According to the 2018 Programme in International Student Assessment (PISA) survey, in most surveyed countries, immigrant[59] pupils tend to achieve below-average results in reading. In OECD countries where at least 5% of pupils had an immigrant background in 2018, the largest differences in reading performance between immigrant and non-immigrant pupils were observed in the EU Member States: Austria, Belgium, Denmark, Finland, Germany, the Netherlands, Slovenia and Sweden. In all of those countries, there was a reading gap of more than 60 PISA score points in favour of non-immigrant pupils. By contrast, in nine non-EU countries surveyed in 2018 PISA, immigrant pupils scored higher in reading than or at least at the same level as their native-born peers[60].

According to PISA, in Finland, Denmark, Estonia, Portugal, and Malta, immigrant children were likely to attend schools with other immigrant children, what negatively impacted on their integration in the receiving society.[61] Regardless of this concentration of immigrant pupils in some schools, in all EU Member States immigrant pupils are less satisfied with their lives and more likely to feel like outsiders in their school than non-immigrant children.[62] Pupils born outside of the country where they reside are significantly more likely to leave school early than their native-born peers[63].

Comparisons of the PISA reading scores of 15-year-old immigrant pupils with similar socio-economic backgrounds show that those who attended early childhood education and care (ECEC) consistently achieve higher scores. Across the EU, the educational advantage conferred by participation in ECEC is 6 months for the immigrant child and 18 months for the non-immigrant child. However, in only one Member State – Finland – are immigrant children more likely to attend ECEC than the non-immigrant children. Across the EU, the ECEC attendance rate of immigrant children is 4 pps lower than among natives (77% of all children in immigrant households vs 81% among children in native households). In Slovenia and France, children of immigrants are at least 10 pps less likely to attend ECEC than children of non-immigrants.[64]

On access to the various services, children with a migrant background are considered[65] to face similar levels of difficulty as children at risk of poverty or social exclusion, even though they face specific obstacles, including a very high risk of stigmatisation and racism, and a lack of support networks and access to information. Decent housing and quality education are the most difficult to access, followed by ECEC.

[58] For details please see Table A7 in Annex A.

[59] Throughout this section the term "immigrant" follows the PISA definition, denoting those children whose both parents were born in a country/economy other than that where they sat the PISA test. Each EU Member State is considered a separate country/economy in OECD classification. Consequently, "non-immigrant" denotes a child with at least parent born in the Member State where the PISA test was taken. See: OECD 2019, PISA 2018 Results (Volume II) 'Where All Students Can Succeed', p. 179.

[60] Australia, Brunei Darussalam, Jordan, Macao (China), Panama, Qatar, Saudi Arabia, Singapore and the United Arab Emirates.

[61] PISA 2018 Results (Volume II) 'Where All Students Can Succeed', p. 186.

[62] PISA 2018 Results (Volume II) 'Where All Students Can Succeed', p. 193.

[63] For details please see Figure A6 in Annex A.

[64] OECD/European Union, *Settling In 2018: Indicators of Immigrant Integration*, OECD Publishing, Paris/European Union, Brussels, 2018, p. 186.

[65] See Report on consultation with stakeholders in Annex C.

2.5. Children with a minority racial or ethnic background

Discrimination and prejudices against minorities still have a direct bearing on children with a minority racial or ethnic background in the EU. According to the reports of the EU Agency for Fundamental Rights[66], one in five survey respondents of African descent (21%) felt racially discriminated against in access to housing in the five years before the survey[67]. The respondents reported highest incidence of housing discrimination in Italy and Austria (reported by 39% of survey respondents in each country), followed by Luxembourg (36%) and Germany (33%).[68] The EU-MIDIS II survey explored also discriminatory practices in contact with school authorities, such as: (i) being prevented from enrolling a child in a school; (ii) being asked to take a child into another school; or (iii) the child being assigned to a class or track below their ability. Each of these situations were experienced by around 2% of the parents or guardians, with around 4% of all parents/guardians from ethnic/racial minorities reporting at least one of the three situations. The survey asked parents or guardians if their children experienced any racist treatment in school in the 12 months before the survey, including harassment, bullying, exclusion or violence. Overall, out of 1745 respondents of African descent (parents or guardians of a child, or children themselves), 18% indicated that they or their children experienced one or more of seven different types of racist harassment or violence. Parents in Finland (45%), Austria (42%) and Germany (41%) were most likely to report racist harassment and racial discrimination of their children at school.[69]

The situation of Roma, who are the largest ethnic minority group in Europe[70], calls for special attention. Some Member States, specifically Romania and Bulgaria (but also Slovakia, Hungary, Czechia, and Croatia), face serious challenges of discrimination and exclusion of larger groups of Roma.[71] In most Member States with sizeable Roma population, Roma children are at least twice as likely to experience income poverty as their non-Roma peers. Around 60% of Roma children live in severe material deprivation and 85% are at risk of poverty[72]. As many as 78% of the Roma surveyed in nine Member States in 2016[73] and 48% of Roma and Travellers surveyed in other six Member States in 2019[74] lived in overcrowded households. The shares of people living in household without tap water inside the dwelling were respectively 30% (in the group of nine Member States) and 9% (in the group of six Member States).

In areas with large Roma populations, it remains a challenge to ensure effective equal access to inclusive, desegregated, mainstream education and training as well as early childhood

[66] See in particular European Union Agency for Fundamental Rights, Fundamental Rights Report 2019, available at http://fra.europa.eu/en/publication/2019/fundamental-rights-report-2019 and European Union Agency for Fundamental Rights, EU-MIDIS II, Second European Union Minorities and Discrimination Survey Being Black in the EU, Publications Office of the European Union, Luxembourg, 2018, available at https://fra.europa.eu/en/publication/2018/being-black-eu

[67] Based on 2016 edition of EU-MIDIS II, Second European Union Minorities and Discrimination Survey Being Black in the EU, Publications Office of the European Union, Luxembourg, 2018., p. 57.

[68] *Idem*, p. 57

[69] *Idem*, p. 48.

[70] No official census or statistical data on Roma and Roma children exist in most EU Member States, though. See Table A8 in Annex for a CoE estimation of population sizes per country and some references to the methodological difficulties. See https://www.coe.int/en/web/portal/roma and https://ec.europa.eu/info/policies/justice-and-fundamental-rights/combatting-discrimination/roma-and-eu_en

[71] This can be the case for poor Roma EU nationals moving between EU Member States as well as non-EU Roma migrants, some of whom migrate with their children.

[72] For details please see Figure A9 in Annex A.

[73] Bulgaria, Croatia, Czechia, Greece, Hungary, Portugal, Romania, Slovakia and Spain.

[74] Belgium, France, Ireland, The Netherlands, Sweden and the UK.

education and care[75] for marginalised Roma children. In these areas, it is also a challenge to ensure additional targeted support in integrated diverse classrooms. Since the outbreak of the COVID-19 pandemic, many Roma children from remote and marginalised communities have been at disadvantage due to their lack of internet access and IT equipment necessary to participate in distance learning. This has increased the risk of Roma children dropping out of school or falling behind in their education[76]. The educational segregation of Roma children remains a challenge, with an increasing share of Roma children (44%) attending schools where 'most or all schoolmates are Roma'[77]. Among Roma children of compulsory schooling age across the EU, as many as 10% were not attending education in 2016. This share was as high as 31% in Greece and 23% in Romania. In the nine surveyed Member States, the share of early leavers from education and training was extremely high, ranging between 57% and 92%[78].

2.6. Children in alternative care

Alternative care may take the form of: (i) informal care in a family environment by relatives other than parents; (ii) foster care; or (iii) institutional care[79]. The data on the number of children in alternative care is incomplete and difficult to compare between Member States. The estimated numbers of children in institutional care across the EU differ substantially and range from at least 350 000[80] to approximately 1 000 000 children[81].

The reasons why children are placed in alternative care arrangements are complex and multi-dimensional[82]. These reasons can involve: (i) neglect and abuse; (ii) inadequate housing; (iii) single parenthood; (iv) lack of access to welfare; (v) lack of access to day-care and specialized services for children with disabilities; (vi) children's health condition; (vii) stigma and discrimination. Factors related to the parents, like their health status, economic situation or substance abuse can also play an important role. These factors can be exacerbated by economic precariousness, which can take a serious toll on parents' availability (e.g. due to extended working hours, multiple jobs) and their own emotional well-being.[83]

Out of all children in alternative care, those placed in residential institutions[84] are most in need of measures supporting their social inclusion. Placing of children in institutional care should be used as last recourse only. The measures supporting social inclusion of children in alternative care should focus on enabling them to attend a mainstream school that would best suit their talents and interests. Equally important is support for the transition from

[75] This is at least partly due to parents' preferences to care for their children themselves, or to entrust them to informal carers from familiar social milieu. Some socially vulnerable families reject ECEC services due to formal – e.g. requirement for regular attendance, and informal reasons. EACEA, Early Childhood Education and Care in Europe: Tackling Social and Cultural Inequalities, Brussels, 2009 p. 135.

[76] Fundamental Rights Agency, 2020, Coronavirus pandemic in the EU – fundamental rights implications: focus on social rights.

[77] Commission Staff Working Document accompanying the Communication from the Commission to the European Parliament and the Council 'A Union of Equality: EU Roma strategic framework for equality, inclusion and participation and its accompanying proposal for a revised Council recommendation on national Roma strategic frameworks for equality, inclusion and participation', SWD(2020) 530 final, Annex 2: Baseline for EU headline indicators.

[78] Communication from the Commission to the European Parliament and the Council 'Midterm review of the EU framework for national Roma integration strategies', COM (2017) 458 final.

[79] In the case of foster care, children are formally placed by a competent authority in the domestic environment of a family other than their own. Residential care refers to any care provided in non-family-based group setting, such as places of safety for emergency care, transit centres in emergency situations, and all other short- and long-term residential care institutions, including group homes.

[80] Feasibility Study for a European Child Guarantee Final Report, see Table A10 in Annex A for details of those estimations.

[81] National surveys on children in alternative care carried out by Eurochild in 2009.

[82] For instance, the preparatory action pointed to vested interests as a factor that leads to children still being placed in residential care institutions. Feasibility Study for a European Child Guarantee Final Report, p. 121.

[83] SPC advisory report to the European Commission on tackling and preventing child poverty, promoting child well-being, June 2012.

[84] There are various kinds of residential institutions for children, focused on diverse areas, such as care, health, migration, and justice.

institutional to quality family- or community- based alternative care or to independent living. This involves timely programmes (i.e. starting early before scheduled moment of leaving the institution), as well as effective access to social housing[85]. Without such support, young people leaving institutions find themselves at risk of homelessness.

In all Member States for which disaggregated data are available, some groups of children are over-represented in the alternative care system, and especially in institutional care. For example, having some form of disability or having a migrant or ethnic minority background increased the likelihood of being placed in institutional care. In Hungary, Bulgaria, and Romania, where the share of Roma in total population is app. 10%, as many as 60% of children in institutions are of Roma origin[86]. In Germany, almost half of the children in institutional care have at least one foreign-born parent. The increasing number of unaccompanied foreign minors arriving in the EU in recent years has led to a visible increase of the number of children in alternative care[87].

The stakeholders consulted on a European Child Guarantee[88] pointed to decent housing, quality education, and extracurricular activities as the services that were most difficult to access for children in institutional care or exiting it. On healthcare and early childhood education and care, children living in institutions are considered to have an easier access than other categories of children in need. This reflects the fact that both healthcare and early childhood education and care are often integrated within the institutional care setting.

2.7. Children in precarious family situations

Social exclusion may also result from a precarious family situation. This refers to: (i) living in a single parent household[89]; (ii) living with a parent with a disability[90]; (iii) living in a household where there are mental health problems or long-term illness; (iv) living in a household where there is substance abuse, or domestic violence. In addition, (v) children whose parents have moved to another Member State and who themselves remained in their Member State of origin; (vi) children having a teenage mother or being a teenage mother; and (vii) children having an imprisoned parent are also considered to be in a precarious family situation.

Living in a **single-parent household** increases the risk of suffering from child-specific deprivation or income poverty, but it is also a factor that influences other domains of life. Single-parent households are more vulnerable because they have less possibility to pool economic risks and sharing care responsibilities. They also face fixed costs (such as for housing, childcare, and healthcare) which generally represent a higher share of their resources than is the case for households with more than one adult. Single-parent households also face

[85] While relevant policy responses in seven Member States (Belgium, Czechia, Estonia, Germany, Hungary, Romania and Ireland). Italy also reports that it is phasing in a targeted fund for people leaving care. Nevertheless, overall provision in this area seems generally short of the needs. See Study on the economic implementing framework of a possible EU Child Guarantee Scheme including its financial foundation. Final Report.

[86] See the European Parliament resolution of 17 September 2020 on the implementation of National Roma Integration Strategies: combating negative attitudes towards people with Romani background in Europe (2020/2011(INI)), available at https://www.europarl.europa.eu/doceo/document/TA-9-2020-0229_EN.html, and the Commission proposal of 7 October 2020 for a Council Recommendation on Roma equality, inclusion and participation, SWD(2020) 530, available at https://ec.europa.eu/info/sites/info/files/commission_proposal_for_a_draft_council_recommendation_for_roma_equality_inclusion_and_participation_en.pdf .

[87] Feasibility study for a child guarantee. Final report, p. 27.

[88] See Report on consultation with stakeholders in Annex C.

[89] Among all the EU households with children in 2018, more than one in eight (13%) were single-parent household. For details, please see Figure A11 in Annex A.

[90] Children of COVID-19 survivors who suffer from its long-term consequences are in similar situation.

more difficulties in reconciling work and family life and are therefore more likely to opt for part-time employment or inactivity. Single-parent households also face more organisational (including time constraints) and emotional challenges than two-adult households[91]. Women head majority of single-parent households in the EU, and tend to be disproportionately affected by poverty or social exclusion[92].

According to a report of the European Association Working for Carers (Eurocarers), **young people with a sick family member** tend to have more mental health problems and more adverse outcomes in behavioural, psychosocial, and academic adjustment than their counterparts without a chronically ill family member. Those effects mainly manifest themselves in lower life satisfaction and internalised problem behaviour such as feeling depressed, being withdrawn, and anxiety.[93] The adverse educational impacts concern mainly punctuality and attendance, as well as problems with home- and course- work. Difficulties with joining in extracurricular activities, low attainment, anxiety and fatigue were also reported.[94] While no precise data exists on the number of young carers in Europe, Eurocarers research suggests that as many as 8 % of all children have caring responsibilities[95].

In 2019, some 0.74% of all births across the EU-27 were given by **mothers aged under 18 years**. This share was significantly higher than the average in Bulgaria (4.75%), Romania (4.23%), Slovakia (2.27%), Hungary (1.96%) and Greece (1.18%). Teenage pregnancies have been habitually associated with perpetuation of precarious socio-economic status: teenagers who bear a child are less likely than their peers to complete secondary and tertiary education. This impacts on their lifetime earnings, as well as on the educational achievement of their children. Early child-bearing often leads to single parenthood and is thus associated with a higher degree of social instability, contributing to self-esteem issues and emotional problems for both mothers and children.[96]

The prevalence of **domestic violence** has been acknowledged and documented in recent decades. Violence against children in the family may take place in the context of discipline and in the form of physical, cruel or humiliating punishment. Physical violence is often accompanied by psychological violence.[97] Children are considered as victims of domestic violence, even if it does not target them directly[98]. Experiencing or witnessing domestic violence may generate in children attitudes that justify their own use of violence, and the perception that violence is acceptable, which may affect their behaviour in other interpersonal relationships[99]. The drivers of domestic violence are many and include mental health problems and substance abuse, but also economic stress, such as experience of

[91] Feasibility Study for a Child Guarantee. Target Group Discussion Paper on Children living in Precarious Family Situations, p. 16.

[92] European Institute for Gender Equality, 2016, Poverty, gender and lone parents in the EU, available at https://eige.europa.eu/publications/poverty-gender-and-lone-parents-eu.

[93] Eurocarers Policy Paper Young Carers, 2017, p. 4, https://eurocarers.org/publications/eurocarers-policy-paper-on-young-carers/

[94] *Idem*, p. 5.

[95] See research note 'Caring for the mental health of young carers' available at https://ec.europa.eu/research/infocentre/article_en.cfm?&artid=49703&caller=other.

[96] Feasibility study for a child guarantee. Target group discussion paper on children living in precarious family situations, p. 16, available at https://op.europa.eu/en/publication-detail/-/publication/7027c77d-c7e3-11ea-adf7-01aa75ed71a1/language-en.

[97] Report of the independent expert for the United Nations study on violence against children (2006), p. 13, available at https://www.ohchr.org/EN/HRBodies/CRC/Study/Pages/StudyViolenceChildren.aspx.

[98] See the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence.

[99] Malgesini G., Cesarini Sforza L., Babovic M., *Gender-based Violence and Poverty in Europe*, EAPN, Brussels, 2018, p. 17.

unemployment. Increase in domestic and intra-family violence is one of the side effects of the Covid-19 pandemic, observed throughout the world[100].

Children who stayed in their country of origin as their parent(s) moved to work in another Member State also often find themselves in a precarious situation. Although findings confirm that the increase in income of households of the EU-mobile workers has a positive impact on children's perceived health and nutritional status, the absence of parental care has a major bearing on their well-being, and can have an impact in the wider context through family disintegration, including child abandonment[101]. According to estimates, as many as 25% of Bulgarian children had at least one parent working abroad[102]. The data from the Romanian National Agency for the Protection of Children's Rights and Adoptions (ANPDCA) indicate that in 2018 around 95 000 Romanian children (ca. 2.8%) had a parent working abroad.

The **children with imprisoned parents** experience economic fragility, lower educational outcomes, worse health status and low self-esteem, stigma[103]. Parental imprisonment is recognized as risk factor for child antisocial behaviour, offending, mental health problems, drug abuse, school failure, and future unemployment[104].

3. ACCESS TO KEY SERVICES BY CHILDREN IN NEED

While social exclusion is multi-dimensional, it strongly correlates with the lack of access to key services, such as early childhood education and care, education, nutrition, and housing. While these services are in place, the evidence shows that access in particular for children in need is uneven across Member States[105]. The drivers of unequal access to services are manifold and include: (i) lack of financial resources to cover for the costs of the services by parents or guardians; (ii) limited availability, particularly in rural, remote or disadvantaged areas; (iii) lack of adaptation of services, or personnel, to children with particular needs; (iv) lack of information on the available services; (v) administrative barriers; and (vi) risk of social stigma.

Equal access to **affordable and inclusive early childhood education and care and quality inclusive education** is central to securing equal opportunities and ending the intergenerational transmission of social exclusion. However, education outcomes from both primary and secondary school are highly influenced by a child's family background. Analysis of the correlation between the educational achievements of parents and those of children suggest that people from disadvantaged families still face considerable obstacles in realising their full potential at school and achieving better living standards[106].

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[100] E.g. in France, the incidence of violence against women is estimated to have increased by 30% during the first round of containment, see Impact of the Covid-19 pandemic on domestic violence. Press release of the French National Academy of Medicine, available at https://www.academie-medecine.fr/impact-of-the-covid-19-pandemic-on-domestic-violence/?lang=en.

[101] Feasibility study for a child guarantee. Final report, p. 44.

[102] 2018 survey by the Bulgarian School of Politics, quoted in Feasibility study for a child guarantee. Final report, p. 45.

[103] Feasibility study for a child guarantee. Target group discussion paper on children living in precarious family situations, p. 11.

[104] Murray, J. and Farrington, D.P., 'The Effects of Parental Imprisonment on Children', *Crime and Justice,* 2012.

[105] Flisi, S., Blasko, Z.: A note on early childhood education and care participation by socio-economic background, Publications Office of the European Union, Luxembourg, 2019.

[106] OECD, A Broken Social Elevator? How to Promote Social Mobility, OECD Publishing, Paris, 2018.

Social exclusion of children often means that children from low-income families or experiencing other disadvantages cannot afford to take part in many of **school-based activities** that better-off children enjoy. This may include school trips, cultural or sports events[107], and similar activities taking place in the school environment. In addition to affordability constraints, children living in rural and remote areas, children with disabilities and children with a migrant background might have fewer opportunities to participate in these activities. This could be due to lack of proper infrastructure, poor accessibility, language barriers, or excessive costs.

There still remain inequalities across Europe in children's health outcomes and **access to healthcare**. Children living in poverty or experiencing other disadvantages have fewer opportunities and resources to benefit from disease prevention and health promotion programmes. There is also evidence that the socio-economic status of a child is a good predictor of their health as an adult: growing up in a disadvantaged environment can cause a long-lasting damage to health, which is not undone by upward social mobility.[108]

Lack of access to regular healthy **nutrition** can also heavily impair children's health and the overall well-being. Even short-term deprivations can have permanent consequences for a child. A poor diet during early development in the first three years of life can lead to learning and memory deficits, lower school achievement, and behavioural problems in childhood and adolescence.[109]

Inadequate housing is yet another form of disadvantage. Both house-specific conditions (such as a lack of light, a lack of space to play, insufficient heating, or a leaking roof) and inadequate conditions in the broader environment (pollution, grime, insecurity, and a lack of access to green areas) can lead to ill-health, accidents, low educational outcomes, and a lack of general well-being. Living in inadequate housing increases the risk of perpetuating the intergenerational social exclusion cycle, with profound and long- term effects on children's life perspectives. The following chapter analyses in a greater detail the main challenges in ensuring children in need can access basic services.

3.1. Early childhood education and care (ECEC)

Early childhood education and care (ECEC) refers to any regulated arrangement that provides education and care for children from birth to compulsory primary school age, regardless of its setting, funding, opening hours or programme content. It includes: (i) centre and family day-care; (ii) privately and publicly funded provision; (iii) pre-school and pre-primary provision.[110]

3.1.1. Availability of ECEC

In 2002, the Council met in Barcelona to set targets for participation in early childhood education and care. The targets were that Member States should by 2010 provide childcare to at least 90% of children aged between 3 and the mandatory school age, and for at least 33% of children under 3. Although the overall targets at EU level have been largely met, there are still significant differences among the Member States in enrolment overall, and particularly in

[107] Physical activities are especially important for healthy development of children, see https://www.euro.who.int/en/health-topics/noncommunicable-diseases/pages/who-european-office-for-the-prevention-and-control-of-noncommunicable-diseases-ncd-office/news/news/2021/2/who-reviews-effect-of-physical-activity-on-enhancing-academic-achievement-at-school.

[108] OECD, 'A Broken Social Elevator? How to Promote Social Mobility', OECD Publishing, Paris, 2018.

[109] Save the Children, 'Child poverty and social exclusion in Europe – a matter of children's rights', 2014.

[110] For more information about the early childhood education and care (ECEC), and EU actions in this policy area see https://ec.europa.eu/education/policies/early-childhood-education-and-care_en.

the participation of children at risk of poverty or social exclusion[111]. Subsequently, the Commission communication on the Gender Equality Strategy 2020-2025 announced a proposal for the revision of the Barcelona objectives to foster upward convergence. This commitment is reiterated in the European Pillar of Social Rights Action Plan and the Commission will propose the new targets in 2022. Furthermore, the 2021 Council Resolution on a strategic framework for European cooperation in education and training towards the European Education Area and beyond (2021-2030)[112] agreed an EU target for the ECEC participation rate of at least 96% among children between 3 and the starting age for compulsory primary education.[113]

Providing ECEC is especially problematic for the younger group (aged 0 to 3) in Slovakia, Czechia, Poland, Romania and Croatia. In the Netherlands, Ireland, and Austria most children attend these facilities for less than 30 hours per week. Such 'part-time' attendance raises concerns about the labour market participation of parents, especially mothers, and might hinder the education and socialisation of children[114].

Evidence shows considerably lower attendance rates in ECEC for children from a lower socio-economic backgrounds or socially disadvantaged groups. Over time, the use of formal childcare has increased among all income groups, but inequality in its use has not declined[115]. A literature review[116] concluded that children with a disadvantaged background tended to be underrepresented in childcare services. Younger children (0-3 years) from a disadvantaged background were especially underrepresented. The factors that are more frequently associated with low participation include: (i) the low socio-economic status of parents; (ii) non-working mothers; (iii) ethnic minority background; and (iv) living in a poor neighbourhood, rural area or marginalised settlement. The attendance of Roma children is particularly low.

Such inequalities so early in life are reflected later on in the child's life in the form of: (i) lower educational outcomes; (ii) lower educational attainment and completion; and (iii) worse employment prospects as an adult.

3.1.2. Affordability of ECEC

Early childhood education and care is paid for in different ways across the Member States. This reflects the share of public spending dedicated to it, which ranges from 0.4% of GDP in Ireland to 1.6% of GDP in Sweden. The measures to make the services affordable for all children vary[117]. In some Member States, low-income families receive targeted allowances to cover the costs of childcare (up to full reimbursement of fees), but they can also benefit from priority access to services[118].

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[111] 'Report from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions on the development of childcare facilities for young children with a view to increase female labour participation, strike a work-life balance for working parents and bring about sustainable and inclusive growth in Europe (the "Barcelona objectives")', COM(2018) 0273 final.

[112] Council Resolution on a strategic framework for European cooperation in education and training towards the European Education Area and beyond (2021-2030), OJ C 66, 26.2.2021, p. 1-21.

[113] See Figures B4 to B8 and Table B9 in Annex B for further information on ECEC enrolment and accessibility.

[114] See Figure B3 in Annex B for correlation between ECEC enrolment and employment impact of parenthood.

[115] See for instance European Commission 2019, Employment and Social Developments in Europe 2019. Sustainable Growth for all: choices for the future of social Europe, Chapter 4.

[116] Lazzari, A., Vandenbroeck, M., Literature Review of the Participation of Disadvantaged Children and families in ECEC Services in Europe. In J. Bennett (Ed.), Early childhood education and care (ECEC) for children from disadvantaged backgrounds: Findings from a European literature review and two case studies, European Commission, Brussels, 2013.

[117] See Table A2 in Annex A.

[118] Eurydice, Key data on early childhood education and care in Europe - 2019 Edition.

Despite the multiple types of support, 'out-of-pocket' (or 'net') costs of ECEC are high in many Member States. Calculations using comparable data on childcare prices show that net costs rise to more than a third of female median earnings in Ireland and Slovakia[119]. Throughout the EU, high fees are the main barrier preventing households with dependent children from placing them in early childhood education and care. The impact of social disadvantage on participation is significant. For example, living in a family at risk of poverty or social exclusion – or merely in the bottom income tertile – significantly reduces odds of enrolment for children under 3, and also, to a smaller extent, for those aged between 3 and minimum mandatory primary school age.

The educational level of parents also makes a difference – children of mothers with a higher educational level are more likely to attend early childhood education and care[120].

3.2. Education and school-based activities

Education is the gateway to breaking the cycle of disadvantage and to giving children better life chances. This is because education supports the development of the personal and social skills essential for future employability, lifelong learning and interpersonal activities. High-quality and inclusive education is proven to improve tolerance, respect for diversity, social integration, cohesion and inclusion. It is also proven to reduce crime, and lead to a cleaner environment and better quality of life. However, data show that family disadvantages and inequalities influence educational outcomes in primary and secondary school. Education systems offer opportunities to reduce social inequalities and exclusion, but they may also widen differences if fairness and quality requirements are not met[121]. It is evident that children in need require additional support to perform well at schools.

School drop-out rates are significantly higher for children with a Roma or a migrant background. They are also significantly higher for children with disabilities or special needs[122]. The share of these vulnerable children is higher among early leavers from education and training who only complete primary education. In addition, significantly fewer vulnerable children finish secondary or especially tertiary education than the population average[123]. The growing number of children with a migrant background in education systems calls for the prevention of segregated school settings and the adaptation of teaching methods.

The structure of education[124] differs greatly among Member States. Tuition-free primary and secondary schools are available everywhere in the EU. However, indirect school-related costs (textbooks, school meals, school trips, uniforms, equipment including digital tools, etc.) remain a significant expense for many families[125]. For instance, in Greece and Croatia more than 80% of income-poor families report facing difficulties in affording the costs of formally free education[126]. Segregation and discrimination also remain a challenge, as does the

[119] OECD, Is Childcare Affordable? Policy brief on employment, labour and social affairs, OECD Publishing, Paris, 2020.

[120] JRC calculations based on 2016 EU-SILC microdata.

[121] SPC advisory report to the European Commission on tackling and preventing child poverty, promoting child well-being, 2012.

[122] See for example the joint Eurydice/Cedefop report 'Tackling early leaving from education and training in Europe', 2015.

[123] 'Progress towards the Common European Objectives in Education and Training. Indicators and benchmarks 2010/2011' Commission Staff Working Document 2011.

[124] For the purpose of this document, the term "education" refers to the system of compulsory schooling (including VET), meant to promote cognitive, intellectual, social, physical, and emotional development of children, tuition-free and financed from public resources. The starting age of compulsory schooling varies between 3 and 7 years, and transition to secondary school takes place between ages of 11 and 16 years.

[125] See Figure A15 in Annex A for further statistics on indirect school-related costs.

[126] Source: EU-SILC ad hoc module on public services 2016, own calculations.

exclusion of some vulnerable children by placing them in 'special' schools[127]. It is necessary to combine more universal actions with targeted measures addressing vulnerable groups of children and young people.

In order to slow down the spread of the COVID-19 virus, Member States shifted in March 2020 to distance learning, which affected around 58 million primary and secondary school children. During physical school closures, home resources and parental involvement in school work have proven to be essential for learning. However, these are not available equally to all children. Across the 21 Member States surveyed by the Commission's Joint Research Centre[128], more than one fifth of fourth grade pupils lack at least two of the four resources needed for successful distance learning (i.e. their own room, reading opportunities, internet access, parental involvement). For children with lower-educated parents the figure is 28%, compared with 10% for those with more highly educated parents. Eurostat data from 2019 indicate that access to broadband internet varies significantly across the EU, ranging from 74% of households for the lowest-income quartile to 97% in the highest-income quartile[129].

On average, children who lack resources and support were already lower performers before the crisis, and these children are likely to have lost further ground during the COVID-19 school closures. Furthermore, the COVID-19 pandemic has also lead to a decrease in the supply of apprenticeship placements. The apprenticeship placements that are still available face new challenges as regards the compensation for the lack of practical work experience by other forms of remote and digital learning. The learning disruptions caused by the COVID-19 crisis are likely to magnify existing educational inequalities and create new challenges, bearing among others on the emotional well-being of pupils. This situation calls for a greater effort to: (i) reduce the number of young people who leave education prematurely and without at least an upper secondary degree; (ii) reduce the number and share of low-achievers; and (iii) ensuring well-being and a positive learning climate at school.

Education is not simply about what happens in the classroom. Play, recreation, sport and cultural activities are also part of education, and these all play a crucial role in building social skills. Many of these activities are organised by schools (either during or outside regular school hours). Unlike classroom-based education, those activities are not always free of charge. Such activities, undertaken together by pupils who attend the same school or in different groups, are an important complement to education and have proved to be especially beneficial for children from disadvantaged backgrounds[130]. In Greece and Croatia, four out of five income-poor families consider indirect school-related costs difficult to afford. The share of children who could not participate in school trips and school events that cost money varied in 2014 from 0.7% in Germany and 0.8% in Finland and Sweden to 22.1% in Greece, 40.3% in Romania and 43.0% in Bulgaria, with the EU-28 average being 7.6%[131].

[127] Programme for International Student Assessment (PISA) and European Union Fundamental Rights Agency.

[128] Blasko, Z., Schnepf, S. V. JRC policy brief 'Educational inequalities in Europe and physical school closures during Covid-19', Publications Office of the European Union, Luxembourg, 2020.

[129] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions 'Digital Education Action Plan 2021-2027. Resetting education and training for the digital age', COM(2020) 624 final, available at https://ec.europa.eu/education/sites/education/files/document-library-docs/deap-communication-sept2020_en.pdf.

[130] See e.g. Catterall, J., Chapleau, R., Iwanaga, J., 'Involvement in the Arts and Human Development: General Involvement and Intensive Involvement In Music and Theatre Arts', 2000.

[131] EU-SILC ad-hoc module on child deprivation, age group 1-15 years.

Although the collected data are not completely comparable, estimated numbers demonstrate that households with dependent children on average spend 1.7% of their budget on education[132]. This share is likely higher in low-income households, indicating the regressive impact of school costs. The record low levels of private expenditure on education in Finland and Sweden result from universal free of charge education systems operating in those Member States, offering also a wide variety of health and social services, free meals and recreational activities. This allows to prevent poverty traps and stigmatisation of children coming from low-income families or in vulnerable situations.

3.3. Healthcare

Various studies point to the existence and persistence of social inequalities in children's health outcomes[133]. Early intervention and prevention are essential. Better outcomes can be achieved by: (i) better access to maternal healthcare; and (ii) better public-health activities (including vaccination promotion, parenting support and child nutrition programmes).

Nearly all Member States ensure, in principle, free access to healthcare for all children, while some offer a free core service with some charges (such as prescription charge in Estonia, or co-payments in France and Slovakia). In only eight of the Member States with a universal free service all children, including those from disadvantaged backgrounds, could effectively access it.[134]

Overall in the EU, 3% of children at risk of poverty suffered from unmet medical needs – more than twice as much as among children living in more affluent families[135]. In Belgium, Bulgaria, Greece, Italy, Cyprus, Portugal and Romania the main reason for unmet medical needs for children was affordability. In addition, children in need more often experience longer waiting times to see a doctor than other children[136].

On access to medical services, two areas seem to be of particular relevance for children in need: orthodontics and ophthalmology (including braces and spectacles/corrective lenses respectively). Member States differ in: (i) the range of services that are covered by basic health insurance; (ii) the timeliness and availability of such services; and (iii) reimbursement limits for these services. Sometimes, there are even differences between regions in the same Member State in these three areas. In general, orthodontics and ophthalmology is better covered for children than for older age groups, but gaps in access for children in need persist due to co-payments or restricted coverage of orthodontic or ophthalmology care from reimbursement schemes[137]. Access to facilities for proper hygiene (for example adequate toilet facilities and menstrual products for girls) is also necessary to prevent negative health consequences and ensure participation of all children in education and all social activities.

A report 'Implementation of the right to health care under the UN Convention on the Rights of the Child'[138] highlighted that certain groups of children are left with insufficient healthcare coverage or without coverage at all. Children living in a country where they had no regular residence status were identified as the most vulnerable group. Access to affordable childhood

[132] See Figure B10 in Annex B.

[133] See for instance: "A broken social elevator? How to promote social mobility", OECD, 2018.

[134] Feasibility study for a child guarantee. Final report.

[135] See Table B13 in Annex B.

[136] ESPN, Inequalities in access to healthcare, 2018.

[137] Respectively in France and Hungary, and in Belgium.

[138] Palm, W., Hernandez-Quevedo, C., Klasa, K., van Ginneken, E., 'Implementation of the right to health care under the UN Convention on the Rights of the Child. Status report for the European Union', European Observatory on Health Systems and Policies, 2017.

vaccination programmes for all children is vital. Vaccination is the main tool for primary prevention of disease. However, several EU countries are facing outbreaks of vaccine-preventable diseases, in particular measles, due to insufficient vaccination coverage rates.

There are significant gaps across the EU in access to mental-health services. The companion report to the 2019 State of Health in the EU[139] identifies mental healthcare as one of the health services in shortest supply, resulting in long waiting lists[140]. Access by patients from disadvantaged backgrounds, including children, is further limited by constraints in the reimbursements of psychotherapy from public health budgets. Around 10-20% of children and adolescents experience mental disorders such as anxiety and depression. Those disorders may severely influence their development, educational attainment and potential to live fulfilling lives. Practices[141] addressing mental health at schools include the fight against stigma, the prevention of depression and suicide, and counselling for LBGT+ young people[142].

3.4. Healthy nutrition

According to European Food Safety Authority, the balanced consumption of protein, carbohydrate, fat, vitamins, minerals and water[143] is key for the physical and mental development of children. According to the World Health Organisation, a child's nutrition is considered adequate if at least one meal per day includes red meat, poultry, fish or plant-based protein source. The consumption of calories needs to: (i) be distributed during the day; (ii) include moderate amounts of fat, sugar and salt; and (iii) include at least 400 g, or five portions, of fruit and vegetables per day[144]. This reduces the risk of non-communicable diseases and plays a critical role in children's healthy development.

Across 25 Member States[145], on average around 22% of children reported that they did not eat breakfast before going to school. This ranged from around 7% in Portugal to around 36% in Austria[146]. Children who reported that they had eaten breakfast before school scored more highly in science than those who had skipped breakfast (10 percentage points higher for boys; 6 for girls). Children who did not eat breakfast were significantly more likely to come from families with a lower socio-economic background[147].

The EU-SILC ad hoc module on child deprivation collected in 2014 provides some information on children's (1-15 years) enforced lack of fruits, vegetables and proteins. The proportion of children living in households lacking these sources of food varied between less than 1% and 40% with an EU average of 4%.[148] Income poverty significantly increases the

[139] Commission Staff Working Document 'State of Health in the EU: Companion Report 2019', SWD(2019)377, available at https://ec.europa.eu/health/state/companion_report_en.

[140] In Sweden the wait time limit for children is 30 days compared to 90 days for adults.

[141] For an EU repository of good practices in health see: https://webgate.ec.europa.eu/dyna/bp-portal/index_search.cfm.

[142] Mental health problems and psychological distress are one important driver of suicide among adolescents. Over 1000 15- 19 year- olds, more than 70% of them boys, died of suicide across EU in 2017. This makes suicide one of the leading causes of death in this age group. OECD 2020, Health at a Glance, https://ec.europa.eu/health/sites/health/files/state/docs/2020_healthatglance_rep_en.pdf, p. 128.

[143] European Food Safety Authority, Dietary reference values, available at http://www.efsa.europa.eu/en/topics/topic/dietary-reference-values.

[144] World Health Organization, 2019, Essential nutrition actions: mainstreaming nutrition through the life-course.

[145] Data were not available for Malta and Romania.

[146] The 2015 edition of the OECD Programme for International Student Assessment (PISA) study included questions asking children aged 15 years old about whether they ate breakfast before school and whether they ate dinner after leaving school.

[147] OECD, 2017, PISA 2015 Results (Volume III), 'Students' Well-Being'. Seein particular Tables III.11.11, III.11.12 and III.11.22.

[148] The EU-SILC ad-hoc module on child deprivation collected in 2014 provides some information on children's (1-15 years) enforced lack of fruits, vegetables and proteins. 'enforced lacks': lacks due to insufficient resources and thus problems of affordability, rather than lacks resulting from choices or lifestyle preferences.

risk of forced lack of nutrients in most Member States, except Austria, Denmark, Finland, Luxembourg and Sweden, where the occurrence of these problems is low for all children.

Most Member States offer targeted food support to pupils entitled to social benefits on grounds of low income or other disadvantage, either in-kind (meals or snacks at schools provided for free or at a lower price), or in the form of financial assistance to their parents (e.g. Germany, France).[149] In order to ensure truly healthy food environments where children grow up, socialise, play, and are educated, aggressive (online) marketing and advertising of alcohol and foods high in fat, salt and sugar need to be substantially reduced. The Commission is planning to prepare an implementation report in 2022 on the Audiovisual Media Service Directive[150], including those on commercial communications on unhealthy food and drinks. The Commission also supports Member States and stakeholders in their effort on food reformulation, marketing reduction and public procurement of foods through a Joint Action on Implementation of Validated Best Practices in Nutrition.

The importance of contribution of school food to child health and development is widely acknowledged; Member States have put in place specific school food policies, which provide either voluntary guidelines or mandatory regulations about what foods and drinks may or should be served in the school setting[151]. In 2014, such policies were mandatory in 14 Member States and voluntary in the remaining 13[152]. The food or nutrient-based standards used for school food provision vary throughout the EU and address i.a. the provision of fresh water or fruits and vegetables, as well as restrictions on soft drinks, deep-fried and processed food products, salt, crisps and savoury snacks and sweet treats. At the nutrient level, most policies highlight appropriate quantities of fat and calories of school meals in relation to the age of children. Overall, the overconsumption of calories, especially due to excess fat and sugar, is of widespread concern.[153] An overview of free school meals provision across the EU is presented in Annex B.

The EU scheme for school fruit, vegetables and milk helps children develop healthy eating habits. It also supports the distribution of food to schoolchildren, from nursery to secondary schools. The scheme also supports educational measures, such as farm visits; school gardens; tasting and cooking workshops; theme days; and games. The total EU budget for the scheme in the period 2017-2023, is EUR 250 million per school year[154].

The experience during the early months of the COVID-19 pandemic demonstrated the importance of school meal schemes for the children at risk of poverty, who suddenly were left with no access to school meals during the lockdown. A survey by Eurochild[155] identified this as a problem in Croatia, Poland, Portugal and Slovenia. This points to weaknesses in reacting to the pandemic, but it also proves the success of meal schemes, which became an important source of food for disadvantaged children as long as schools were open.

[149] Eurydice, 2016, School meals in Europe. Report by the Polish Euridyce Unit. See Table B15 in Annex B.

[150] Directive (EU) 2018/1808 of the European Parliament and of the Council of 14 November 2018 amending Directive 2010/13/EU on the coordination of certain provisions laid down by law, regulation or administrative action in Member States concerning the provision of audiovisual media services (Audiovisual Media Services Directive) in view of changing market realities, (EU) 2018/1808.

[151] European Commission/JRC, 2014, 'School Food and Nutrition in Europe: policies, interventions and their impact', available at https://publications.jrc.ec.europa.eu/repository/bitstream/JRC91433/school%20food%20policy%20workshop%20report%20(online).pdf.

[152] Member States with mandatory policies: Bulgaria, Czechia, Estonia, Greece, France, Croatia, Hungary, Latvia, Lithuania, Romania, Slovenia, Slovakia, Finland and Sweden. European Commission/JRC, 2014, 'Mapping of National School Food Policies across the EU28 plus Norway and Switzerland', available at https://publications.jrc.ec.europa.eu/repository/bitstream/JRC90452/lbna26651enn.pdf.

[153] *Idem.*

[154] For allocations in school year 2020/2021 see Figure B12 in Annex B.

[155] Eurochild, 'Growing up in lockdown: Europe's children in the age of COVID-19', Brussels, 2020.

3.5. Adequate housing

Having a decent home environment is an essential need. Access to affordable and quality housing is one of the main determinants of children's well-being and social participation. In 2019, 9.3% of the EU-27 population lived in households that spent 40% or more of their disposable income on housing (i.e. were considered as facing housing cost overburden).[156] Among households at risk of poverty, this share was 35% across the EU, with as high as 88.2% in Greece, but just 9.2% in Malta (where it strongly increased recently). The incidence of housing cost overburden – as well as of overcrowding – is higher for tenants than for owners.

In most Member States, the risk of **severe housing deprivation** is greatly increased if a person: (i) suffers from income poverty; (ii) lives in a single-parent household; or (iii) has a migrant background[157]. More than one in five (21%) EU children from low-income households live in a dwelling with a leaking roof, damp walls, floors or foundation, or rot in window frames or floor. One in thirteen (7.7%) EU children live in dwellings, which are too dark.

A survey of child material deprivation (2014)[158] showed that 10.2% of EU-28 children (aged 1-15) lived in homes, which could not be kept adequately warm[159]. The respective share varied from 0.8% in Finland and Sweden and 1.0% in Luxembourg to 25.7% in Cyprus, 31.1% in Greece, and 40.6% in Bulgaria. The ability to keep a household adequately warm is linked to **energy poverty** and is often associated with low household income, high energy costs and homes with low energy efficiency.

Children at risk of poverty are also the most affected by **overcrowding**[160]. Over 41% of them live in overcrowded accommodation in EU-27, as opposed to around 17% of children in the whole of the population. In rural areas of some Member States, housing deprivation is mainly due to poor quality of privately owned houses. In urban areas, the insufficient supply of social housing and high market rents lead families to settle for housing in problematic technical conditions or housing that is too small for their needs. Moreover, inadequate housing typically occurs in segregated neighbourhoods, which itself increases the risk of social exclusion. On the other hand, in several Member States the housing conditions have improved markedly during last decade: overall in the EU-27, the share of children living in dwellings without a toilet or with no bath nor shower almost halved. Among children at risk of poverty in Bulgaria, Belgium, Romania the incidence of leaking roofs, damp walls, floors or foundations or rot in window frames or floor decreased by respectively 12.9 pps, 11.2 pps and 9.1 pps. In Slovenia and Poland drops of respectively 11.6 pps and 7.9 pps were recorded on the incidence of living in dwellings considered as too dark. In Romania, Latvia and Bulgaria there has been a significant progress as regards sanitary conditions (having a flushing toilet for the sole use of the household and bath or a shower in the dwelling) – up to 19.4 pps in a decade for the overall child population[161].

[156] Eurostat [ilc_lvho07a], 7.07.2020.

[157] Feasibility study for a child guarantee. Final report, p. 54.

[158] See Figure A2 in Annex A.

[159] The EU-SILC ad-hoc module on child deprivation, see also Commission Recommendation of 14 October 2020 on Energy Poverty, (EU)2020/1563.

[160] The highest incidence of overcrowding among AROP children was recorded in in Romania (79.7%) and in Bulgaria (79.1%). See also Figure B16 in Annex B.

[161] See Figure B18 in Annex B for details.

Housing cost overburden is a significant problem. The price of housing increased faster than incomes in recent years in almost all Member States[162]. In 2019, for approximately 9% of the EU-27 population, housing costs represented more than 40% of disposable household income, which significantly reduces the capacity to cope with all the other needs besides accommodation. Housing cost overburden affects disproportionally children living in income-poor households – for them a risk of housing cost overburden is between three and five times higher that than for the total population of children. The share of children living in households confronted with housing costs overburden was particularly high in Greece, where nearly half (47%) of all children lived in such households, followed by Bulgaria (18%)[163].

The share of publicly administered dwellings in the EU's overall housing stock is generally low[164], which limits the room for manoeuvre for policy interventions aimed at addressing housing deprivation. The policy tools used to influence the housing market include demand-side supports to individuals and households to: (i) facilitate the purchase of a home; (ii) provide support to households in financial distress, or (iii) access subsidised housing or housing in the private rental market (e.g. through housing allowances)[165]. Across the 21 Member States covered by a 2018 OECD survey, government spending on housing allowances relative to GDP was above 0.5% of GDP in only five Member States, with the highest figure (0.89% of GDP) recorded in Finland. It was equal or below 0.10% of GDP in 10 others.

On **homelessness**, ten Member States have specific regulations or requirements for the quality of emergency temporary accommodation if children are present. However, there are differences in the quality of services for homeless children and families. There are also great differences in the regulation and monitoring of these services. Providing children with a stable home is a prerequisite to any additional social or health support which can prevent their situation from deteriorating. Temporary accommodation can be useful to meet immediate housing needs as long as it does not become a long-term solution.

3.6. The territorial dimension

Child exclusion and poverty as well as equality of opportunities have a territorial aspect that must be taken into account when designing and implementing measures to ensure access to key services for children in need.

In most large cities surveyed in a recent report by Eurocities[166], the incidence of child poverty is higher than the national average for a given country. Children living in the most deprived urban areas often accumulate multiple risk factors, such as poor housing, risk of discrimination, violence, and unequal access to services. Several Member States[167] have already designed indicators to identify segregated areas (where there is a high concentration of poverty and exclusion) and provide for targeted measures. These include, for instance, areas in Slovakia with a high density of Roma population.

[162] For further information see Second overview of housing exclusion in Europe, FEANTSA 2017, available at https://www.feantsa.org/download/gb_housing-exclusion-report_complete_20178613899107250251219.pdf.

[163] Feasibility study for a child guarantee. Final report, p. 54.

[164] See Figure B19 in Annex B.

[165] See OECD Affordable Housing Database; information in this indicator summarises existing policy measures as reported by countries responding to the 2019 and 2016 OECD Questionnaire on Affordable and Social Housing.

[166] Eurocities, 2020, Fighting child poverty in European cities. Lessons from cities for the EU Child Guarantee.

[167] E.g. France, Hungary and Slovakia.

In Romania, Bulgaria, Lithuania, Latvia, and Greece, living in a predominantly rural region[168] is linked to a significantly higher risk of poverty or social exclusion than living in cities. The remoteness of some rural communities limits the size of schools and classes. This impacts infrastructure and the educational offer.[169] PISA 2018 shows that the difference in reading performance between pupils attending schools in cities with more than 100 000 inhabitants and pupils attending schools in localities with fewer than 3 000 inhabitants[170] exceeds 100 PISA points in some Member States. This corresponds to a difference of at least 3 years of schooling. The rural gap is even more visible in students' transition to higher levels of education and in the educational expectations that precede their decisions to continue education. The average tertiary education gap between rural areas and cities (i.e. the gap between the percentage of inhabitants with a tertiary education and those without) is more than 20 pps. This gap has been growing in recent years because tertiary educational attainment levels in most Member States are increasing faster in cities than in the rural areas.[171]

4. LEGAL BASIS FOR UNION'S ACTION

Article 3(3) of the Treaty on European Union (TEU) states that it is the Union's aim to: (i) combat social exclusion and discrimination; (ii) promote intergenerational solidarity; and (iii) protect the rights of the child. According to Article 9 of the Treaty on the Functioning of the European Union (TFEU), the Union shall take into account, in defining and implementing its policies and activities: (i) the promotion of a high level of employment; (ii) the guarantee of social protection; (iii) the fight against social exclusion; and (iv) a high level of education, training and protection of human health.

Under Article 151 TFEU, the Union and the Member States have as their objectives inter alia the promotion of: (i) improved living conditions; (ii) proper social protection; and (iii) the development of human resources with a view to lasting high employment and the combating of exclusion. Improving equality of opportunities for all children living in the EU helps to reach those objectives, in particular the last one. Under Article 153 (1)(j) TFEU, the Union supports and complements the activities of the Member States in the field of combatting social exclusion, with a view to achieving the objectives of Article 151.

The Union was also attributed competences in the field of fighting discrimination and as regards complementing national policies in the field of education, training and protection of human health (Articles 19, 165, 166 and 168 TFEU). Further, the Union is also called onto to contribute to social cohesion (Article 174 TFEU).

Article 24 of the Charter of Fundamental Rights of the EU recognises that children are independent and autonomous holders of rights, that children shall have the right to such protection and care as is necessary for their well-being, and makes the child's best interests a primary consideration for public authorities and private institutions. The Charter recognises also the right to education (Article 14), the right to protection of family and professional life

[168] The term "predominantly rural region" forms part of the urban-rural typology. It is defined as NUTS level 3 region, where at least 50 % of the population live in rural grid cells (i.e. those with population density of less than 300 inhabitants per square kilometre, and not a part of an urban cluster).

[169] Echazarra, A., Radinger, T., Learning In Rural Schools: Insights From PISA, TALIS and the Literature, OECD Publishing, Paris, 2019.

[170] Hungary, Romania, Slovakia and Portugal.

[171] European Commission, Education and Training Monitor 2020, p. 45.

(Article 33), right to social security and social assistance (Article 34), right to health care (Article 35), among others[172].

The EU is committed to the United Nations' 2030 Agenda for Sustainable Development and the Sustainable Development Goals. Goal 1 relates to poverty reduction; Goal 2 aims to end hunger, achieve food security and improved nutrition; Goal 3 sets to ensure healthy lives and promote well-being for all ages; Goal 4 encompasses inclusive and equitable quality education; Goal 5 fosters gender equality; Goals 6 and 11 cover housing, calling respectively for ensuring access to sanitation and hygiene, and to make cities and human settlements inclusive, safe, resilient and sustainable; Goal 10 aims at reducing inequalities; Goal 16 has a specific target to end abuse, exploitation, trafficking and all forms of violence against and torture of children.

All EU Member States have ratified the UN Convention on the Rights of the Child (UNCRC), on which Article 24 of the EU Charter of Fundamental Rights is based. The UNCRC states (in Article 3) that in all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration.[173] The UNCRC also recognises that children have the right to: state assistance (Article 18), adequate standard of living (Article 27), education (Article 28), the highest attainable standard of health (Article 24), rest and leisure and to participate freely in cultural life and the arts (Article 31). The provisions of UN Convention on Rights of Persons with Disabilities (UNCRPD), to which both the EU and the Member States are parties, guides policy on children with disabilities.

5. KEY ELEMENTS OF THE PROPOSAL

This chapter provides more details on the origin and context of the Commission proposal for a Council recommendation establishing a European Child Guarantee. It also describes: (i) the objective and scope of the proposal; and (ii) an enabling policy framework that Member States need to put in place to successfully implement the recommendation. Finally, the chapter discusses how this proposal relates to other initiatives relevant for combating social exclusion and ensuring the well-being of children.

5.1. The origin and the context of the European Child Guarantee

The proposal is the result of extensive preparatory work. It is based on a preparatory action requested by the European Parliament and implemented by the Commission to decide on the main aspects of the future initiative. It also takes into account findings of the Commission assessment of the implementation of the 'Investing in Children' recommendation. The proposal reflects the views of stakeholders, including children, expressed during targeted consultations in 2020. It also delivers on the calls from other institutions, including the Council and the European Court of Auditors.

[172] According to its Article 51(1), the Charter applies to Member States only when they are implementing European Union law.

[173] In line with the UNCRC, all persons under 18 years of age are considered children. Therefore, unless otherwise indicated, all data referring to children in this document refer to the 0-17 age group. This approach was followed also in the 'Investing in Children' recommendation.

5.1.1. Assessment of the implementation of the 'Investing in Children' Recommendation

The Commission 'Investing in Children' recommendation was adopted in February 2013. It provides an overall framework for the Commission and EU Member States to develop policies and programmes to promote the social inclusion and well-being of children, especially those in vulnerable situations. It calls on Member States to step up their investment in children, according to a three-pillar approach, which includes: (i) ensuring access to adequate resources, (ii) ensuring access to affordable quality services and (iii) upholding children's rights to participate in play, recreation, sport and cultural activities, as well as in decision-making that affects their lives.

In 2017, the Commission assessed the four years of the implementation the 'Investing in Children' recommendation and published a staff working document.[174] This assessment concluded that the full implementation of the Recommendation was still a work in progress. It said that although the Recommendation received strong support both at national and EU level, including from the European Parliament and civil society, it was still neither well-known nor properly used within the Member States at local level. The assessment also underlined that most Member States agreed that only a comprehensive integrated approach would be an effective strategy capable of breaking the cycle of disadvantage for vulnerable children. In addition, the assessment highlighted that most Member States agreed that it was socially fair and economically sound to invest more in children during the early years and that early childhood education and care was the best way to achieve this. The assessment concluded that much more needs to be done to ensure the effective implementation of the Recommendation.

As an additional monitoring measure, the European Semester economic and employment coordination process, supported by the Social Scoreboard, has highlighted the challenge of child poverty or social exclusion, with a number of Member States receiving related country specific recommendations. The Employment Guidelines underline the importance of ensuring the access of everyone, including children, to certain services, such as early childhood education and care, education and healthcare; with such access serving as a necessary condition for ensuring equal opportunities.

5.1.2. Preparatory actions initiated by the European Parliament

On 24 November 2015, the European Parliament voted for a resolution on reducing inequalities with a special focus on child poverty[175]. The European Parliament called on the Commission and the Member States to introduce a child guarantee so that every child in poverty could access free healthcare, free education, free childcare, decent housing and adequate nutrition.

Subsequently, the European Parliament asked the Commission to implement a preparatory action to lay down an implementation framework for such a child guarantee in accordance with the 'Investing in Children' recommendation. The European Parliament suggested that the Commission also take into account the European Pillar of Social Rights and the broader United Nations Sustainable Development Goals.

[174] Commission Staff Working Document 'Taking stock of the 2013 Recommendation on "Investing in children: breaking the cycle of disadvantage"', SWD(2017) 258 final.

[175] European Parliament resolution of 24 November 2015 on reducing inequalities with a special focus on child poverty, 2014/2237(INI).

In response, the Commission explored the potential scope of a child guarantee by examining the feasibility and conditions for implementing such a scheme (the so-called Phase I of the preparatory action). A feasibility study was commissioned[176], focusing on four specific groups of socially vulnerable children that are known to be particularly exposed to poverty and risks to their well-being: children residing in institutions, children with disabilities, children with a migrant background (including refugee children) and children living in a precarious family situation. The study then analysed the feasibility of guaranteeing these four categories of children access to the following five services: free healthcare, free education, free early childhood education and care, adequate housing and healthy nutrition.

The study, published in March 2020, concluded that access by these four categories of children to the five services should indeed be improved. Failure to ensure this access could have short- and long-term consequences for children themselves, but also for society. Furthermore, the study argued that mainstream services also need to be inclusive to ensure that children in need benefit fully and avoid stigma and segregation. Although ensuring access to the services would be an important effort in tackling child poverty, the study said that this effort would need to be placed within a broader and more comprehensive approach, as set out in the 'Investing in Children' recommendation. Finally, the study argued that EU funds had considerable potential to play a more effective and strategic role in supporting access to the five services.

Phase II of the preparatory action examined a possible policy and financial impact of a child guarantee via a study entitled "The economic implementing framework of a possible EU Child Guarantee scheme including its financial foundation"[177]. It explored the costs and benefits of a guarantee to children at risk of poverty to have access to the five services mentioned above. Main conclusion of that study are presented in Chapter 8 of this Staff Working Document.

Phase III of the preparatory action is dedicated to conducting experimental projects in selected EU Member States to test in practise the results of the previous two phases. The Commission, in partnership with UNICEF, tests on the ground through pilot projects in Bulgaria, Croatia, Greece, and Italy, and researches on policy frameworks in Germany, Lithuania, and Spain. The outcomes of the phase III will provide a valuable input to the implementation phase of this proposal.

On 11 March 2021, the European Parliament adopted a resolution on the EU Strategy on the Rights of the Child[178]. The document calls for concrete measures to invest in children in order to eradicate child poverty, including through establishment of a European Child Guarantee with appropriate resources. The Parliament calls on the Member States to invest all possible resources in the implementation of the European Child Guarantee, including EU funds such as the European Social Fund Plus (ESF+), Recovery Assistance for Cohesion and the Territories of Europe (ReactEU), the Recovery and Resilience Facility, the European Regional Development Fund (ERDF), InvestEU, Erasmus+ and the Asylum and Migration Fund (AMF).

[176] Feasibility study for a child guarantee. Final report.

[177] Study on the economic implementing framework of a possible EU Child Guarantee Scheme including its financial foundation. Final Report.

[178] European Parliament resolution of 11 March 2021 on children's rights in view of the EU Strategy on the rights of the child, 2021/2523(RSP).

5.1.3. Calls from other EU institutions

In its conclusions of 8 June 2020 'Demographic Challenges – the Way Ahead'[179], the Council invited the Commission to deliver in a timely manner a proposal for the European Child Guarantee.

In its Special Report 20/2020 on child poverty of 29 September 2020[180], the European Court of Auditors highlighted that the Commission needed to better target its support for Member States actions to combat child poverty. It also recommended that the Commission: (i) include child poverty in the European Pillar of Social Rights Action Plan; and (ii) ensure that the necessary steps have been completed to prepare the European Child Guarantee.

Reacting to the Special Report, the Council called on the Commission to: (i) include actions and objectives to tackle child poverty in its future initiatives, among others under the European Semester; and (ii) complete the necessary steps and information gathering to prepare the European Child Guarantee.

A Joint Declaration 'Overcoming poverty and social exclusion – mitigating the impact of COVID-19 on families working together to develop prospects for strong children' was signed in December 2020 by 24 ministers of the Employment, Social Policy, Health and Consumer Affairs Council. This declaration welcomed the upcoming European Child Guarantee as a crucial opportunity to invest more – and more effectively – in preventing and reducing child poverty in Europe, which is a key driver of social exclusion. The ministers' declaration states that the European Child Guarantee should be based on the principles and integrated approach of the 'Investing in Children' recommendation and of the European Pillar of Social Rights. The declaration flagged the access to the following services as essential for children at risk of poverty or social exclusion: (i) free healthcare; (ii) free education; (iii) affordable early childhood education and care; (iv) decent housing; and (v) adequate nutrition.

In May 2020, the Council called for equal opportunities for all young people regardless of obstacles, including geographical challenges, in its conclusions on Raising Opportunities for Young People in Rural and Remote areas[181].

5.1.4. Consultation process

The consultation process in July to November 2020 made it possible to collect information on the challenges facing: (i) national or local administrations; (ii) providers of services for children; and (iii) civil society. The consulted stakeholders confirmed that there were gaps in the current provision of services at the national level, which could be addressed through actions at the EU level.

At the Commission's request, UNICEF, Eurochild, Save the Children, World Vision and Child Fund Alliance conducted a joint consultation on the EU Strategy on the Rights of the Child 2021-2024 and the European Child Guarantee. The five organisations developed together a questionnaire that was answered by approximately 10 000 children in the EU and beyond. The main findings of this consultation dealt with: (i) the discrimination and exclusion faced by children; (ii) children's unmet expectations at school; (iii) violent episodes in children's lives; and (iv) the lack of consideration of children's points of view. The outcome called for the European Child Guarantee to focus on concrete and effective

[179] Council Conclusions on Demographic Challenges – the Way Ahead, 8668/20.

[180] European Court of Auditors Special Report 20/2020 Combating child poverty – Better targeting of Commission support required.

[181] Conclusions of the Council and of the Representatives of the Governments of the Member States meeting within the Council on Raising Opportunities for Young People in Rural and Remote areas, 8265/20.

measures to ensure equal treatment of all children, with particular attention to children in vulnerable situations, and equal access to quality and affordable education for all children, from early childhood education and care to secondary education. The results are available in report 'Our Europe, Our Rights, Our Future'[182].

A detailed overview of the wide consultation process with stakeholders can be found in Annex C.

5.2. The objective and scope of the European Child Guarantee

The proposed Recommendation has as its objective to prevent and combat social exclusion by guaranteeing access of children in need to a set of key services. In doing so, the Recommendation will contribute to fostering equal opportunities for children in need and combating child poverty.

With a view to achieving this objective, the proposal recommends Member States to:

(1) guarantee for children in need effective and free access to early childhood education and care, education and school-based activities, at least one healthy meal each school day and healthcare;
(2) guarantee for children in need effective access to healthy nutrition and adequate housing.

An ample body of evidence clearly shows that children in need across the EU often lack full access to the services covered by this proposal. The extent to which children experiencing various kinds of disadvantage have access to these services differs widely across the EU.

By focusing on children in need the proposal is expected to have greater impact and added value than the existing initiatives and instruments. The specific targeting of the initiative is also consistent with the EU's commitment to 'leave no one behind'. The approach set out in the proposal will allow for adjusted and tailor-made solutions according to the specific situations faced by different groups of children in need in each Member State. The precise identification, targeting and actions for children in need would be left to the Member States, based on their national, regional and local specificities.

In this context it is important to emphasise that Member States are expected to continue developing their universal policies for all children, in line with the 'Investing in Children' recommendation.

Ensuring access to the key services on its own is not sufficient, as the services need to be truly inclusive and of high quality to fully benefit all children in vulnerable situations. The evidence shows that although these service may be free, accessing them can sometimes involve additional costs, which can act as barriers to children in need. The proposal therefore stresses the importance of the **effectiveness of access**. Effectiveness of access should be understood as: (i) service availability, affordability, and quality; (ii) the timeliness of its provision; and (iii) whether the potential users of a service are aware of its existence and of their entitlement to use it.

However, even guaranteeing effectiveness of access may not be enough for the most vulnerable. Affordability is a relative concept and for many families living in poverty even

[182] 'Report "Our Europe, Our Rights, Our Future". Children's and young people's contribution to the new EU Strategy on the Rights of the Child and the Child Guarantee', available at https://www.unicef.org/eu/reports/report-our-europe-our-rights-our-future.

moderate fees can be a barrier. Therefore, the proposal recommends making access to certain services **effective and free of charge:** early childhood education and care; education and school-based activities; a healthy meal at school; and healthcare. The selection of services to be provided free of charge follows on the calls from the European Parliament, and other stakeholders.

5.3. Enabling policy framework

From the experience in implementing the 'Investing in Children' recommendation, it is clear that the European Child Guarantee on its own will not be sufficient to address social exclusion of children.

The specific actions to be taken under the European Child Guarantee will be important on their own. However, to be fully effective **these actions must be placed in a broader enabling policy framework addressing the multi-dimensional nature of social exclusion**. The evidence shows that the Member States that are most successful in ensuring that children in need have access to key services have a comprehensive range of policies in place. This comprehensive range of policies sits alongside a strategic and a well-coordinated approach encouraging integrated interventions at national, regional and local levels. At the EU level, it is the European Pillar of Social Rights and its action plan that provide for this comprehensive framework.

Lack of income and sufficient resources to live in dignity, inadequate access to key services, labour market exclusion and poor quality work are the primary causes of social exclusion. Providing solutions to these problems demands integrated approaches that cut across all relevant policy domains. It also requires better coordination between macro- and microeconomic policies and emphasising the crucial role of policy areas outside the traditional remit of social-inclusion policies. The proposal: (i) recognises the need to fight exclusion across the policy spectrum; (ii) encourages Member States to ensure the consistency of social, education, health, nutrition and housing policies at national, regional at local level; and (iii) encourages Member States to make these policies more relevant for supporting all children, and in particular children in need.

As shown in Chapter 3.6, poverty or social exclusion tends to be greater in remote, rural, deprived urban or segregated areas. These areas face a number of specific economic and structural challenges, such as: (i) fewer employment opportunities; (ii) low income levels; (iii) low levels of education; (iv) poor quality infrastructure; and (v) limited access to services. The proposal advises Member States to address the territorial dimension of social exclusion by focusing on the specific needs of children from deprived urban, rural, remote, and segregated areas, based on an integrated and multidisciplinary approach.

The challenges faced by children in need and their families are often many and complex. However, the delivery of services to these children and families is often fragmented and there is a lack of coordination and cooperation among service providers. The proposal therefore encourages Member States to put in place effective arrangements in order to ensure the coordinated and integrated delivery of services at all levels of administration. Ensuring that services are developed and delivered in an equal and inclusive manner is essential to avoid stigmatisation and segregation. It is also important that these services make particular efforts to reach out to the children and families who are most in need.

The proposal recognises that labour market situation of parents is the most important determinant of the material situation in which children grow up. This confirms a critical role

of policies supporting parents' or guardians' access to a decent income, either through labour market integration or through income support.

5.4. Relation to other Commission initiatives

The proposal stems from the **European Pillar of Social Rights** and its action plan and forms part of a broader framework for combatting poverty or social exclusion. It will contribute to achieving the target of lifting 15 million people, including 5 million children, out of poverty or social exclusion by 2030 put forward in the European Pillar of Social Rights Action Plan.

The proposal complements the **EU Strategy on the Rights of the Child**, which pools existing and future initiatives of the Commission on children's rights under one coherent policy framework, both in internal and external action. The strategy will ensure further mainstreaming of children's rights throughout all Commission portfolios. It will strengthen the Commission's work in the following fields: (i) child participation in the EU's political democratic life; (ii) socio-economic inclusion, education and health; (iii) combating violence against children and ensuring child protection; (iv) child friendly justice; (v) digital and information society; and (vi) the global dimension. The section on socio-economic inclusion is directly aligned with the European Child Guarantee. One of the aims of the strategy is to combat any discrimination of children, including on the grounds of their sex or sexual orientation – or that of their parents. The strategyaims to bring together all new and existing EU legislative, policy and funding instruments within one comprehensive framework.

The European Child Guarantee is also complementary to the **Strategy for the Rights of Persons with Disabilities 2021-2030**[183]. The strategy aims at fostering social and economic inclusion of persons with disabilities in society and full respect of their rights, encompassing also the needs of children with disabilities.

The proposal is consistent with the Council **Recommendation on High-Quality Early Childhood Education and Care Systems,** adopted on 22 May 2019[184]. Furthermore, it follows the Commission Communication 'Achieving a European Education Area by 2025', which was adopted on 30 September 2020[185], and informed the Council Resolution of 19 February 2021 on a **strategic framework for European cooperation in education and training towards the European Education Area and beyond (2021-2030)[186].** The Resolution has improving quality, equity, inclusion and success for all in education and training as one of its strategic priorities and sets the EU targets for: (i) the participation rate in early childhood education and care among children between 3 years old and the starting age for compulsory primary education at 96%[187]; and (ii) the share of early leavers from education and training at under 9%.

On 5 March 2020, the Commission adopted a **Gender Equality Strategy 2020-2025**[188]. Among other things, the strategy aims to counter gender stereotypes affecting the wellbeing and opportunities of girls and boys in all their diversity from an early age. It also announces

[183] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions 'Union of Equality: Strategy for the Rights of Persons with Disabilities 2021-2030', COM(2021) 101 final.

[184] Council Recommendation of 22 May 2019 on High-Quality Early Childhood Education and Care Systems, 2019/C 189/02.

[185] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions on achieving the European Education Area by 2025, COM(2020) 625 final.

[186] Council Resolution on a strategic framework for European cooperation in education and training towards the European Education Area and beyond (2021-2030), 2021/C 66/01.

[187] See Figures and Tables B2 to B8 in Annex B for further information on ECEC.

[188] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions 'A Union of Equality: Gender Equality Strategy 2020-2025', COM(2020) 152 final.

the revision of the Barcelona targets for participation in early childhood education and care. The Strategy also promotes women's economic empowerment and the equal sharing of unpaid care work, including caring for children, between women and men. As long as women continue to carry a disproportionate responsibility for bringing up children, the objectives of gender equality and children's social inclusion will continue to be closely interconnected.

On 1 July 2020, the Commission issued communication 'Youth Employment Support: a Bridge to Jobs for the Next Generation'[189] and a proposal for Council **recommendation 'A Bridge to Jobs – Reinforcing the Youth Guarantee'**, which the Council adopted on 30 October 2020[190]. The recommendation seeks to ensure that all young people under the age of 30 receive a good quality offer of employment, continued education, an apprenticeship or a traineeship within four months of becoming unemployed or leaving formal education.

On 19 September 2020, the Commission adopted an **EU anti-racism action plan 2020 - 2025**[191]. The action plan envisages combating racism through policy and funding programmes in the areas of employment, housing and access to healthcare and education. It promotes actions to ensure that: (i) children with a minority racial or ethnic background have equal access to education; and (ii) teachers are trained to work with all children and be sensitive to the needs of pupils from different backgrounds. It also envisages a Commission report on the application of the EU Racial Equality Directive, which prohibits discrimination based on ethnic or racial origin, including discrimination of Roma children, in different areas such as education and social protection.

On 30 September 2020, the Commission adopted a Communication entitled '**Digital Education Action Plan 2021-2027: Resetting education and training for the digital age'**[192], which presents an ambitious vision for digital education in a lifelong learning perspective with the inclusion of all learners across all ages at its core.

On 7 October 2020, the Commission adopted **the EU Roma strategic framework for equality, inclusion and participation**[193]. It consists of a Communication and a proposal for a **Council Recommendation on Roma equality, inclusion and participation**, which was adopted by the Council on 12 March 2021[194]. The Recommendation calls on Member States to fight multiple and structural discrimination against Roma, in particular against Roma children, and to take stronger measures that support Roma children and their families in the interrelated fields of employment, social services, quality, inclusive mainstream education and early childhood education and care, health, housing and access to essential services, nutrition and access to leisure activities.

On 14 October 2020, the Commission adopted a Communication **"A Renovation Wave for Europe - greening our buildings, creating jobs, improving lives"**[195], based on a principle

[189] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions 'Youth Employment Support: a Bridge to Jobs for the Next Generation', COM/2020/276 final.

[190] Council Recommendation of 30 October 2020 on 'A Bridge to Jobs – Reinforcing the Youth Guarantee and replacing the Council Recommendation of 22 April 2013 on establishing a Youth Guarantee 2020/C 372/01', 2020/C 372/01.

[191] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions 'A Union of equality: EU anti-racism action plan 2020-2025', COM(2020) 565 final.

[192] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions 'Digital Education Action Plan 2021-2027. Resetting education and training for the digital age', COM(2020) 624 final.

[193] Communication from the Commission to the European Parliament and the Council 'A Union of Equality: EU Roma strategic framework for equality, inclusion and participation', COM(2020) 620 final.

[194] Council Recommendation of 12 March 2021 on Roma equality, inclusion and participation, 2021/C 93/01.

[195] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions 'A Renovation Wave for Europe - greening our buildings, creating jobs, improving lives', COM(2020) 662 final

of affordability of the renovated housing and its accessibility – thus contributing to the goal of guaranteeing decent housing to children in need especially through the Commission Recommendation on Energy Poverty[196].

On 12 November 2020, the Commission adopted the **LGBTIQ Equality Strategy 2020-2025**[197], which presents measures to promote inclusion and combat discrimination against LGBTIQ persons and their families, including children.

On 24 November 2020, the Commission adopted an **action plan on integration and inclusion 2021-2027**[198], which covers migrants and EU citizens with a migrant background. The action plan focuses on the enabling factors essential for a successful integration and inclusion: (i) education and training; (ii) employment and skills; and (iii) health and housing. The action plan also pays particular attention to children of migrants and EU citizens with a migrant background.

On 16 December 2020, the European Parliament formally adopted the revised **Drinking Water Directive**[199]. Its objective is to protect human health from adverse effects of any contamination of water intended for human consumption by ensuring that it is wholesome and clean. In the context of the European Child Guarantee, the directive has relevance to adequate housing and healthy nutrition.

On 3 February 2021, the Commission adopted the **Europe's Beating Cancer Plan**[200], putting childhood cancer under the spotlight. One of the flagship initiatives of the plan is to launch the 'Helping Children with Cancer Initiative' to ensure that children have access to rapid and optimal detection, diagnosis, treatment and care. The Europe's Beating Cancer Plan will also reinforce and develop new policies and legislation to help create a 'Tobacco-Free Generation' where less than 5% of the population uses tobacco by 2040, compared to around 25% today.

To increase vaccination coverage rates among children, the Commission will step-up the implementation of the Council Recommendation to strengthen EU cooperation on vaccine-preventable diseases[201]. The Commission will, in addition, support three large research and innovation actions to address low vaccine uptake and concerns about vaccinations among parents and health-care professionals, and ultimately improve vaccination coverage particularly among children and young adults.

Fighting early leaving from education and training has been high on the EU political agenda for the last decade. The headline target to reduce the number of early leavers from education and training in Europe to less than 10% was established in 2010 as part of the Europe 2020 Strategy[202]. After the adoption of the Strategy, the Commission developed a set of policy documents[203], leading to the adoption of the Council Recommendation on policies to reduce

[196] Commission Recommendation of 14 October 2020 on Energy poverty, (EU) 2020/1563.

[197] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions 'Union of Equality: LGBTIQ Equality Strategy 2020-2025', COM(2020) 698 final.

[198] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions 'Action plan on Integration and Inclusion 2021-2027', COM(2020) 758 final.

[199] Directive (EU) 2020/2184 of the European Parliament and of the Council of 16 December 2020 on the quality of water intended for human consumption (recast).

[200] Communication from the Commission to the European Parliament and the Council 'Europe's Beating Cancer Plan', COM(2021) 44 final.

[201] Council Recommendation of 7 December 2018 on strengthened cooperation against vaccine-preventable diseases, 2018/C 466/01.

[202] Communication from the Commission 'EUROPE 2020 A strategy for smart, sustainable and inclusive growth', COM(2010) 2020 final.

[203] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions 'Tackling early school leaving: a Key contribution to the Europe 2020 agenda' COM(2011) 18 final, and Commission Staff Working Paper 'Reducing early school leaving Accompanying document to the Proposal for a Council recommendation on policies to reduce early school leaving', SEC(2011) 96 final.

early school leaving in 2011[204], which sets out a framework for coherent, comprehensive, and evidence-based policies. Policy cooperation in the framework of the Open Method of Coordination has promoted exchange of practices and elaboration of policy guidance[205], investment in research and development and a special focus on early leaving from education and training in the EU programmes, in particular the European Structural and Investment Funds and Erasmus+. An online European Toolkit for Schools has also been developed[206].

In a wider policy context, the EU has also put forward a number of initiatives to address the main driver of child poverty: the employment status of parents. For example, the EU has put forward a number of initiatives including: (i) the Commission Recommendation on the active inclusion of people excluded from the labour market[207]; (ii) the Council Recommendation on the integration of the long-term unemployed into the labour market[208]; (iii) the Directive on work-life balance for parents and carers[209]; (iv) the Council Recommendation on access to social protection[210]; (v) the new Skills Agenda[211]; (vi) the European instrument for temporary support to mitigate unemployment risks in an emergency (SURE)[212]; and (vii) the Commission proposal for a Directive on adequate minimum wages[213].

6. THE USE OF EU FUNDS TO COMBAT CHILD POVERTY AND SOCIAL EXCLUSION

EU funding instruments have been supporting a wide range of actions that contribute to tackling and preventing child poverty and social exclusion. These include: (i) investment in early childhood education and care; (ii) community support and active inclusion measures for parents; (iii) housing support for severely disadvantaged communities and children; (iv) educational support; (v) after-school activities; and (vi) the transition from institutional to family- and community based care.

This chapter describes how EU funds contributed to the fight against child poverty or exclusion in the previous programming period. It also examines how those funds can support the future implementation of the European Child Guarantee.

6.1. The 2014-2020 programming period

In the 2014-2020 programming period, the European Structural and Investment Funds[214] supported a number of policy measures, including: (i) tackling child poverty and exclusion;

[204] Council Recommendation of 28 June 2011 on policies to reduce early school leaving, 2011/C 191/01.

[205] European Commission, 'Schools policy. A whole school approach to tackling early school leaving', Publications Office of the European Union, Luxembourg 2015.

[206] See https://www.schooleducationgateway.eu/en/pub/resources/toolkitsforschools.htm.

[207] Commission Recommendation of 3 October 2008 on the active inclusion of people excluded from the labour market, 2008/867/EC.

[208] Council recommendation of 15 February 2016 on the integration of the long-term unemployed into the labour market, 2016/C 67/01.

[209] Directive (EU) 2019/1158 of the European Parliament and of the Council of 20 June 2019 on work-life balance for parents and carers and repealing Council Directive 2010/18/EU.

[210] Council Recommendation of 8 November 2019 on access to social protection for workers and the self-employed, 2019/C 387/01.

[211] Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions 'European Skills Agenda for sustainable competitiveness, social fairness and resilience', COM(2020) 274 final.

[212] Council Regulation (EU) 2020/672 of 19 May 2020 on the establishment of a European instrument for temporary support to mitigate unemployment risks in an emergency (SURE) following the COVID-19 outbreak.

[213] Proposal for a Directive of the European Parliament and of the Council on adequate minimum wages in the European Union, COM/2020/682 final.

[214] 'European Structural and Investment Funds' - 'ESI Funds are the European Regional Development Fund (ERDF), the European Social Fund (ESF) and the Cohesion Fund, with the Fund for rural development, namely the European Agricultural Fund for Rural Development

(ii) work-life balance; (iii) shift from institutional to family- and community-based services; (iv) quality mainstream education; and (v) care services. The 'Investing in Children' recommendation was meant to inform the funding priorities for cohesion policy and leverage more funding opportunities from EU funding for children and their families.

The European Social Fund[215] (ESF) was used for numerous actions supporting children[216], including those most in need. Human capital development and a more inclusive society were the key drivers of ESF investment in children and intervention to break the cycle of disadvantage. The relevant actions can be divided into three broad categories: (i) inclusive education and training operations; (ii) work-life balance and childcare operations; and (iii) other inclusive services, including a wide range of social services, deinstitutionalisation and the shift from institutional to community-based care, as well as material support to vulnerable children.

The funding from the European Regional Development Fund[217] (ERDF) was used to support investments in equipment and social infrastructure, such as: (i) early childhood education and care; (ii) out-of-school care; (iii) inclusive education; (iv) healthcare; (v) housing and shelters for victims of domestic violence; and (vi) the regeneration of deprived neighbourhoods. Alongside the ESF, the ERDF also financed deinstitutionalisation and the shift away from the institutional care of children to community-based care. The ERDF also supported Interreg cross-border cooperation projects, such as on the protection across borders of children in need or subject to violence. In addition, the ERDF tested new ways to resolve legal obstacles in border regions in order to support access to cross-border services for children.

The European Agricultural Fund for Rural Development[218] (EAFRD) supported investments in the setting up, improvement or expansion of local basic services for the rural population, such as early childhood education and care, educational activities, and healthcare services.

The 2014-2020 Fund for European Aid to the Most Deprived[219] (FEAD) was also at Member States' disposal to provide food, material assistance and social inclusion activities to deprived children. FEAD offered in-kind support to children and their families, which often were accompanied by social inclusion measures addressing in an integrated manner various aspects of poverty.

Several EU-funded programmes focused on actions aimed to protect and promote the rights of the child, such as actions under the Rights, Equality, Citizenship and Values programme[220], which funds direct management projects to promote and protect the rights of the child, including for children from disadvantaged backgrounds. Calls for proposals in the past have covered areas such as integrated child protection systems and alternative care or the protection of children in migration. Under the Asylum Migration and Integration Fund and Internal Security Fund, EU funds were made available to protect children in migration,

(EAFRD), and for the maritime and fisheries sector, namely measures financed under shared management in the European Maritime and Fisheries Fund (EMFF). See Regulation (EU) No 1303/2013.

[215] Regulation (EU) No 1304/2013.

[216] For examples, see the ESF website.

[217] Regulation (EU) No 1301/2013 of the European Parliament and of the Council of 17 December 2013 on the European Regional Development Fund and on specific provisions concerning the Investment for growth and jobs goal and repealing Regulation (EC) No 1080/2006.

[218] Regulation (EU) No 1305/2013 of the European Parliament and of the Council of 17 December 2013 on support for rural development by the European Agricultural Fund for Rural Development (EAFRD) and repealing Council Regulation (EC) No 1698/2005.

[219] Regulation (EU) No 223/2014 of the European Parliament and of the Council of 11 March 2014 on the Fund for European Aid to the Most Deprived.

[220] With total budget of EUR 439.5 million over the period 2014-2020, see Single Electronic Data Interchange Area (SEDIA) for details.

including by protecting them from trafficking. The Asylum, Migration and Integration Fund was also used to improve adaptation of services for migrant children and children with a migrant background.

The Erasmus+ programme[221] supported the training and further professionalization of staff working in early childhood education and care and in education. It also funds projects seeking to improve quality in those sectors.

The Employment and Social Innovation[222] (EaSI) programme promoted social innovation while: (i) paying particular attention to vulnerable groups; (ii) combating discrimination; (iii) promoting adequate social protection; and (iv) fighting poverty. The EaSI carried out this work by engaging organisations across Europe. The EaSI innovative projects are meant to be scaled-up through further EU funding, such as the ESF, or national schemes.

The research and innovation framework programme Horizon 2020 has funded – and will continue funding until 2024 – numerous research projects on children in areas such as: (i) social inclusion; (ii) education; (iii) inequalities; (iv) integration of migrant children; and (v) mental health and wellbeing of children and adolescents.

In 2017-2020, the Structural Reform Support Programme provided technical support to implement Member States' reforms aimed at: (i) increasing the quality of early childhood education and care and preventing early school leaving; (ii) making education systems more inclusive; (iii) supporting deinstitutionalisation of children; (iv) improving access to services for children with disabilities; (v) fostering social integration of migrant and ethnic minority children; (vi) increasing the child-friendliness of national justice systems; and (vii) reviewing family protection legislation, to meet the evolving needs of all types of families.

6.2. The 2021-2027 programming period

Building on all these experiences, the cohesion policy funds, in particular the European Social Fund Plus (ESF+) and the ERDF will continue to support employment, education and social policies in the next multiannual financial framework 2021-2027. Under this framework, all Member States will allocate at least 25% of their ESF+ resources to social inclusion. Member States where the risk of poverty or social exclusion among children is above the EU average for the years 2017 – 2019 (i.e. above 23.4%,) will earmark at least 5 % of their ESF+ share to measures for tackling child poverty, while all other Member states have an obligation to programme an appropriate amount. Investments in the relevant actions under the specific objectives on inclusion will be counted against the 25% earmarking, except when programmed under the specific objective on education. In addition, Member States can invest in: (i) actions to tackle food or material deprivation; and (ii) accompanying measures for children under the relevant specific objective of ESF+. If they invest in these two areas, this will be counted against the 3% that they are required to spend to address material deprivation.

On financing the Youth Guarantee (which is addressed to people aged over 15), Member States must devote at least 12.5% of their ESF+ resources to support young people not in education, employment or training if the percentage of their population accounted for by this group was above the EU average in 2017-2019, as well as in outermost regions. All other

[221] Regulation (EU) No 1288/2013 of the European Parliament and of the Council of 11 December 2013 establishing 'Erasmus+': the Union programme for education, training, youth and sport and repealing Decisions No 1719/2006/EC, No 1720/2006/EC and No 1298/2008/EC.

[222] Regulation (EU) No 1296/2013 of the European Parliament and of the Council of 11 December 2013 on a European Union Programme for Employment and Social Innovation ("EaSI") and amending Decision No 283/2010/EU establishing a European Progress Microfinance Facility for employment and social inclusion.

Member States must dedicate an appropriate amount to people not in education, employment or training. Support for social innovation with a focus on vulnerable groups will continue in 2021-2027 through both the EaSI and the shared management strand of the ESF+.

The programming of Union funds for 2021-2027 should continue to address some of the gaps identified in the country-specific recommendations during the European Semester process. With this purpose in mind, the country reports of the 2019 European Semester[223] have identified (in Annexes D) some priority areas to make the best use of those funds, also taking into account regional disparities. Several priorities closely relate to the services covered by the European Child Guarantee, such as: (i) access to early childhood education and care and inclusive education; (ii) the transition from institutional to family- and community-based services; and (iii) access to quality and affordable social and healthcare services. Furthermore, for the purposes of the European Child Guarantee, the following policy lines from the 2014-2020 period will still hold in 2021-2027:

- Comprehensive actions to foster the inclusion of marginalized children with particular attention to those with disabilities, with a migrant background, or from marginalised Roma communities.
- The shift from institutional to community/family-based care, including prevention of institutionalisation
- Providing access to quality and non-segregated, inclusive education for marginalised children, including children of Roma ethnicity and children with disabilities, and children with a migrant background
- Improving access to quality and non-segregated childcare, and to educational, social and healthcare services.

The actions supporting the European Child Guarantee may also be included in the 'social window' of InvestEU programme, which is meant to provide the EU with long-term funding, crowding in private investments in support of a sustainable recovery and helping build a greener, more digital and more resilient European economy[224]. This instrument is demand-based and thus its resources would be allocated further to the submission of eligible requests.

In the 2021-2027 programming period, the ERDF investments will address the needs of the children, aiming to ensure: (i) equal access to inclusive and quality education; (ii) socioeconomic integration of marginalised communities, including Roma, and children with a migrant background; (iii) equal access to healthcare, in particular primary care services; (iv) transition from institutional to family- and community-based care; (v) investment in housing for low-income households, people with special needs and above-mentioned vulnerable groups. When investing in social infrastructures ERDF funding should not be used to build institutional care settings, and infrastructures for segregated/parallel services. In addition, the ERDF will continue to support cooperation projects in these fields, in particular under the Interreg-specific objective of better cooperation governance. Projects can include promoting legal and administrative cooperation, as well as cooperation between citizens, civil society actors and institutions, in particular, with a view to resolving legal and other obstacles in border regions and by building up mutual trust across borders.

[223] See https://ec.europa.eu/info/publications/2019-european-semester-country-reports_en.
[224] Regulation of the European Parliament and of the Council of 12 March 2021 establishing the InvestEU Programme and amending Regulation (EU) 2015/1017.

The Regulation for the Asylum and Migration Fund stresses the need to support "measures targeting vulnerable persons and applicants for international protection with special reception or procedural needs, including measures to ensure effective protection of children in migration, in particular those unaccompanied" as well as "integration measures implemented by local and regional authorities and civil society organisations". These measures can benefit from a 90% EU co-financing rate. The Asylum and Migration Fund interventions may be used to:

- target vulnerable persons and applicants for international protection with special reception or procedural needs;
- develop specific measures to ensure effective protection of children in migration, in particular unaccompanied minors;
- invest in integration programmes focusing on inclusive education and care;
- provide alternative forms of care, integrated into existing child protection systems; and
- contribute to guarantee effective protection of children in migration, such as providing appropriate housing for, and a timely appointment of guardians to, all unaccompanied minors.

In addition, through the 'thematic facility', 36.5% (EUR 3.6 billion) of the envelope of the Fund will be distributed throughout the implementation period to address particular needs. This offers increased flexibility to address the additional gaps, provided they fall within the scope of the Asylum and Migration Fund.

The Erasmus+ Regulation provides for an increased budget of EUR 30 billion. It has the general objective of supporting the educational, professional and personal development of people in education, training, youth activities and sport through lifelong learning. In the future programme special attention will be paid to make Erasmus+ more inclusive by ensuring the outreach to people with fewer opportunities. Key action 3 "Support to policy development and cooperation" could lead to actions to improve cooperation between schools and educational institutions in order to strengthen inclusive education.

Throughout the period 2021-2017, the Technical Support Instrument, which succeeds the Structural Reform Support Programme, will support Member States, at their request, in designing, preparing and implementing structural reforms in such areas as education, social services, justice and health, including cross-sectoral reforms tackling child poverty and exclusion.[225] The Commission stands ready to provide demand-driven technical support to facilitate reforms through capacity building, stakeholder consultations, review and analysis of legislation, policy frameworks and institutional set-ups, provision of concrete proposals for new models, or piloting and action planning.

The Recovery and Resilience Facility (RRF) can also support some of the actions covered by the European Child Guarantee. In particular, Pillar 6 of the Facility is dedicated to the "Policies for the next generation, children and youth, including education and skills". The reforms and investments financed under RRF are expected to tackle challenges identified in the 2020 and 2019 country-specific recommendations, many of which directly or indirectly

[225] Regulation (EU) 2021/240 of the European Parliament and of the Council of 10 February 2021 establishing a Technical Support Instrument.

referred to the situation of children. In addition, the Commission Guidance on the RRF[226] invites the Member States to provide an analysis of existing challenges and propose reforms and investments related to adapting education systems to the challenges of the 21st century. Through these priorities, the RRF can financially support Member State reforms and investments in areas that include, among others, inclusive education, access to digital tools and infrastructure, child poverty and bridging the generational gap.

The research and innovation framework programme Horizon Europe[227] (2021-2027) will continue funding research to support policies for children and youth in a variety of fields, including educational opportunities and poverty, migration and integration, political participation, sustainability, the digital economy, health, etc.

7. IMPLEMENTATION AND MONITORING OF THE EUROPEAN CHILD GUARANTEE

Child policies are cross-sectoral and dealt with at different administrative levels (national, regional and local). Efficient coordination of relevant actions is therefore indispensable. According to the preparatory action for child guarantee[228], one of the main barriers to the creation of effective policies is a lack of general social and political awareness on the extent of child poverty or social exclusion. The failure to develop a strategic and coordinated approach leads to inadequate and under-resourced provision and to piecemeal programmes and projects. To ensure that the European Child Guarantee becomes fully operational, specific requirements for implementation, monitoring and reporting are necessary. This chapter discusses these specific requirements in detail.

7.1. Governance and reporting

The evidence collected by the preparatory actions is clear: the Member States that are most successful in ensuring efficient access to services for children in vulnerable situations have a comprehensive range of policies in place. These successful Member States also have a strategic and well-coordinated approach. The coherence of social, education, health, nutrition and housing policies at various governance levels needs to be assessed and improved, with special attention paid to their relevance for supporting children in need. Therefore, it seems pertinent for Member States to have national **Child Guarantee Coordinators**, with a mandate and resources to effectively coordinate and monitor the implementation of the European Child Guarantee. A key element of the coordination at national level would be the identification of children in need and of the barriers they face in accessing and taking-up the services covered by the European Child Guarantee.

The implementation of the European Child Guarantee also requires the preparation of national **action plans** on how to implement the policy measures listed in the proposed Recommendation, covering the period until 2030. Such action plans are to comprehensively address all aspects relevant for a successful implementation and in particular the following elements: (i) the targeted categories of children in need to be reached by corresponding measures; (ii) quantitative and qualitative targets to be achieved in terms of the number of children in need to be reached by corresponding measures; (iii) measures taken to implement

[226] See https://ec.europa.eu/info/files/guidance-member-states-recovery-and-resilience-plans_en.

[227] See https://ec.europa.eu/info/horizon-europe_en.

[228] Feasibility study for a child guarantee. Final report, p. 121.

the Recommendation with the indication of the adequate funding sources and timelines; (iv) other measures to address child social exclusion and break intergenerational cycles of disadvantage; (v) a national framework for data collection, monitoring and evaluation of the Recommendation.

In line with high standards for inclusive policy making, and to make sure that the views of stakeholders who will ultimately be responsible for delivering the services to children are duly taken into account, the preparation, implementation, monitoring and evaluation of the national action plans needs to be consulted with regional and local authorities, children and relevant stakeholders representing civil society, non-governmental organisations (in particular those promoting children's rights), and bodies responsible for promoting social inclusion.

The proposal also envisages the necessity of developing effective outreach strategies by Member States towards children in need and their families, in particular at local level and through educational establishments, civil society and social economy organisations, trained mediators or family-support services, with a view of raising the awareness and encouraging the take-up of services.

Finally, the proposal sets out a requirement for regular reports every two years by Member States to the Commission on the progress in implementing the European Child Guarantee.

7.2. Implementation, monitoring and evaluation

The governance processes at the EU level help: (i) identify gaps and challenges; and (ii) design relevant policy responses. The **European Semester**[229] and the social open method of coordination are particularly relevant for monitoring the implementation of the European Child Guarantee.[230]

The proposal invites the Commission, Member States, the Social Protection Committee and the national Child Guarantee Coordinators to work together in order to facilitate mutual learning, share experiences, exchange of good practices and follow up on the actions taken in response to the Recommendation.

The proposed biennial **implementation reports** submitted to the Commission by the Member States will serve as the basis for Commission's monitoring and discussions in the Social Protection Committee.

The proposal underlines the key role of the Commission and the Social Protection Committee in establishing a **common monitoring framework** and developing common quantitative and qualitative indicators to assess the implementation of the Recommendation. Furthermore, with a view of informed policy making, the proposal envisages that the Commission and the Social Protection Committee work together to enhance the availability, scope, relevance, and

[229] The European Semester is the annual cycle of economic and budgetary policy coordination in the EU, in which guidance is provided to the Member States in view of their policy decisions at national level. This guidance includes recommendations on employment and social issues, reflecting the Social Scoreboard indicators, which is meant to monitor Member States' performance with regard to the principles of the European Pillar of Social Rights.

[230] During the 2018-2019 European Semester cycle, the Council issued altogether 35 country-specific recommendations on family income support, efficiency of social protection, inclusive education, financial [dis]incentives to accept paid work for single and second earners, as well as on access to ECEC and healthcare – all of which are relevant for the situation of children. In the 2020 Semester cycle access to distance (or "digital") learning was mentioned in recommendations to four Member States, while securing equal access to education appeared in recommendations to seven other Member States. In a wider Covid-19 context, strengthening of social safety nets, including unemployment benefits, was recommended to 15 Member States. In its Special Report 20/2020, the European Court of Auditors recommends to the Commission to strengthen the Semester as a tool for fighting child poverty and to identify situations that could lead to a potential country-specific recommendation directly related to child poverty.

quality of data on children in need, their access to services, and adequacy and coverage of benefits targeted at children.

The proposal invites the Commission to take stock of the implementation of the European Child Guarantee and report to the Council by five years after the adoption of the Recommendation.

Finally, the proposal invites the Commission to strengthen awareness raising and communication efforts and increase the dissemination of results and good practice examples at EU level and among Member States and relevant stakeholders.

8. EXPECTED IMPACTS OF THE EUROPEAN CHILD GUARANTEE

While respecting the Commission's Better Regulation Guidelines, an impact assessment of the economic, social, fundamental rights and environment impacts of the proposal was not carried out. The selected instrument for the initiative – a proposal for a Council recommendation - offers guidance on the implementation of the European Child Guarantee. This instrument also allows Member States to be flexible in designing and implementing measures, according to their national practices. As a result, the expected impact of the recommendation will strongly depend on: (i) Member States' commitment; and (ii) the level of ambition of the national action plans adopted thereafter to implement it.

Against this background, this chapter draws from Phase II of the preparatory action ('Study on the economic implementing framework of a possible EU Child Guarantee Scheme including its financial foundation'). This chapter also attempts to assess the likely impacts of the proposal on ensuring access for children in need to the five key services. Finally, this chapter includes a simplified analysis of the possible costs to ensure such access. However, the calculations are only very indicative due to the scarcity and incomparability of data.

8.1. Expected impacts of the proposal

There is an ample body of evidence that investments at relatively low financial costs during childhood can yield lifetime gains, not only for individuals but also for societies and economies[231]. Intergenerational mobility appears to be highly influenced not just by the amount of investment in children, but also by the rate of return on this investment, which is highest in the very early years of childhood. Available studies[232] emphasise the critical influence of investment in pre-school years (especially before the age of 3), during which most of the essential cognitive and social skills are formed. These appear to be the years with the highest rate of return on education achievement and overall human capital investment in children. This rate of return is especially high when combined with intervention in health and education. Children from disadvantaged backgrounds benefit even more from this investment, because high-quality early childhood education and care helps to reduce the inequality stemming from non-school factors such as family and neighbourhood.

Risk prevention tends to be less costly than risk correction. Child social exclusion and the transmission of disadvantage across generations produce significant costs not only for those directly concerned, but also for society as a whole. It is broadly acknowledged that public

[231] See for instance the Social Investment Package, European Commission, 2013.

[232] Heckman, J.J., The Case for Investing in Disadvantaged Young Children (article in CESifo DICE Report 6(2):3-8), 2008.

expenditure to mitigate the adverse effects of social exclusion at an early age would be lower than public expenditure to deal with the consequences of social exclusion in childhood across a persons' life-span, such as unemployment or health problems. Early intervention can reduce the need for government spending on social protection in the future. By way of example, the estimated annual total cost to the economies of the EU of leaving people to live in inadequate housing is nearly EUR 194 billion. This involves both direct costs, such as healthcare or social services, and indirect costs, such as the loss of productivity[233]. The economic costs of health inequalities are also significant. The monetary value of welfare losses related to health inequality is estimated to be EUR 980 billion per year or 9.4% of the EU GDP[234].

Improving access to quality **early childhood education and care (ECEC)** is essential for low-income children, since education is a major contributor to intergenerational income mobility. Participation in ECEC can particularly increase the chances of children from low-income households to reach, or even surpass, the EU average scores on PISA tests in mathematics and reading. The effects are especially strong when children enter the facilities at an early age. There is broad consensus[235] that good quality ECEC is an efficient means of preventing early leaving from education and training and improving future: (i) academic performance; (ii) health; (iii) employment outcomes; and (iv) social mobility. Evidence shows that disadvantaged children are as much as three times more likely to finish a secondary school if they participate in early childhood education and care.[236] There is also abundant and robust evidence[237] indicating that these services can have a direct beneficial impact on: (i) children's development (both cognitive and other developmental domains); and (ii) parents (improving their job prospects and income). Mid-term and long-term impacts of ECEC include long lasting effect on educational pathways. However, this impact can only be fully realised when ECEC is of high quality, meaning that it: (i) is accessible; (ii) is staffed by skilled and well-qualified workers; (iii) operates a comprehensive curriculum; (iv) is well monitored: and (v) is appropriately governed and adequately funded.

Better **education** has been shown to be associated with: (i) lower disease burden; (ii) improved individual-level productivity and skill-sets; (iii) access to higher wages; and (iv) general benefits for the individual and to the wider society and economy. The average rate of return to an additional year of education is estimated to be around 10%[238]. High-quality and inclusive education and training help to build societal and personal resilience. They also bring other non-economic benefits. The impact of high-quality and inclusive education and training on children from disadvantaged backgrounds is even stronger as it helps to reduce socio-economic differences with children from more affluent families.

Health is a value in itself. It is also a precondition for economic prosperity. People's health influences economic outcomes in terms of their productivity, their likelihood to be in work, and their level of education. Healthy citizens also require less public spending on medical care. Investing in health, from an early age: (i) allows people to remain active and in better health for longer; (ii) raises the productivity of the workforce; and (iii) reduces the financial

[233] Inadequate housing in Europe: Costs and consequences, Eurofound 2016.

[234] Mackenbach, J. P., Meerding, W. J., Kunst, A. E., 'Economic costs of health inequalities in the European Union', Journal of Epidemiology and Community Health, December 2010.

[235] See for instance: *ECEC for children from disadvantaged backgrounds: findings from a European literature review and two case studies,* European Commission.

[236] See OECD research note 'Investing in high-quality early childhood education and care (ECEC)', available at https://www.oecd.org/education/school/48980282.pdf.

[237] *Idem.*

[238] Right in principle and in practice: a review of the social and economic returns to investing in children, UNICEF, June 2012.

pressure on health systems. Good health can improve educational outcomes, as measured through both school attendance and performance while in school. At all stages of life public disease prevention and health promotion programmes are particularly important. Early intervention and prevention programmes for children from disadvantaged backgrounds can help break the cycle of intergenerational transmission of health problems[239].

Food and nutrition programmes can help to educate about healthy and active lifestyles and thereby reduce malnutrition and poor nutrition. This is especially important for children who suffer from food insecurity. Healthy and sustainable school meals of good quality have a direct nutritional benefit to children and also offer financial relief to families and support local businesses. In addition, they can be beneficial for engaging children in learning about food and its health and environmental impact[240]. Addressing harmful behaviours (including poor diet, lack of physical activity, obesity and use of alcohol and tobacco) and simultaneously ensuring healthy and active environments for children (with reduced online marketing of unhealthy food options), is important to reduce health inequalities that block social mobility[241]. As a result, physical and psychological well-being of children is likely to increase in the long-term. There is also some evidence that providing school meals may encourage school attendance and therefore reduce the likelihood of dropping out[242]. A universal provision at school level reduces stigma and increases take-up.

Having access to decent **housing** is crucial for allowing people to achieve their full economic potential and contribute productively to society. It is also an important precondition for ensuring children's: (i) health and wellbeing; (ii) emotional, social, cognitive and physical development; and (iii) present and future prospects. The loss of one's home – or the prospect of losing one's home – has strongly negative impacts on children and on the family's overall life situation. Targeted, integrated policies that mitigate the overall impact of homelessness are good examples of investments with high rates of return[243]. There are long-term social and economic benefits to providing permanent housing and support measures for homeless families and preventing the circumstances which might lead to homelessness[244]. These benefits include: (i) lower public expenditure on shelters and crisis support services; (ii) lower public expenditure on healthcare; (iii) increased employment; (iv) higher tax revenues; (v) lower judicial system costs; and (vi) greater social cohesion.

Figure 4 illustrates the proposal's likely impacts on children's well-being and attempts to depict the complex interconnections between the proposal's various aspects. The increased housing security, more comprehensive preventive healthcare and greater food security (direct consequences of the European Child Guarantee shown in the middle column) all help to reduce the economic strain on parents. Those and the remaining direct consequences increase children's well-being, what improves their future attainment as adults and contributes to greater social cohesion in the long run. This in turn, like any other investment in children, is set to reduce future public expenditures. Quantifying the exact size of the benefits that will materialise in the years to come requires longitudinal studies and complex estimation techniques, which exceed the remit of the Phase II preparatory action.

[239] OECD, 'A broken social elevator? How to promote social mobility', OECD Publishing, Paris, 2018.

[240] OECD/European Union, 'Health at a Glance: Europe 2020: State of Health in the EU' Cycle, OECD Publishing, Paris, 2020.

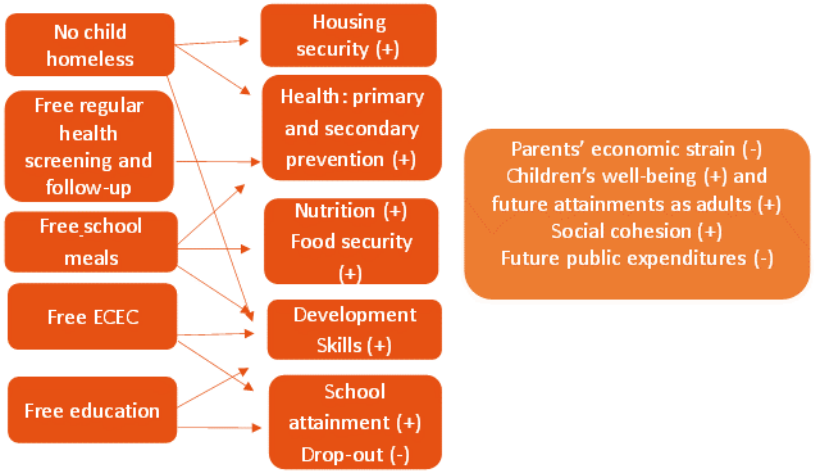
[241] OECD, 'The Heavy Burden of Obesity: The Economics of Prevention', OECD Health Policy Studies, OECD Publishing, Paris, 2019.

[242] Study on the economic implementing framework of a possible EU Child Guarantee Scheme including its financial foundation. Final Report.

[243] Commission Staff Working Document, 'Confronting Homelessness in the European Union', SWD(2013) 42 final.

[244] *Idem.*

Figure 4: Expected impact of the European Child Guarantee



Source: Study on the economic implementing framework of a possible EU Child Guarantee Scheme including its financial foundation Draft Final Report

8.2. Simplified cost analysis

The Phase II of the preparatory action looked at the possible costs that competent authorities might face to guarantee that all children at risk of poverty in the EU have access to the five services in question. The results were published in a study "The economic implementing framework of a possible European Child Guarantee scheme including its financial foundation"[245]. The focus of the study was exclusively on children at risk of poverty. Estimating the costs was extremely difficult given: (i) the limited data available on the costs of services; and (ii) the often poor international comparability of these data.

The computation of the costs was done separately for two selected types of action for children at risk of poverty, as set out in the two bullet points below.

- Providing free school meals, providing free early childhood education and care and removing indirect school costs. The study calculated the costs of implementing the actions/services in all the Member States where this is currently not implemented or not fully implemented.
- Health examinations; providing services aiming to prevent and fight child homelessness; and integrated delivery of services. To assess this cost, the study drew on the cost information available in the in-depth assessment of the actions and the related national and sub-national policies/ programmes. The study estimated the cost of implementing the action in the countries where available data make this estimation possible.

During Phase II of the preparatory action, the concrete policies and actions in EU Member States were all identified and listed. This made it possible to identify interesting practices at national, regional, and local levels (including EU-funded practices) that should be taken into account when replicating these actions in other contexts. The estimation of the resources needed is based on the estimated cost of the priority actions in countries where these actions

[245] Available at http://ec.europa.eu/social/BlobServlet?docId=23764&langId=en.

are in place, compared to the cost in the Member States where they are not – or not fully – implemented. The review of expected short-term and long-term benefits is based on both: (i) the experience of countries which implement the actions; and (ii) evaluations in other countries, including non-EU countries. This review provides insights into the cost-saving aspects of the investment needed. Finally, the study presents evidence that COVID-19 has had a particularly severe effect on children at risk of poverty and their families.

Due to the serious limitations of the data, the computations must be interpreted as an attempt to provide rough estimates of the financial resources that would be needed to guarantee the access of children at risk of poverty to the above actions/services.

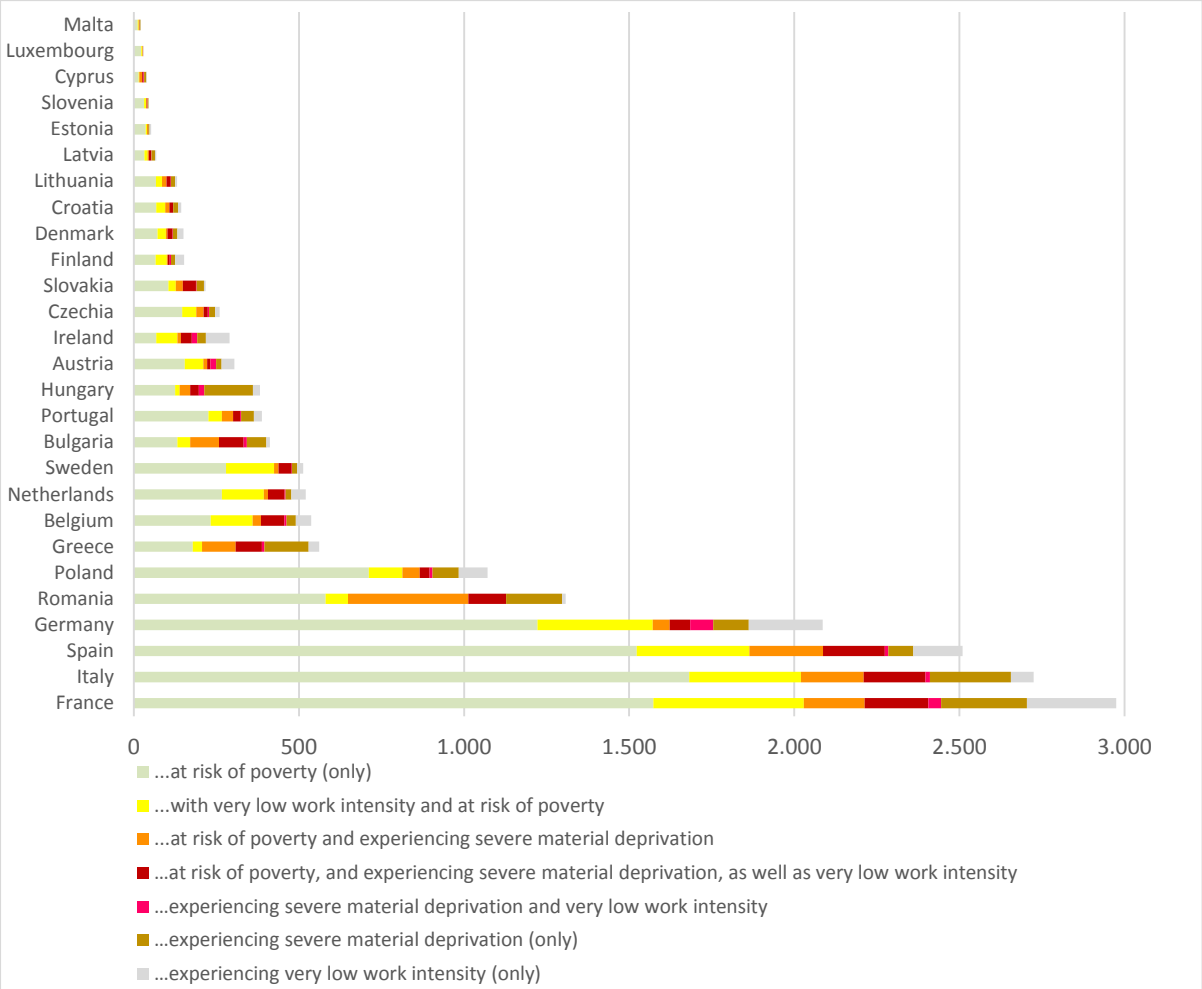
The results of the study showed that it would be relatively cheap to: (i) provide free school meals to children at risk of poverty; (ii) provide free, high-quality early childhood education and care to children at risk of poverty; and (iii) remove all school costs. The costs of these three actions are low in relation to their large potential benefits. The additional cost of removing all school costs and providing free school meals every weekday (including holidays) for all children at risk of poverty aged between 6 and 17 is less than 3% of the current budget for primary and secondary education in most countries.

ANNEX A: Additional data on children in need

This annex presents some general quantitative and qualitative information, available from Eurostat or collected during the preparatory action.

Children at risk of poverty or social exclusion

Figure A1: Risk of poverty or social exclusion (AROPE) in 2019 – thousands of children living in households…



Source: EU SILC [ilc_pees01], extracted 2.12.2020.

Table A2: Child material and social deprivation – results of the test survey in 2014: proportion of children lacking given item (or in arrears) in the country, out of the total child population

	Proteins	Fruits & vegetables	Indoor games	Shoes	Internet	Books	Friends	School trips	Outdoor equipment	Home warm	Clothes	Celebration	Leisure	Car	Furniture	Holidays	Arrears
Sweden	0.0	0.1	0.3	0.3	0.4	0.6	0.7	0.8	0.8	0.8	0.9	1.5	2.8	3.1	5.7	5.8	8.9
Finland	0.2	0.3	0.2	0.7	0.4	0.5	0.1	0.8	0.3	0.8	3.3	0.4	1.4	3.6	11.7	7.3	16.6
Denmark	0.7	0.5	0.8	2.3	0.5	2.7	1.5	1.4	2.3	2.3	1.9	1.4	3.4	5.2	14.5	9.1	10.1
Austria	2.0	0.6	1.2	1.1	1.1	1.2	3.5	2.7	3.1	4.6	1.9	1.8	10.0	7.0	15.5	17.7	11.0
Netherlands	2.5	0.6	0.4	3.9	0.2	0.5	1.1	1.6	1.6	2.9	1.6	1.9	6.2	6.7	25.3	15.7	9.0
Luxembourg	1.2	0.9	1.6	0.9	1.0	0.8	2.5	3.5	2.7	1.0	2.8	2.0	2.7	2.2	21.0	9.5	6.1
Slovenia	1.3	0.9	1.3	1.1	1.2	1.0	3.3	2.4	1.9	3.8	5.7	2.6	10.9	3.1	15.7	7.2	28.7
Spain	3.0	1.6	3.5	3.0	13.3	2.3	13.0	10.9	6.0	12.1	7.8	11.6	12.9	6.7	46.1	34.2	17.7
Germany	4.0	1.9	0.8	2.2	1.0	0.8	1.8	0.7	1.4	5.6	2.2	1.8	6.3	4.4	18.9	17.7	9.5
Malta	7.0	2.0	2.2	6.0	4.3	2.1	5.2	2.6	4.2	21.6	6.0	5.2	6.1	4.5	30.2	35.5	22.3
Cyprus	2.5	2.1	3.8	1.4	8.2	5.7	12.7	2.8	8.2	25.7	5.6	11.5	21.9	1.5	60.8	41.1	41.7
Belgium	2.5	2.2	2.5	3.6	3.7	4.4	5.9	3.8	4.0	4.9	8.2	5.8	9.1	7.6	18.5	19.5	12.2
Italy	5.9	2.6	5.6	3.0	10.8	7.8	7.5	9.7	6.1	18.3	8.6	7.3	14.0	2.3	39.0	30.0	20.9
France	2.4	2.8	1.1	5.4	2.0	1.2	2.6	4.8	1.8	5.4	8.9	5.5	6.5	2.9	28.1	11.9	14.9
Portugal	1.3	2.9	5.5	3.5	11.6	6.5	13.9	9.3	4.6	25.6	14.5	8.4	23.5	9.8	57.6	36.7	17.6
Ireland	3.6	3.1	1.4	6.7	5.2	1.0	3.4	3.3	3.4	10.1	12.4	3.2	7.1	6.8	28.8	53.8	25.9
Czech Republic	4.8	3.1	3.0	2.9	3.9	1.9	2.4	5.2	7.7	6.0	6.3	3.7	8.9	11.7	47.5	9.0	10.3
Poland	2.9	3.5	2.3	1.4	3.1	2.9	8.8	8.9	4.3	7.9	3.2	9.9	19.0	7.8	31.6	26.4	19.1
United Kingdom	3.1	3.9	1.4	2.2	4.6	1.0	7.2	3.5	5.6	10.1	3.6	2.3	6.3	10.7	32.7	35.4	18.2
EU-28	**5.2**	**4.1**	**4.7**	**4.7**	**7.0**	**4.4**	**8.4**	**7.6**	**7.2**	**10.2**	**7.4**	**7.2**	**12.7**	**8.7**	**33.9**	**26.5**	**18.4**
Croatia	6.3	4.6	5.9	3.2	4.9	7.2	7.6	8.1	6.2	9.3	5.3	5.7	9.2	7.5	32.9	29.8	36.0
Greece	9.4	5.6	4.2	0.6	8.7	7.4	14.5	22.1	10.4	31.1	1.8	19.5	16.3	8.7	57.4	42.3	54.5
Estonia	6.2	7.1	1.7	1.7	0.9	2.6	5.2	3.2	3.7	1.5	2.6	3.7	4.1	9.9	27.9	10.7	16.2
Lithuania	6.5	8.2	2.6	0.4	5.7	2.4	9.8	6.0	6.5	25.4	12.7	5.0	19.0	12.4	49.9	18.7	17.4
Slovakia	13.3	10.1	7.9	6.6	9.2	10.8	15.8	9.1	11.4	8.0	14.4	12.5	11.5	13.9	45.3	16.0	11.2
Latvia	8.6	10.3	9.3	12.2	8.3	11.4	11.6	7.8	17.2	18.1	24.7	10.5	16.7	24.1	57.9	28.4	32.4
Romania	21.9	14.9	42.5	27.8	36.9	24.5	40.0	40.3	55.8	15.3	26.4	33.2	60.5	45.0	67.2	61.5	36.5
Hungary	22.8	23.0	13.3	8.0	18.1	15.3	31.9	15.9	17.3	12.5	27.3	15.7	21.6	30.9	53.6	51.3	36.8
Bulgaria	43.2	40.9	38.9	49.9	27.3	43.9	41.9	43.0	52.8	40.6	36.4	32.7	53.1	30.5	72.6	55.0	44.9

Source: Guio A.-C., Gordon D., Marlier E., Najera H., Pomati M., 2018, Towards an EU measure of child deprivation, Child Indicator Research 11(3): 835–860.

Homeless children

The availability and nature of data on the extent of child homelessness varies. In some Member States, there are national data, while in others only city-level statistics are available. Depending on the category of the European Typology of Homelessness and housing exclusion (ETHOS), the number of Member States (in some cases cities) reporting relatively recent (i.e. 2016 or later) figures on homelessness among children varies between 11 and none. It is therefore not possible to provide an overall figure on the number of homeless children in the EU – a more systematic collection of information is necessary. Phase II of the Preparatory Action looked at available data on the numbers of different categories of homeless children across the EU Member States and cities, with the results listed below, totalling 91 155 individuals. The real number of homeless children across the EU is likely much higher, given that the data cover only 12 Member States and four capital cities.

Table A3: Numbers of children suffering from different forms of homelessness across the EU

Form of homelessness	Member State / City	Year	Number
Children living rough	Greece	2020	957
	Paris	2018	700
	Portugal	2018	63
	Brussels	2018	20
	Poland	2019	3
Children living in emergency accommodation	Romania	2019	466
	Vienna	2019	457
	Brussels	2018	227
	Luxembourg	2019	41
	Latvia	2019	38
	Poland	2019	18
Children living in accommodation for the homeless	France	2016	60 000
	Hungary	2018	7 892
	Czechia	2018/2019	4 342
	Greece	2020	3 727
	Ireland	2020	2 787
	Brussels	2018	720
	Poland	2019	531
	Luxembourg	2018	439
	Croatia	2018	364
	Bratislava	2016	284
	Portugal	2018	171
Children living in penal institutions	Czechia	2018	5 900
	Austria	2018	125
	Latvia	2019	36
Children living in healthcare institutions	Latvia	2019	712
	Poland	2019	2
Children living in non-conventional dwellings	Brussels	2018	87
	Poland	2019	46

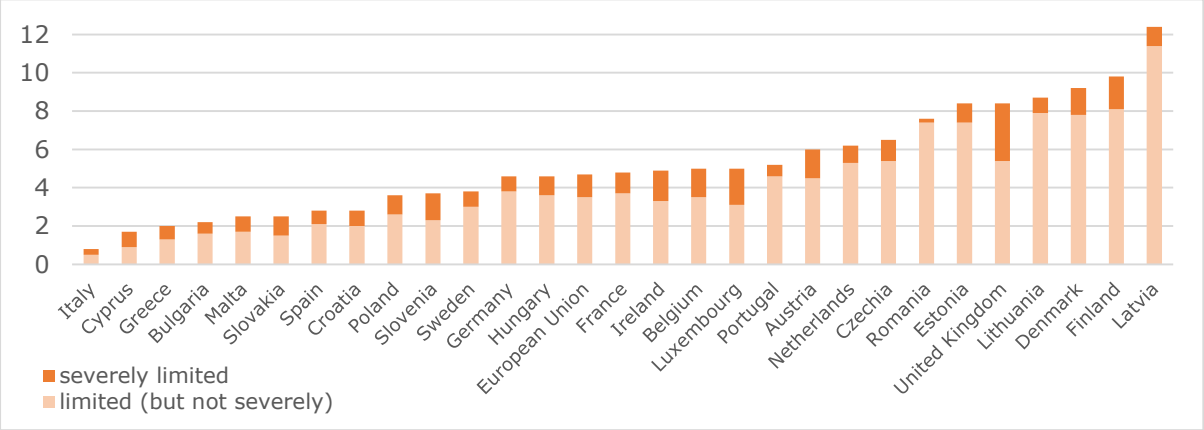
Source: Study on the economic implementing framework of a possible EU Child Guarantee Scheme including its financial foundation, Chapter J3.2

Children with disabilities

According to the Feasibility Study for a Child Guarantee Final Report, the main challenges related to data collection on children with disabilities stem from the fact that their correct identification requires a comprehensive description of their life situation. This comprehensive description should include: (i) their physiological or intellectual condition (potential impairment); (ii) the restrictions they face in activities and participation; and (iii) the environmental factors that support or are a barrier to their participation. To be effective in identifying disability (and providing adequate services) it is important to start as early as possible in the child's life identifying the impairments, maintain focus throughout all stages of life, and consider disability determination as a whole-person assessment that includes barriers in the environment. In all cases, gathering information on all three sets of determinants requires that various persons (starting with the most immediate family) provide

information related to all aspects of a person's life. These complex data are not collected at EU level.[246]

Figure A4: Proportion of children with moderate disabilities or severe disabilities, Children 0-15 years old, EU Member States, 2017, %



Source: EU-SILC 2017, ad-hoc module, Users' Data-Base (UDB) version March 2019, Feasibility Study for a Child Guarantee Final Report calculations.

Children with migrant background

According to the Feasibility Study for a Child Guarantee the main challenges related to data collection on migrant children include: (i) incomplete, unreliable or duplicated data; (ii) differing definitions for age categories; and (iii) differing criteria for recording data.[247] Unaccompanied children may go undetected, avoid being registered, or claim to be older than 18, so that they can continue their journeys and not be taken into custody. Other children may not know how old they are, and some young adults claim to be under 18 years old to benefit from the additional legal guarantees available for children. There may also be cases of children who apply for asylum in more than one country, and there are many children who do not apply for asylum at all. For example, Germany reported that more than 42 000 unaccompanied and separated children entered the country in 2015, but only 14 439 claimed asylum[248]. Some Member States record all those who claim to be unaccompanied minors in the statistics, whereas others only count those recognised as such following an age assessment by an authority[249].

For children with a migrant background who are established in their host Member States, the Eurostat data include the total number of migrants who do not have the citizenship of their host country and the total number of those who are foreign born. Some figures can underestimate the total number of EU inhabitants with migrant background because they exclude children born in the host country from parents born in a non-EU country. Estimates of the numbers of children who have recently moved with their parents from another EU Member State – and whose situation is often very similar to that of non-EU migrants – may also be lacking.

[246] Feasibility Study for a Child Guarantee Final Report, p. 27.

[247] See Schumacher, G., Loeschner, J. and Sermi, F., 'Data on Children in Migration', Publications Office of the European Union, Luxembourg 2019.

[248] European Commission,2016, Statistical Annex to the Annual Report on Immigration and Asylum 2015.

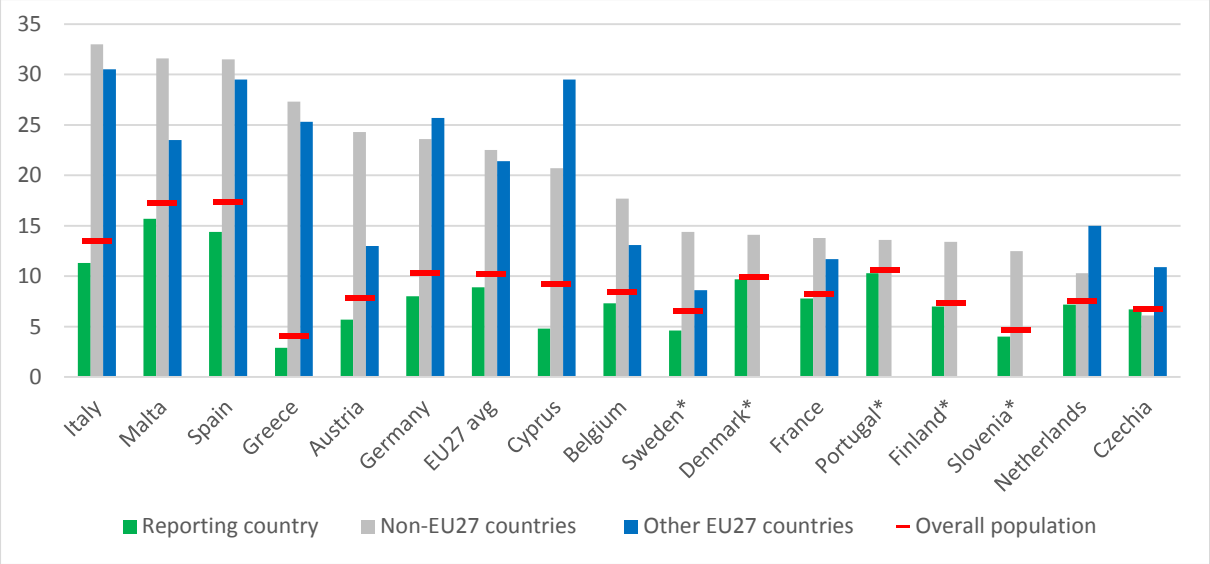
[249] Humphries, R. and Sigona, S., 'Children and unsafe migration in Europe: Data and policy, understanding the evidence base', *Global Migration Data Analysis Centre Briefing Series*, Issue 5, 2016.

Table A5: Number of dependent children with at least one parent born outside the EU, 2017

Germany	3.352.196	Greece	238.862	Luxembourg	27.779
France	3.241.053	Denmark	161.106	Lithuania	24.239
Italy	1.818.926	Ireland	138.407	Finland	23.029
Spain	1.465.731	Croatia	126.499	Hungary	21.414
Netherlands	773.250	Slovenia	50.507	Estonia	19.781
Sweden	596.660	Czechia	47.210	Slovakia	8.298
Belgium	574.766	Poland	44.144	Malta	8.182
Austria	416.963	Cyprus	38.556	Bulgaria	7.849
Portugal	254.058	Latvia	30.292	Romania	5.733

Note: The focus is on 'dependent children', i.e. children below the age of 15, plus children aged 16-24 who are inactive and live with at least one of their parents.
Source: Feasibility Study for a Child Guarantee Final Report based on LFS (2017).

Figure A6: Incidence of early leaving from education and training by pupils' place of birth, 2019



Note: no data on Other-EU27 for Denmark, Portugal and Slovenia, 2018 figures for Finland/Non-EU27 and Sweden/Other-EU27. Source: Eurostat [edat_lfse_02].

Table A7: Levels of equality in entitlements to health care for three groups of migrant children compared to national children

	Children seeking asylum	Children of irregular non-EU migrants	Children of irregular migrants from other EU countries
Austria			
Belgium			
Bulgaria			
Croatia			no data
Cyprus			no data
Czechia			no data
Denmark			
Estonia			no data
Finland			
France			
Germany			
Greece			
Hungary			
Iceland			
Ireland			
Italy			
Latvia			no data
Lithuania			
Luxembourg			
Malta			no data
Netherlands			
Norway			
Poland			
Portugal			
Romania			
Slovakia			
Slovenia			
Spain			
Sweden			

Key to shading:

Entitlements equal to nationals regarding coverage and cost and included in same health care system

Entitlements equal to nationals regarding coverage and cost but enrolled in parallel health care system

Entitlements restricted compared to nationals or No legal entitlements

Unclear legal provision

Source: Hjern and Østergaard + Correction by BG SPC delegate, 21.09.2020.

Children with a minority racial or ethnic background (in particular Roma)

Roma are invisible in most national and international surveys that cover the general population, either: (i) because data on ethnic origin are not collected; (ii) because not all Roma are willing to reveal their ethnic identity; or (iii) because of sampling difficulties.

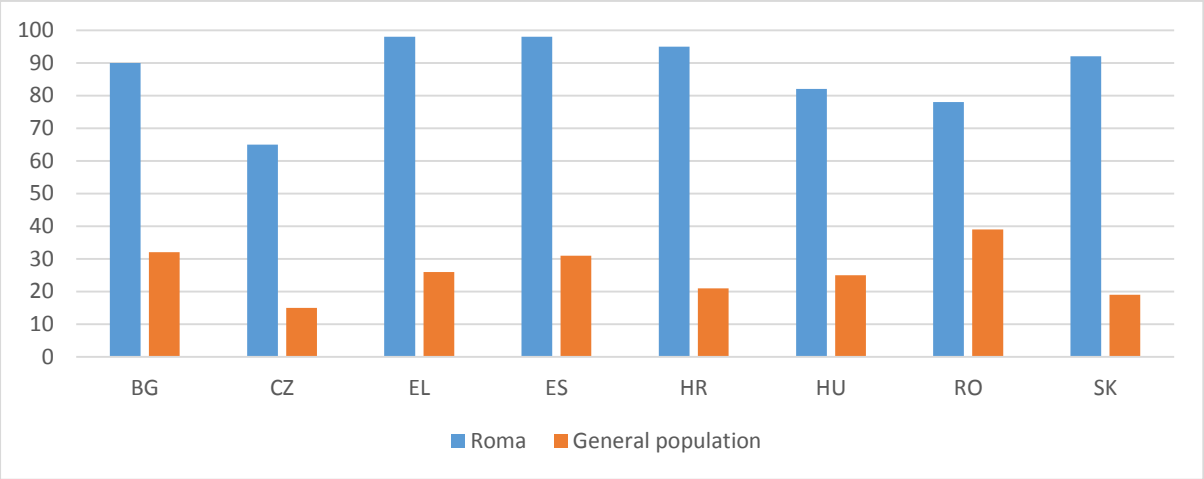
Table A8: Estimated numbers of Roma across the EU

Member State	Official number	Estimate			
		Minimum	Maximum	Average (Figure used by CoE)	Average as a share of total population
Bulgaria	325 343	700 000	800 000	**750 000**	**9.94%**
Slovakia	89 920	380 000	600 000	**490 000**	**9.02%**
Romania	619 007	1 200 000	2 500 000	**1 850 000**	**8.63%**
Hungary	190 046	500 000	1 000 000	**750 000**	**7.49%**
Czechia	11 718	150 000	250 000	**200 000**	**1.90%**
Spain	n.a.	500 000	1 000 000	**750 000**	**1.63%**
Greece	n.a.	50 000	300 000	**175 000**	**1.55%**
Ireland	22 435	32 000	43 000	**37 500**	**0.84%**
Croatia	9 463	30 000	40 000	**35 000**	**0.79%**
France	n.a.	300 000	500 000	**400 000**	**0.62%**
Latvia	8 517	9 000	16 000	**12 500**	**0.56%**
Sweden	n.a.	35 000	65 000	**50 000**	**0.53%**
Portugal	n.a.	34 000	70 000	**52 000**	**0.49%**
Austria	6 273	20 000	50 000	**35 000**	**0.42%**
Slovenia	3 246	7 000	10 000	**8 500**	**0.41%**
Belgium	n.a.	20 000	40 000	**30 000**	**0.28%**
Italy	n.a.	120 000	180 000	**150 000**	**0.25%**
the Netherlands	n.a.	32 000	48 000	**40 000**	**0.24%**
Finland	n.a.	10 000	12 000	**11 000**	**0.21%**
Germany	n.a.	70 000	140 000	**105 000**	**0.13%**
Cyprus	502	1 000	1 500	**1 250**	**0.11%**
Poland	12 731	15 000	50 000	**32 500**	**0.09%**
Lithuania	2 571	2 000	4 000	**3 000**	**0.09%**
Estonia	584	600	1 500	**1 050**	**0.08%**
Luxembourg	n.a.	100	500	**300**	**0.06%**
Denmark	n.a.	1 000	4 000	**2 500**	**0.05%**
Malta	n.a.	0	0	**0**	**0.00%**
European Union (27)	**1 292 893**	**4 338 700**	**7 985 500**	**6 162 100**	**1.18%**

See also: Ivanov, A. and Kagin, J. (2014). Roma Poverty from a Human Development Perspective. Bratislava: UNDP Regional Support Centre for Europe and CIS, and Till-Tentschert, U., Ivanov, A., Elena, M., Kling, G.J., and Latcheva, R. (2016). Measuring Roma Inclusion Strategies – a Fundamental Rights Based Approach to Indicators. Vienna/Geneva.

Source: Council of Europe.

Figure A9: Income poverty rate of Roma children; selected EU Member States, 2014, %



Source: Feasibility Study for a Child Guarantee Final Report, p. 49, quoting FRA Second European Union Minorities and Discrimination Survey, 2016 and EU-SILC 2014, Eurostat, Table [TESSI012].

Children in alternative care

According to the Feasibility Study for a Child Guarantee Final Report, the data on children in alternative care is very limited: some children in alternative care are double-counted or not counted at all. Some statistics report the 'flow' figures (number of children entering and leaving the alternative care systems) but not the total number of children in the care system at a given time (the 'stock' figure). Different age categories are used, which makes cross-country comparisons difficult (e.g. some statistics include the over-18s still supported by child-protection services during their transition to adulthood). Most Member States do not disaggregate data according to gender, age, disability, or migrant background. Unaccompanied minors or children with disabilities placed in residential care might not be included in statistics related to children in alternative care, but they might be included in other statistics collected by different public authorities. In some Member States, children with disabilities are cared for in boarding schools, creating a sort of 'hidden' institutionalisation of children, as they do not appear in the statistics on children in residential care.[250]

[250] Feasibility study for a child guarantee. Final report, p. 23.

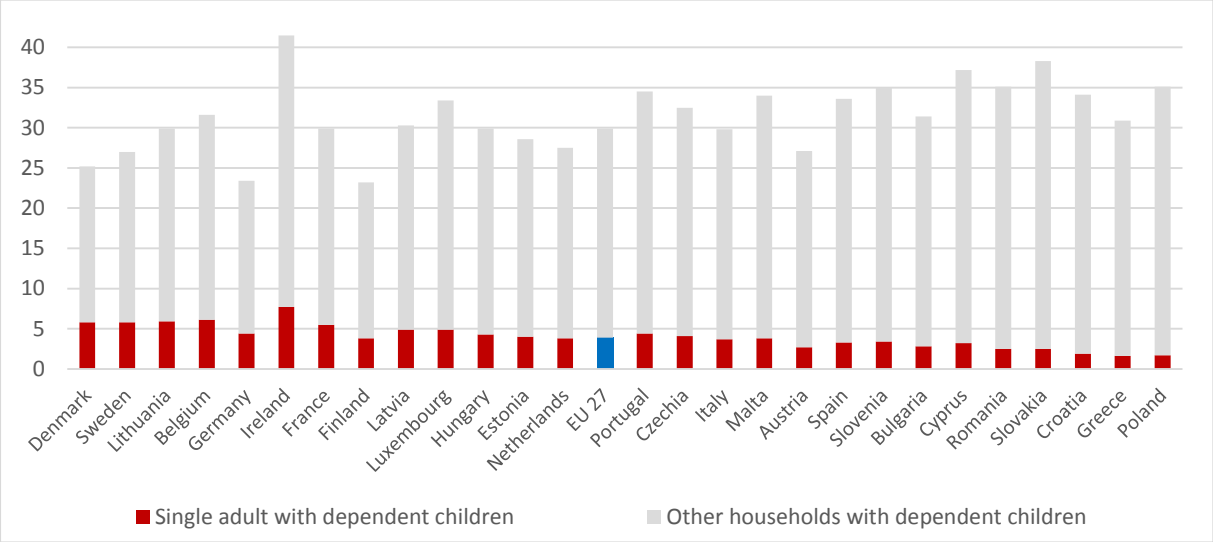
Table A10: Number of children in residential institutional care across the EU

Member State	Number	Remarks
Belgium – Flanders – Wallonia and Brussels	6 092 10 439	Includes boarding schools and community institutions, which cater not only to children on need of a care placement, but also to those in conflict with the law
Bulgaria	3571	According to the Agency for Social Assistance, the total number of children placed in specialized institutions at the end of 2019 was 476 (84 children in 8 Homes for children deprived from parental care, and 392 children in 13 Homes for medico-social care for children). The number of children in residential care (Family-type centers, Transitional housing and Crisis Centers) at the end of 2019 was 3 095 (excluding the number of children in institutions).
Czechia	9 052	This number includes children and young people in the juvenile justice system. To obtain the total number of children in residential care, it is necessary to combine the data from three different ministries. The difficulty in getting a clear number of children in residential care is increased by the fact that this number includes inflow information provided by the Ministry of Health (1,490 children admitted in institutions for children aged 0-3), whereas the other ministries provide stock numbers at the end of the year.
Denmark	3 940	
Germany	95 582	
Estonia	1 068	
Ireland	369	
Greece	3 000	
Spain	21 283	
France	57 368	Plus 12 575 children in "other types of placement", which covers family-based alternative care options (e.g. kinship care, placement with the prospective adoptive family) and residential care options (e.g. SOS Children's Villages, boarding schools).
Croatia	1 045	
Italy	21 000	
Cyprus	100	
Latvia	1 170	
Lithuania	3 871	
Luxembourg	803	83 of these children were placed in institutions outside Luxembourg
Hungary	6 183	
Malta	155	
The Netherlands	23 700	Number of beds. Children with multiple forms of youth care appear several times in the statistics
Austria	8 411	
Poland	16 856	
Portugal	6 119	
Romania	18 200	
Slovenia	n/a	
Slovakia	5 266	
Finland	9 104	
Sweden	11 000	

Source: Frazer, H., Guio, A.-C. and Marlier, E. (eds.) (2020). "Feasibility Study for a European Child Guarantee: Final Report", Feasibility Study for a Child Guarantee Final Report, Brussels: European Commission, pp 24-26; Updated by BG and ES delegates to SPC.

Children in precarious family situations

Figure A11: Households comprising a single adult with children and other households with children among all households in a Member State, 2018, %

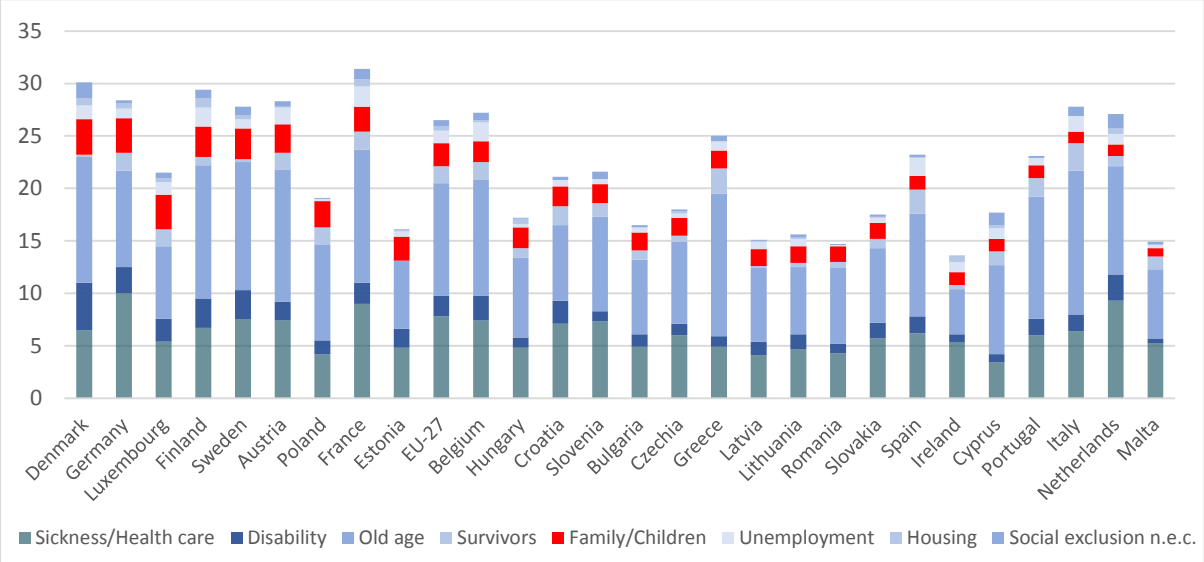


Note: sorted by the share of single adult households among all households with children.
Source: EU-SILC [ilc_lvph02], retrieved on 15.09.2020.

ANNEX B: Additional information on services covered by the European Child Guarantee

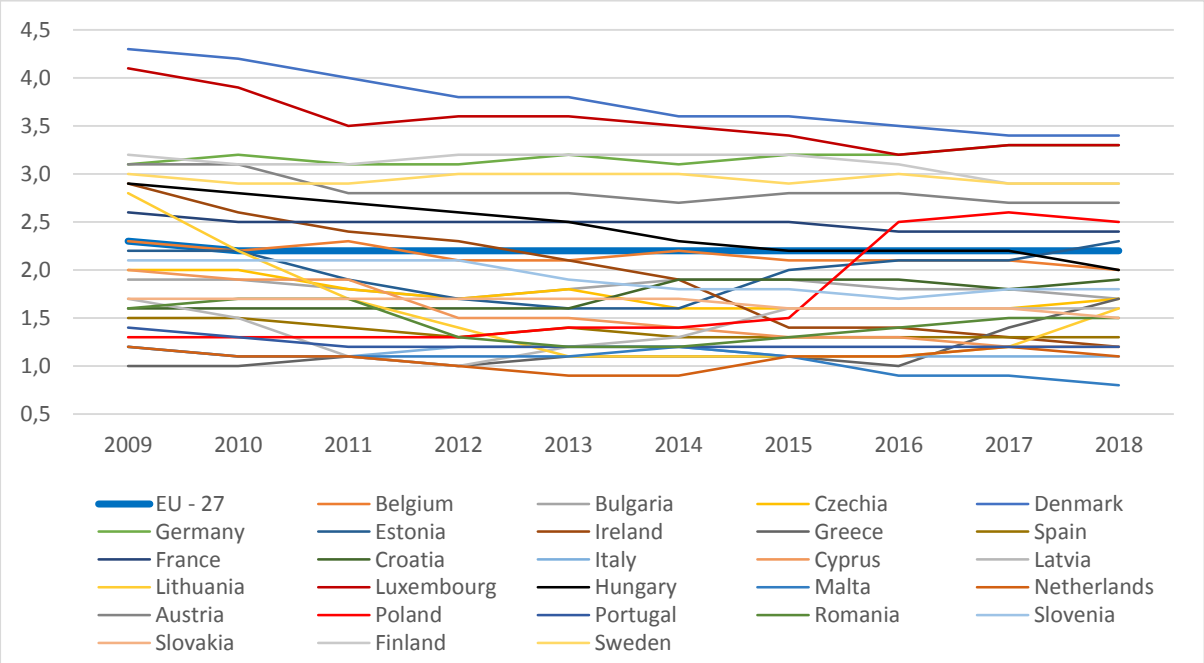
In the EU as a whole, more than EUR 300 billion, or 2.2% of GDP, is spent on social protection benefits with "family and children" function. Germany and France account for over half of this expenditure, spending respectively 3.3% and 2.4% of their GDP. Most other Member States spend considerably less, with the median figure being 1.7% of GDP.

Figure B1: Social protection expenditure as percentage of GDP, per function, 2018



Note: Member States sorted by the percentage of GDP spent on Family/Children.
Source: Eurostat [SPR_EXP_GDP], extracted 13.11.2020.

Figure B2: Expenditure on social protection benefits with function Families/Children, % of GDP, 2009-2018

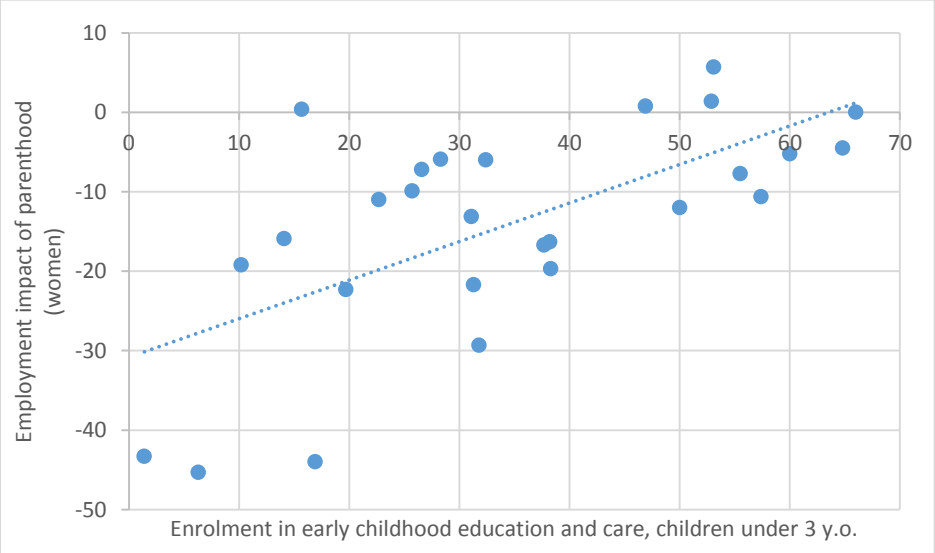


Source: Eurostat [SPR_EXP_GDP], extracted 14.02.2021.

Early childhood education and care (ECEC)

On average in the EU-27, the employment rate of women (aged 25-49) who have at least one child aged under 6 is 14.3 pps lower than for women who do not have a young child. The impact of parenthood on women employment is particularly strong in Czechia (45.3 pps lower than women without a young child), Hungary (44.0 pps lower) and Slovakia (43.3 pps lower).[251] Those are also the Member States where enrolment in ECEC is low, especially for younger children, as shown by Figure.B2.

Figure B3: ECEC enrolment and employment impact of parenthood



Source: Eurostat, Commission's proposal for the 2021 Joint Employment Report.

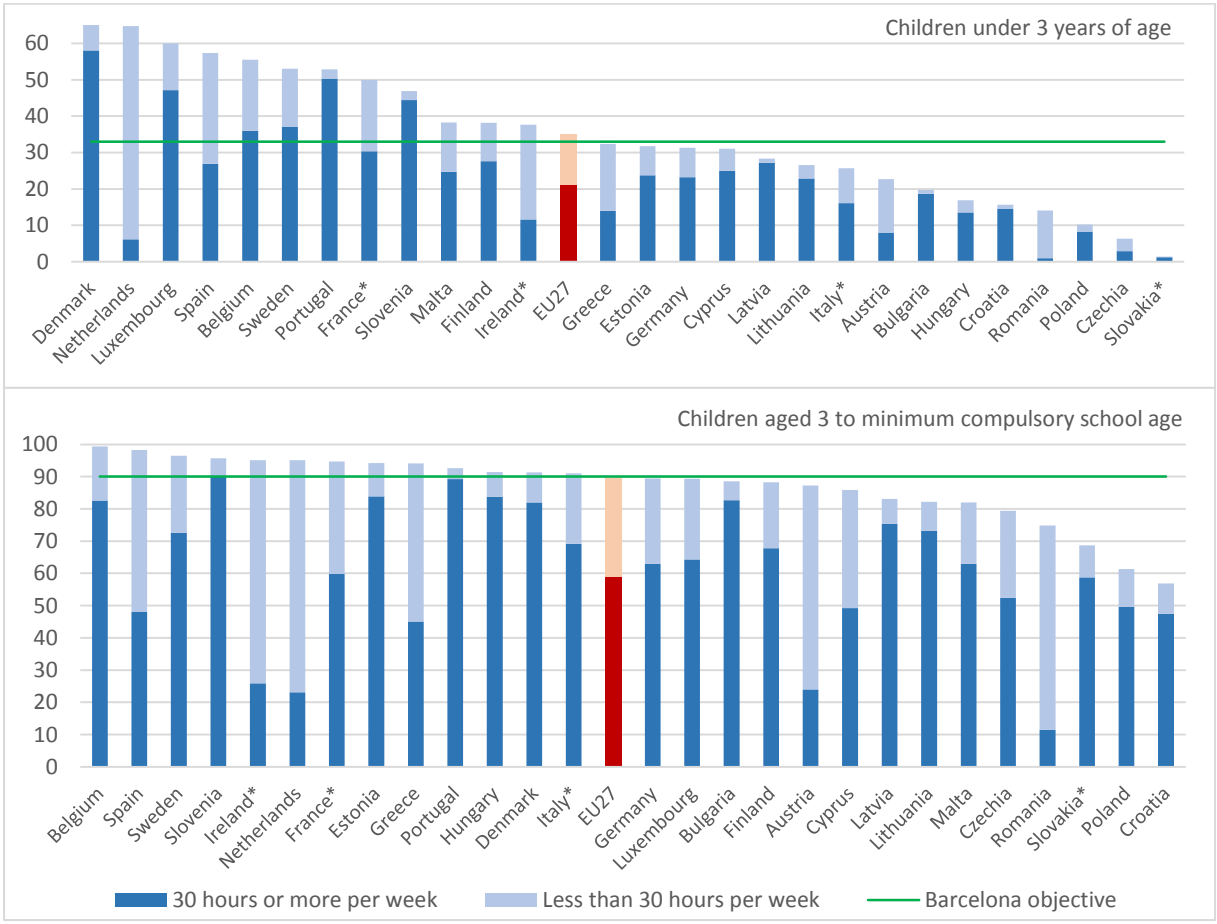
Table B4: Compulsory early childhood education and care across the EU, 2020

Starting age of compulsory education at ISCED level 0 (ECEC)	Member States
3 years	FR, HU
4 years	EL, LU
5 years	AT, BE, BG, CY, CZ, LV, NL
6 years	FI, LT, PL, SE
No compulsory ECEC	DK, DE, EE, ES, HR, IE, IT, MT, PT, RO, SI, SK

Source: Eurydice Facts and Figures: Compulsory education in Europe 2020/21.

[251] Commission's proposal for the 2021 Joint Employment Report.

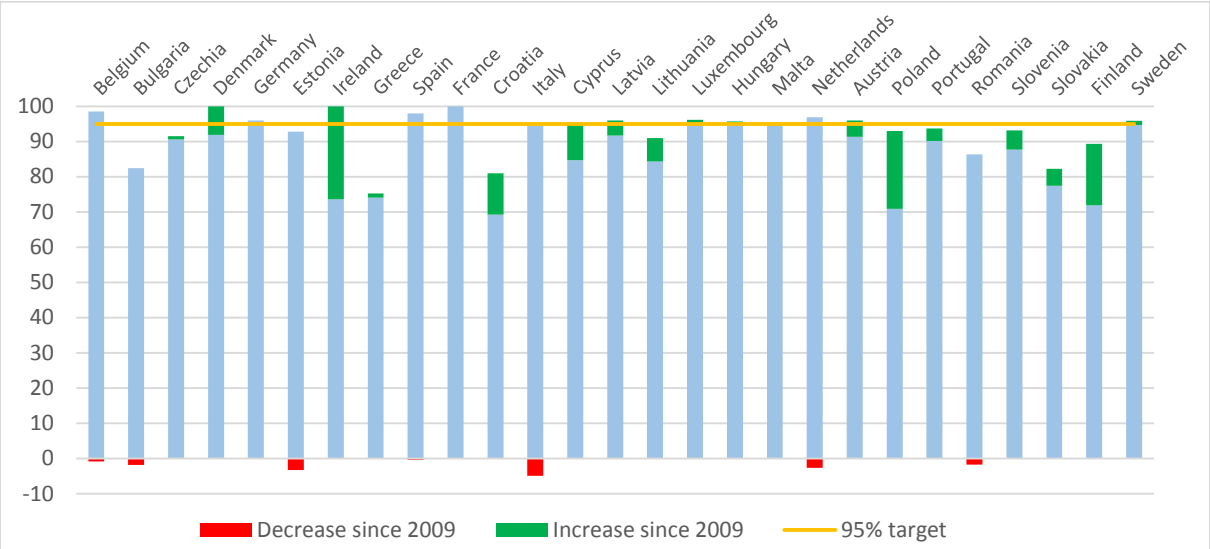
Figure B5: Percentage of children in formal early childhood education and care, 2018 or 2019*



Source: Eurostat [ilc_caindformal], 21.10.2020.

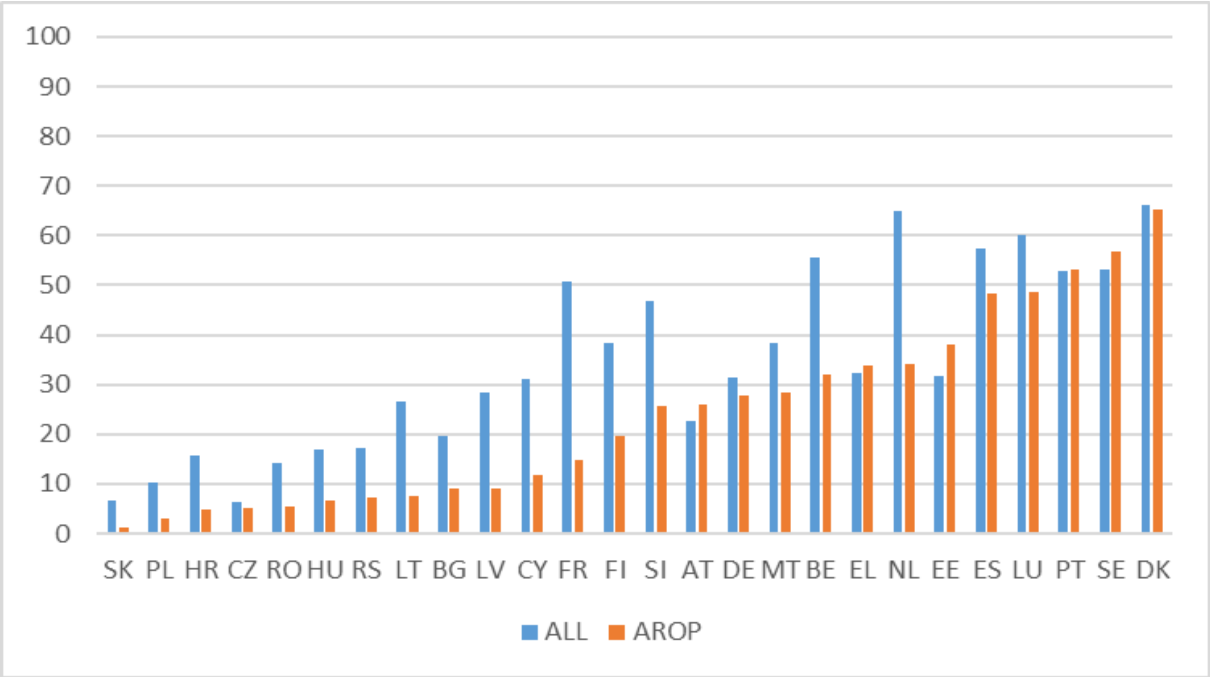
In 2009, the Strategic Framework for European Cooperation in Education and Training set the ambition to have by 2020 at least 95% of children aged between four years old and the age for starting compulsory primary education enrolled in ECEC. In 2018, the EU-27 almost reached this target, with an average of 94.8%, representing a 4.5 pps increase since 2009 (Figure A14). Those high participation rates reflect the fact that at least one year of ECEC is now compulsory in most Member States (Table A1). In addition, Denmark and Ireland provide universal – but not compulsory – access to ECEC in this age group.

Figure B6: ECEC participation of children aged between 4 and the age for starting compulsory primary education, 2018 and changes since 2009, %



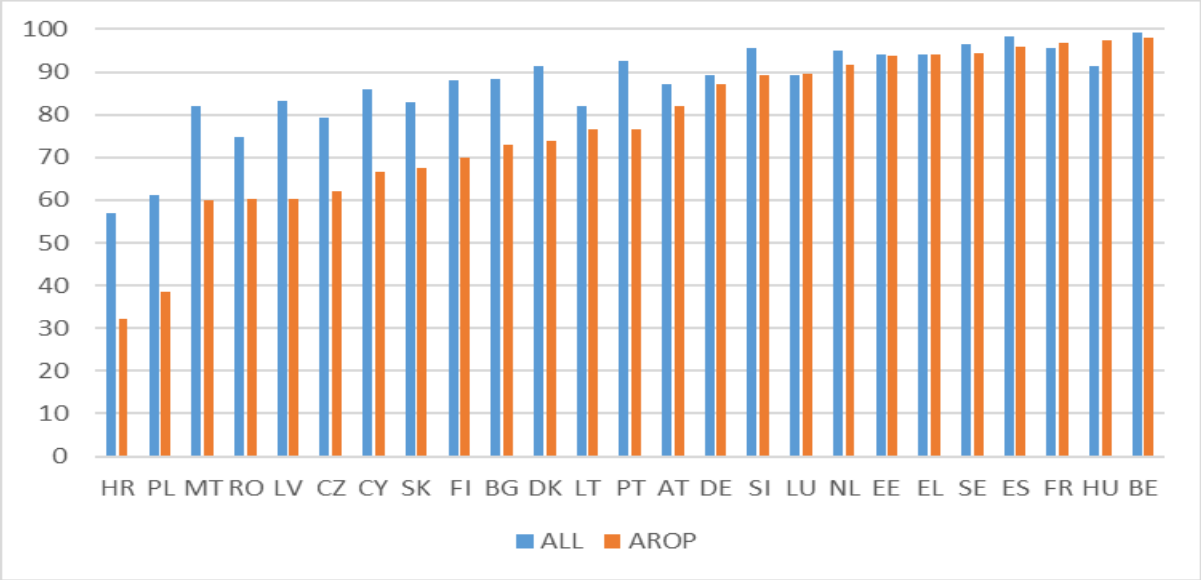
Source: Eurostat [educ_uoe_enra10], quoted in Education and Training Monitor 2020.

Figure B7: ECEC participation rates of children at risk of poverty (AROP), compared to all children. Age group 0-2 years, 2019, %



Source: Study on the economic implementing framework of a possible EU Child Guarantee Scheme including its financial foundation. Final Report, using EU-SILC 2019, no data for IT and IE.

Figure B8: ECEC participation rates of children at risk of poverty (AROP), compared to all children. Age group 3 years to mandatory school age, 2019, %



Source: Study on the Economic Implementing Framework of a possible EU Child Guarantee scheme including its financial foundation, using EU-SILC 2019, no data for IT and IE.

Table B9: Accessibility and affordability of early childhood education and care for children living in low-income households

	Childcare under 3 y.o. – priority for low-income households	**Entitlement as of age…**	**Free as of age…**
BE	No	2y6m	2y6m (23hrs/week)
BG	Yes	3y	5y
CZ	No	3y	5y
DK	No	6m	Reduced fee
DE	No	1y	Reduced fee
EE	No	1y6m	1y6m
IE	No	2y8m	2y8m (15 hrs/week)
EL	No	4y	4y
ES	Yes	3y	3y
FR	Yes	3y (2y in deprived areas)	3y (2y in deprived areas)
HR	No	No formal entitlement	Reduced fee
IT	Yes	5y	3y
CY	No	4y8m	4y8m
LV	No	1y6m	1y6m
LT	Yes	6y	Reduced fee
LU	No	3y	1y
HU	Yes	3y	3y
MT	Yes	2y9m	2y9m
NL	Yes	5y	4y
AT	No	5y	5y (20hrs/week)
PL	No	3y	3y
PT	Yes	4y	3y
RO	No	3y	3y
SI	No	11m	Reduced fee
SK	No	No formal entitlement	5y
FI	No	9m	6y
SE	No	1y	3y

Source: Study on the Economic Implementing Framework of a possible EU Child Guarantee scheme including its financial foundation. Draft final report based on Eurydice and OECD.

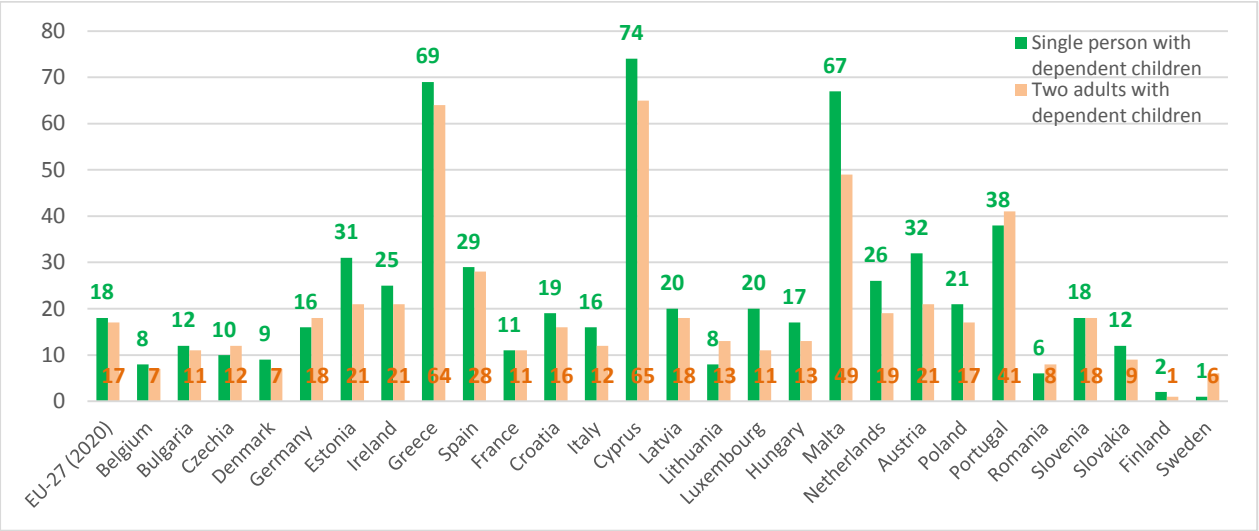
Education

Table B10: Annual costs of education (upper estimates for an "average child") and social benefits to cover them, EUR

Member State	Primary	General secondary	Vocational secondary	Maximum annual amount of social benefits available to low-income children Primary /Secondary
Austria	657	999	n.a.	171 / 78
Belgium	629*	1145*	1062*	n.a.
Croatia	200	580	700	n.a.
Cyprus	410	670	580	n.a.
Czechia	659	698	690	1485
Denmark	150	225	n.a.	150 / 225
Estonia	n.a.	n.a.	n.a.	382
France	291	906	1036	370 /404
Germany	n.a.	n.a.	n.a.	150
Greece	210	350	350	0
Hungary	78	78	78	114
Ireland	380	735	735	150 /275
Italy	250	1150	900	n.a.
Latvia	250	250	250	45
Lithuania	280	280	n.a.	78
Luxembourg	193	273	n.a.	1081
Malta	300	350	140	in kind
Netherlands	n.a.	n.a.	n.a.	434
Poland	165	186	233	664
Portugal	205	255	110	16
Romania	250	392	n.a.	27
Slovakia	n.a.	n.a.	n.a.	33 /45
Slovenia	1200**	n.a.	n.a.	n.a.
Spain	617	631	237	n.a.

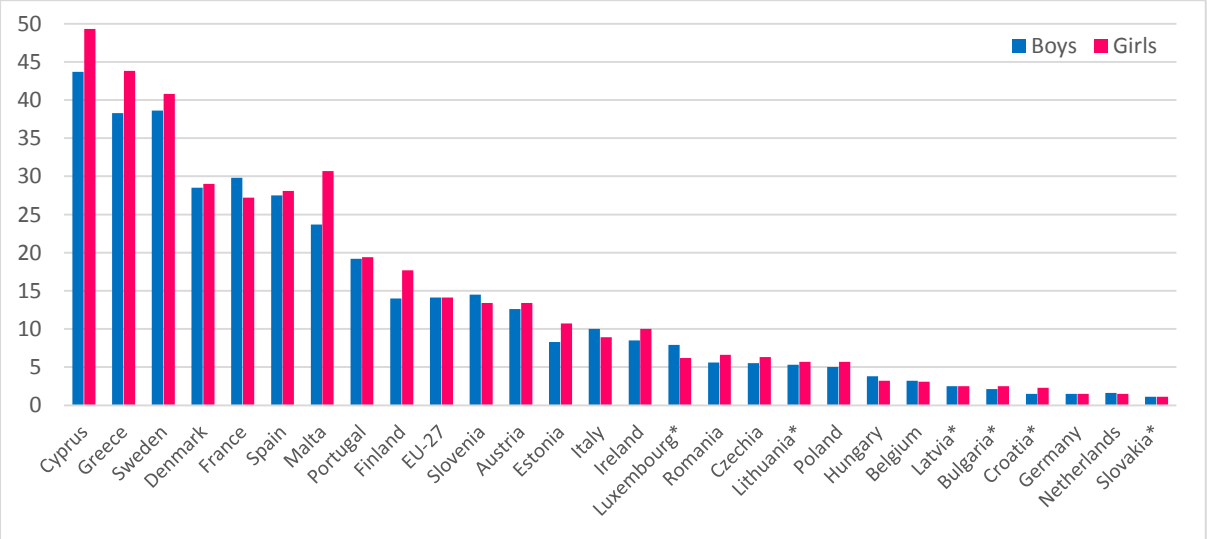
Notes: (*) includes all items except exams/fees, plus transportation, "free" financial contribution, and use of cafeteria (not meals); (**) includes school meals. Source: Study on the economic implementing framework of a possible EU Child Guarantee Scheme including its financial foundation. Draft Final Report.

Figure B11: Expenditure on education (EUR per each thousand euros of household consumption, 2015)



Source: Eurostat [hbs_str_t224].

Figure B12: Participation rate (%) in non-formal education and training during last 4 weeks, youth aged 15-19 y.o., 2019



Source: Eurostat [yth_educ_060], (*) indicates low reliability of data.

Healthcare

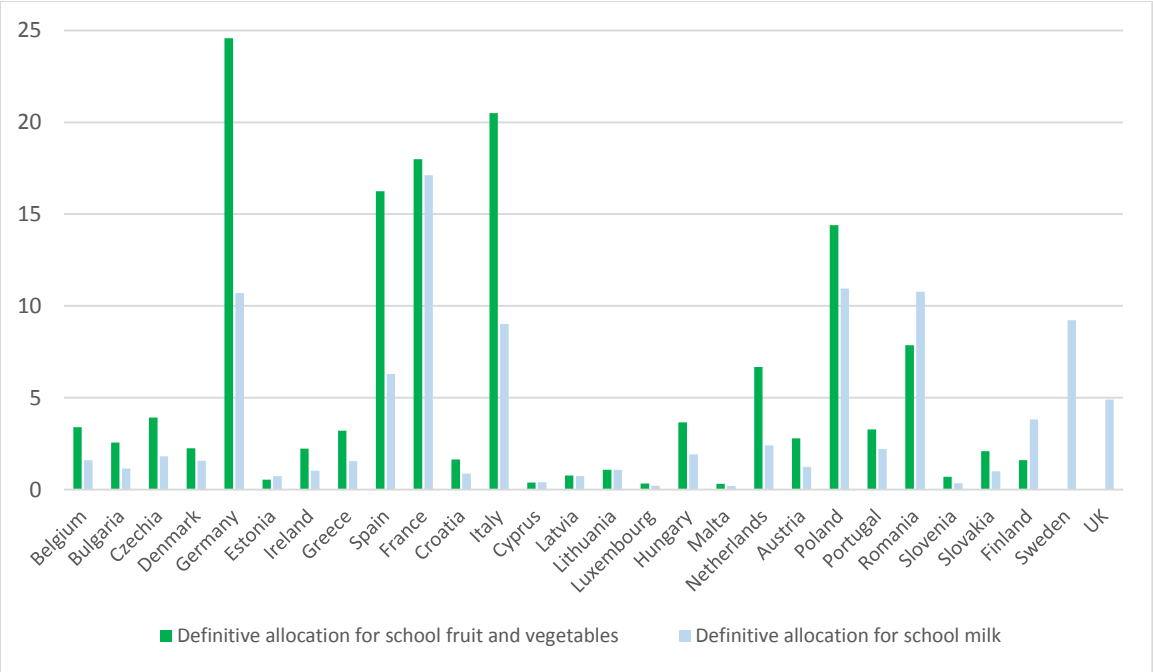
Table B13: Households with children with unmet medical or dental needs, 2017, %

	All households with children						Households composed of one adult with dependent child(ren)					
	AROP*		Not AROP*		Total		AROP*		Not AROP*		Total	
	medical	dental	medical	dental	medical	dental	medical	dental	medical	dental	medical	dental
EU-27	3,0	7,8	1,3	1,3	1,6	2,6	1,6	6,6	1,5	1,9	1,5	3,6
Austria	0,0	26,6	0,0	4,4	0,0	7,8	0,0	24,0	0,5	6,8	0,3	14,2
Belgium	7,8	7,5	1,4	0,8	2,5	2,4	3,9	n.a.	3,3	0,0	3,6	2,3
Bulgaria	4,7	5,8	0,9	1,6	2,0	2,0	9,3	6,4	17,9	0,5	14,7	2,7
Croatia	0,4	0,0	0,5	0,5	0,4	0,5	0,0	0,0	0,0	2,2	0,0	1,5
Cyprus	4,1	2,5	0,8	2,9	1,4	2,8	21,6	5,7	2,6	0,9	7,4	2,1
Czechia	2,4	6,0	2,8	4,0	2,7	4,4	3,6	23,1	4,0	3,9	3,8	9,8
Estonia	3,5	17,2	1,5	1,2	1,8	5,7	7,3	20,8	1,6	0,0	3,4	9,8
France	1,8	2,7	1,5	0,6	1,6	0,9	0,6	4,1	1,7	1,0	1,3	2,1
Germany	0,7	0,6	0,0	0,3	0,1	0,4	0,0	1,0	0,0	0,0	0,0	0,5
Greece	4,5	4,2	1,9	1,0	2,4	1,7	4,1	0,0	7,3	5,8	6,3	3,2
Hungary	0,0	9,9	0,3	2,0	0,2	3,1	0,0	n.a.	0,7	3,5	0,5	6,8
Italy	4,6	9,6	1,0	6,9	1,7	7,3	6,7	7,5	1,8	7,3	3,9	7,4
Latvia	4,8	1,1	1,9	4,4	2,4	3,6	2,3	0,9	1,9	0,7	2,0	0,8
Lithuania	4,2	1,6	1,7	0,5	2,3	0,7	0,0	10,5	0,0	0,0	0,0	5,1
Luxembourg	1,8	1,8	0,9	0,0	1,1	0,3	9,7	0,0	15,4	0,0	12,6	0,0
Malta	0,0	9,7	0,7	1,1	0,6	2,8	0,0	n/a	0,0	n/a	0,0	18,0
Poland	0,8	3,1	2,1	0,2	1,9	0,9	6,5	0,0	1,7	0,0	2,8	0,0
Portugal	3,7	2,3	0,3	1,9	0,9	2,0	0,8	10,9	0,0	2,1	0,3	3,8
Romania	11,7	18,8	5,3	2,8	7,4	6,0	n.a.	11,4	2,2	6,0	1,7	8,1
Slovakia	0,0	12,4	0,8	2,4	0,6	5,7	0,0	n.a.	0,0	0,0	0,0	3,5
Spain	0,8	3,4	0,1	0,3	0,3	0,9	0,0	0,0	0,0	0,0	0,0	0,0

Note: (*) AROP: at risk of [income] poverty. No reliable data for Denmark, Finland, Ireland, the Netherlands, Slovenia, and Sweden Source: Eurostat [ilc_hch14], extracted 2.12.2020.

Nutrition

Figure B14: Budget allocations under the EU school fruit, vegetables and milk scheme in the school year 2020/2021, EUR millions



Source: Commission Implementing Decision (EU) 2020/467 of 25 March 2020 fixing the definitive allocation of Union aid to Member States for school fruit and vegetables and for school milk for the period from 1 August 2020 to 31 July 2021.

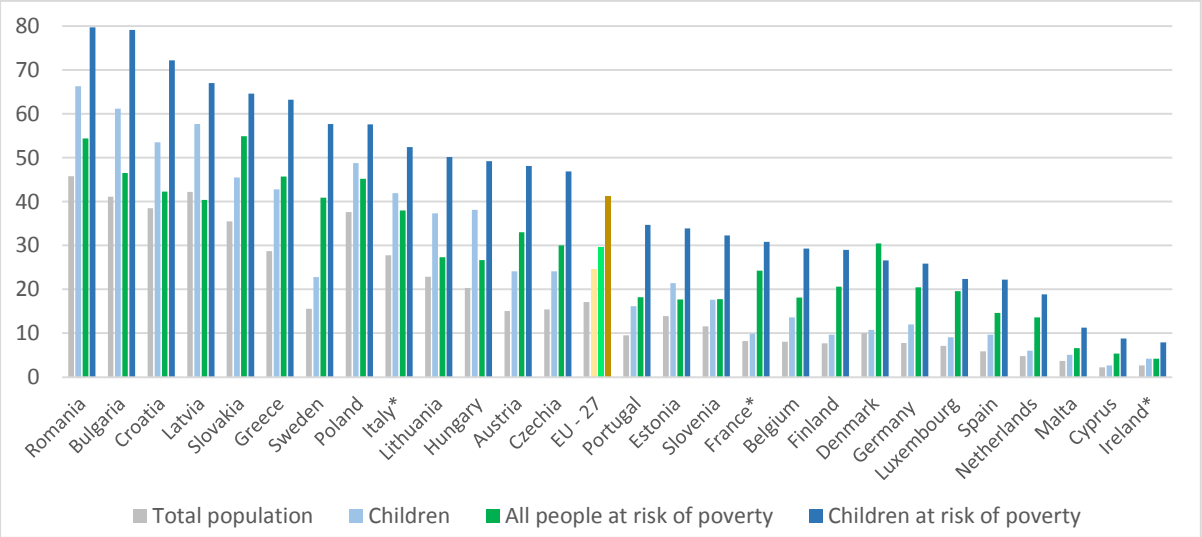
Table B15: Provision of free and subsidised school meals in the EU

Group 1: Universal free meals (at least at some ages)	EE, FI, LT, LV, SE
Group 2: Targeted free meals across the whole country	CY, CZ, DE, ES, HU, LU, MT, PT, SI, SK
Group 3: Subsidised meals and/or free meals not covering the whole country	AT, BE, BG, EL, FR, HR, IE, IT, PL, RO
Group 4: No provision	DK, NL

Source: Study on the economic implementing framework of a possible EU Child Guarantee Scheme including its financial foundation. Final Report.

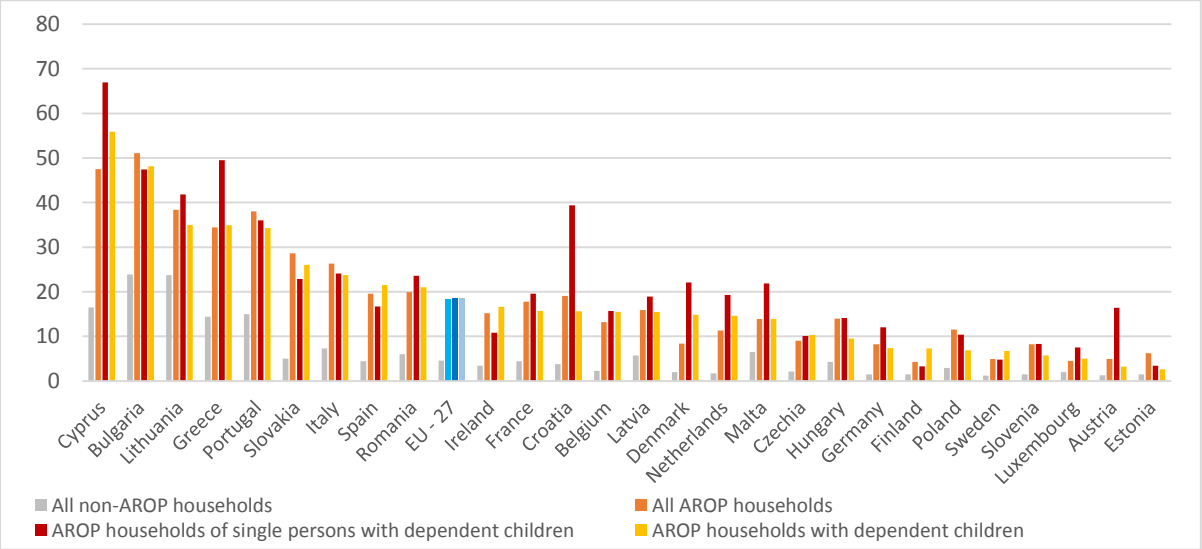
Housing

Figure B16: Overcrowding rate by age and poverty status, 2018 or 2019*



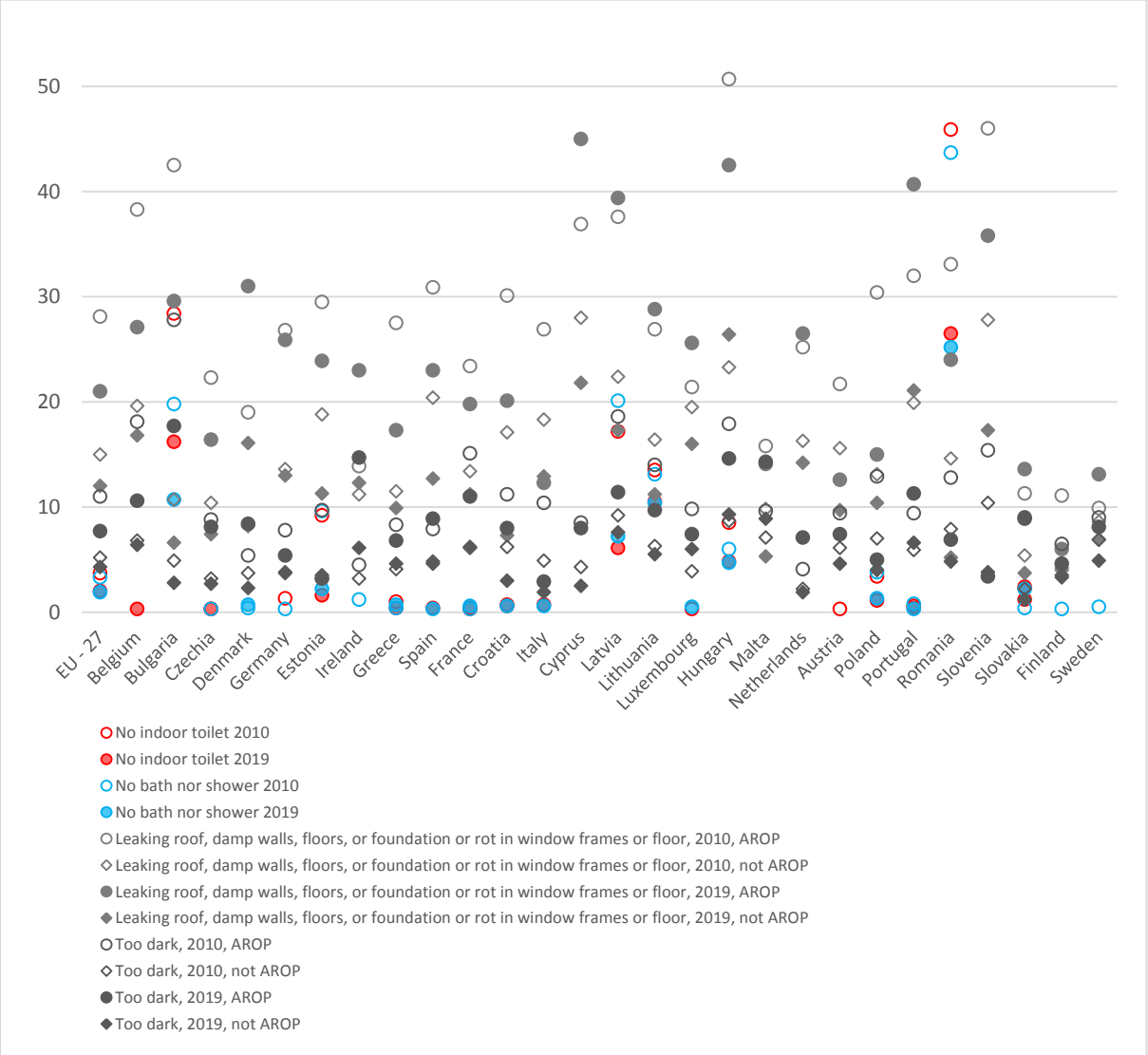
Note: Sorted by incidence among children at risk of poverty.
Source: EU-SILC.

Figure B17: Inability to keep home adequately warm



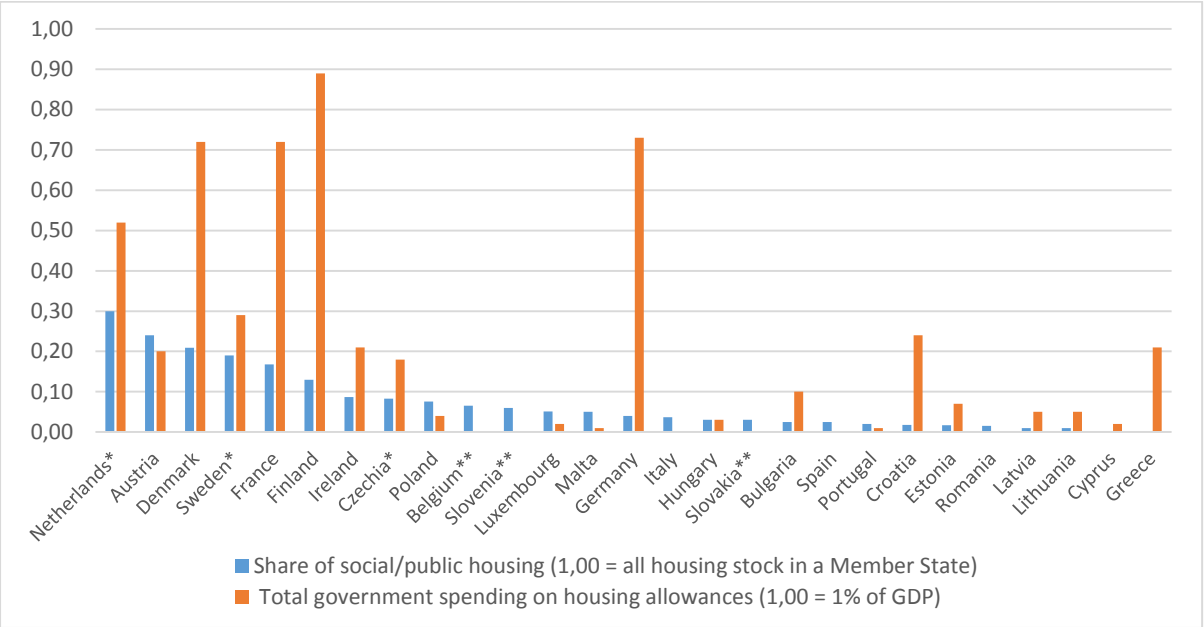
Note: Member States sorted by 'AROP households with dependent children' category.
Source: Eurostat, EU-SILC [ilc_mdes01] extracted 28.01.2021.

Figure B18: Share (%) of children who experienced various aspects of housing deprivation in 2010 and 2019, by income level of the household



Note: Only values of 0.3% or more shown.
Source: EU-SILC [ilc_mdho01].

Figure B19: Social/public housing as a share of total housing stock (2017) and Public spending on housing allowances (2018 or latest available)



Notes: (*) According to SPC delegates, the shares of social/public housing are 32% for the Netherlands and 3% for Czechia, and the share of households living in public housing is estimated at 30% in Sweden. In Member States marked (**), housing allowances are provided but data on public spending is not available.
Sources: Housing Europe, *The State of Housing in the European Union 2017* for the shares of social/public housing, and OECD *Questionnaire on Affordable and Social Housing* (2016, 2019) for the public spending on housing allowances.

ANNEX C: Report on consultation with stakeholders

INTRODUCTION

This report gives an overview of the wide consultation process carried out over the period July – November 2020. The purpose of the consultation was to collect and identify stakeholders' views and priorities on key elements of the Commission proposal for a Council Recommendation establishing a European Child Guarantee. The aim of this report is to provide an overview of consultation activities and their outcome, and to inform stakeholders about how their contributions were taken into account in the preparation of the proposal. The list of the consulted stakeholders is presented at the end of the report.

STAKEHOLDERS WHO PARTICIPATED IN THE CONSULTATIONS

Committee of the Regions

The dedicated hearing with the Committee of the Regions, Commission for Social Policy, Education, Employment, Research and Culture (SEDEC) took place on 25 November 2020. Members welcomed the concept of a European Child Guarantee, supported the envisaged scope and emphasized the importance of the European Social Fund Plus (ESF+) to support the proposal. They asked for more integration and participation of the regions in the design, management and implementation of the European Chid Guarantee and stressed the importance of other EU initiatives, such as the proposal for a minimum wage directive, which can be combined with the European Child Guarantee to mitigate child poverty.

European Economic and Social Committee

The dedicated hearing with the European Economic and Social Committee (EESC) took place on 11 November 2020. Participants welcomed the initiative. Members of the EESC stressed the importance of a holistic strategy to tackle child poverty and, on the funding side, the need for additional allocation of national funds to complement those coming from the European Union. Furthermore, the effects of the COVID-19 pandemic were discussed during the hearing, especially the impact on education, healthcare and housing.

Social Protection Committee

In June 2020, the Commission distributed a questionnaire to the Social Protection Committee[252] (SPC) asking for validation of some child policy-relevant data and for additional information on the undertaken policy measures. Altogether, 23 Member Sates replied to the questionnaire. The replies informed the evidence base for the initiative and gave useful national insights into various types of disadvantage children are exposed to as well as national efforts to address the issue.

Furthermore, on 20 November 2020, the SPC held an exchange of views on the Commission's preparatory work for the European Child Guarantee. The delegates reflected on their national challenges and opportunities in terms of child poverty and exclusion, focusing on children in need and their access to services. Delegates from 16 Member States took the floor and acknowledged the need for action in this area. The Chair concluded by

[252] The Social Protection Committee (SPC) is an advisory policy committee to the Ministers in the Employment and Social Affairs Council (EPSCO). The SPC is established with a Council decision under article 160 of the Treaty on the Functioning of the EU. See https://ec.europa.eu/social/main.jsp?catId=758.

confirming that the SPC stands ready to take part in the implementation and monitoring of the future Recommendation.

European Social Partners

The trade unions and employers' organisations were invited to take part in the hearing on 16 October to reflect upon the outlined challenges for children in need to access the services identified and their views on the planned initiative. The Social Partners welcomed the Commission proposal for the European Child Guarantee and overall focused their attention on the link between child poverty and employment situation of parents since one of the main drivers of child poverty is insufficient income in a household. The Social Partners raised the importance of promoting quality jobs as well as other of measures improving the employment situation of families with children.

Cities

Between July and September 2020, Eurocities carried out a survey of 30 cities across 18 Member States, mapping child poverty and identifying trends in the ways cities address it. Among the key findings, the report showed that 9 out of 10 cities have higher child poverty rates than the average for their Member State. Furthermore, the survey has shown that most cities have a strategy in place dedicated to reducing child poverty. Around a quarter of the cities participating in the survey, do not have such a strategy and deal with child poverty within wider anti-poverty strategies. While many cities are willing to do more for children, they face financial constraints.

Civil Society Organisations

Civil Society Organisations were thoroughly consulted through the online-targeted questionnaire and in the course of the strategic dialogue[253].

The targeted questionnaire was available online from 20 October to 10 November 2020. The survey focused on the identification of barriers that prevent children from accessing certain services. The purpose of this survey was to collect input from experts on the actions that could be taken at EU level through the European Child Guarantee in order to ensure that Member States foster access to services for children in need. The questionnaire was sent to civil society organisations working in the area of social inclusion. Those EU-umbrella organisations include foundations and special interest organisations advocating on behalf of children and families, focusing on poverty, children with special needs, children with migrant background and Roma children. Altogether, 34 respondents representing civil society organisations answered the questionnaire. In addition, Commission received four position papers.

The strategic dialogue took place on 26 November with the participation of 60 EU-level civil society organisations dealing with social issues, in particular children and family related. During the meeting, the Commission informed the participants about the main results of the targeted consultations. The Alliance for Investing in Children, European Social Network and Eurocities welcomed the initiative in the form of a proposal for a Council Recommendation and asked for an integrated approach to secure children's access to services. They insisted that Member States report annually to the Commission on their progress with implementation of the Recommendation, and that this reporting is taken into account in the European Semester process. The strategic dialogue also gave the stakeholders an opportunity to

[253] Strategic Dialogue involves an exchange of views between the Commission and civil society organisations on a specific initiative or action from the Commission.

highlight further suggestions for the initiative, e.g. as regards improved participation of children in the design of children-related policies.

Children

Between 25 September and 2 November 2020, UNICEF, Eurochild, Save the Children, World Vision and Child Fund Alliance conducted a joint consultation targeted to children (based in and outside the EU), dealing jointly with the EU Strategy on the Rights of the Child 2021-2024 (forthcoming) and the European Child Guarantee. This consultation consisted of two parts: (1) an online survey with 51 questions, targeting children aged 11 to 17, and (2) focus group interviews (online and face-to-face)[254]. In total, more than 10,000 children were consulted, of whom approximately 82% were from the EU[255].

Some of the main findings of this consultation are linked to the discrimination and exclusion faced by children, for instance, in access to basic services, unmet children's expectations at school, violence episodes in children's lives and the lack of consideration of children's point of views. Overall, these challenges affect specially the most marginalized groups of children.

Consultations on the Action Plan implementing the European Pillar of Social Rights

In January 2020, the Commission launched a broad public discussion feeding into the European Pillar of Social Rights Action Plan implementing the Pillar. The Commission invited abroad range of stakeholders to present, by 30 November 2020, their views on further actions needed and to pledge their own commitments to implement the European Pillar of Social Rights.

As the European Child Guarantee is highly relevant for the implementation of Principle 11 of the Pillar (Childcare and support to children), this consultation has also provided relevant feedback for the development of the proposal.

The European Parliament, several Member States, regional and local governments and civil society organisations strongly support the Commission's intention to propose a European Child Guarantee. Most civil society organisations expect the future Recommendation to be based on the three pillars of the 2013 Commission Recommendation on Investing in Children. They asked for multiannual national and subnational strategies including targets, indicators, an earmarked budget and a monitoring mechanism. For Greece, children should be considered as independent holders of social rights, in particular when it comes to affordable and accessible education and care (including ECEC). Investments in children are the most effective long-term investments. Estonia and Italy saw the need for an integrated approach to children with complex problems and called for a new strategy on the rights of children prioritising ending violence against children and providing safe environment for children.

European Child Guarantee roadmap consultation

[254] Focus group interviews in Bulgaria, Croatia, Cyprus, France, Portugal, Slovenia and Spain targeted diverse vulnerable groups, such as children with disabilities, Roma and other ethnic minority children, migrant and asylum-seeking children, children in alternative care and children living in poverty. Most of the participating children were aged between 9 and 17.

[255] The vast majority of the responses to the survey, over 8,000, come from member countries of the European Union, notably from Lithuania (1,771), Romania (1,454), Denmark (960), Ireland (902), Germany (771), Poland (632), Spain (278), Hungary (186), Italy (185), Portugal (165), France (153), Finland (141) and Slovenia (128). The second largest group of respondents are children from non-EU countries in the European region (almost 1,500). More than two thirds of these responses are from Albania (1,096 respondents), with multiple respondents also from Iceland (205 respondents), Kosovo (96 respondents), Switzerland (25), the United Kingdom (17) and Serbia (15). Due to the strong representation from some countries and less so from others, the responses here should be considered indicative and not representative of the entire wider European region. The online survey was available to collect responses from all countries in the world. 274 children from other parts of the world responded, notably from Mexico (43), the United States (27), India (26), Uganda (24), Afghanistan (21), Burkina Faso (20) and Paraguay (13).

The consultation launched with the European Child Guarantee roadmap was open for online comments between 19 August and 7 October 2020. In the course of the consultation, the Commission received 83 answers, including eight public authorities, three academic institutions and one business organisation, 31 representatives of public authorities (at national, regional or local level) and a representative of academic research team. Furthermore, the International Organisation for Migration responded to the Roadmap and the targeted online questionnaire. The United Nations High Commissioner for Refugees (UNHCR) office responded to the targeted online questionnaire. The International Labour Organisation (ILO) submitted an *ad-hoc* contribution, in which it reaffirmed its commitment to strengthening coordination and policy coherence in all aspects related to decent work including social protection. ILO welcomed the European Child Guarantee concept.

The general public could also provide their feedback to the Roadmap of the ECG. Altogether, seven replies to the roadmap questionnaire came from individual EU citizens.

SUMMARY OF THE RESULTS

General views on the initiative

Overall, the European Child Guarantee is a welcomed initiative and stakeholders stressed the importance of ensuring access to free healthcare, free education, affordable early childhood education and care (ECEC), decent housing, adequate nutrition and access to play and recreational activities for all children. Stakeholders stressed the importance of granting access for all children in order to avoid stigma and discrimination for children in need. Furthermore, stakeholders emphasised that the initiative needs to address exclusion and discrimination. In sum, children's protection from discrimination should become a priority in the European Child Guarantee.

Stakeholders broadly welcomed the Commission's approach, according to which the initiative should come in the form of a proposal for a Council Recommendation. However, employers' organisations questioned the effectiveness of a Council Recommendation to put in practice an effective implementation of this policy initiative.

Stakeholders emphasized the need to reduce bureaucracy in the provision of services for children and to simplify the procedures at national, regional and local levels. Likewise, many stakeholders referred to the 2013 Commission Recommendation 'Investing in children: breaking the cycle of disadvantage' and the European Pillar of Social Rights as the bases upon which the European Child Guarantee should be built. The European Child Guarantee also needs to be embedded in the integrated approach based on the three pillars of the aforementioned Commission Recommendation[256].

Integrated approach

Stakeholders highlighted the importance of developing and implementing integrated strategies in fighting poverty and breaking the cycle of poverty among generations, focusing not only on children's needs, but supporting entire families. Thus, they asked for an integrated approach of the European Child Guarantee with other EU actions on gender, race and LGBTIQ equality strategies, inclusion of persons with disabilities, homeless assistance and minimum income. Stakeholders agreed that targeting children requires a two-generation approach, providing policies supporting both children and their families. Those policies must

[256] The Recommendation based the strategy on the following pillars: (1) Access to adequate resources; (2) Access to affordable quality services; (3) Children's right to participate.

guarantee work-life balance, take-up of adequately paid maternity, paternity and parental or carers' leaves, support services, flexible work arrangements, and family-friendly workplaces. Stakeholders also recognised improving work-life balance and women participation in the labour market as important topics as children benefit from the fight against the unemployment of children's parents.

Target groups

Stakeholders stressed the importance of including specific groups of children in the target group of the European Child Guarantee, leaving no child behind. In this context, the Roma children, children with invisible or non-communicable diseases, unaccompanied children, homeless children, and young carers were mentioned. In addition to these specific groups, stakeholders suggested to address the initiative also to children living in large families (i.e. with three or more children) and to extend the upper age limit for the initiative's beneficiaries to 21 years. During the strategic dialogue, some stakeholders also exchanged views about leaving more space to Member States in defining the target groups. Some participants claimed that governments are better placed to understand which children are more in need of help and support. Others claimed that leaving more autonomy to Member States would risk leaving the most vulnerable children outside the initiative-related policy measures.

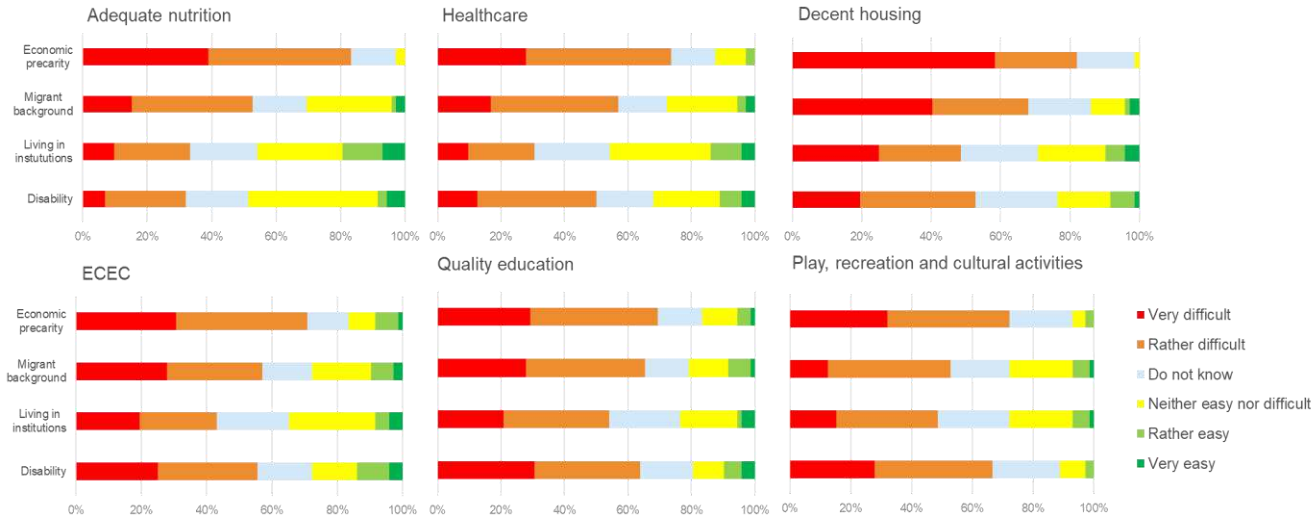
Impact of COVID-19 pandemic

An aspect considered relevant for the definition of the European Child Guarantee concerns the COVID-19 pandemic effects. Although children are the least likely to contract the disease, they are expected to suffer from long-term repercussions. The COVID-19 pandemic has also implications for all those children who relied on school meals - many of them do not have access to a proper meal per day due to school and day-care closures. Stakeholders asked to adopt measures to mitigate experiences of increasing poverty and inequality. On the funding side, stakeholders asked to consider the urgencies coming from the COVID-19 pandemic – such as lack of ITC equipment necessary for distant learning - and to cope with them. They asked to develop child poverty measures through financial instruments for the COVID-19 pandemic recovery and the EU budget 2021-2027.

Challenges faced by children in need

From the whole consultation process, it was possible to observe a general agreement of diverse stakeholders that access to specific services is a significant challenge for children in need. The stakeholders agreed also with the definition of barriers, which hinder the access to specific services as defined in the targeted online consultation.

In the targeted online consultation, the Commission asked the stakeholders to identify how difficult it is for various sub-groups of children in need to access various services. The graphs below summarize the responses: overall, children living in the economically precarious families are those with most difficulties in accessing services. At the same time, adequate housing is considered the most difficult service to access for all children in need, regardless of the kind of disadvantage they suffer.



In the targeted online questionnaire, the Commission asked stakeholders to confirm how much the identified barriers hinder the access to services for children in need. The vast majority of stakeholders pointed to affordability and availability of services as the two main barriers to access the services listed in the questionnaire. Altogether, 70% of respondents considered costs as the main obstacle to access decent housing. For other services, the percentages of affordability as a main barrier vary between 39% and 58%. Availability was identified as a barrier in particular with regard to ECEC services (54%). This reflects that in majority of Member States formal childcare services are still in short supply. Decent housing also is affected by the insufficient availability, as indicated by 50% of respondents. Stakeholders stressed that affordability and availability of services need to be considered jointly and not separately. Since affordability depends on the level of income, it affects mostly children in low-income families, and they should constitute a priority group for intervention.

Regarding other barriers, discrimination was also mentioned quite often, mainly in the context of access to quality education (44%), adequate housing (34%) and ECEC (29%). The lack of awareness or insufficient information were identified as the third main barrier in access to adequate nutrition (33%) and healthcare (33%). In addition, 35% of the responses pointed out that education services are not adapted to children's needs. The physical access to services appears as a barrier in participation in play, recreation, sport and cultural activities (31%).

During the entire consultation, stakeholders identified also other barriers, in addition to those listed in the targeted questionnaire. Limited budget and insufficient funds often lead to limited availability of services and sometimes affect their quality. At the same time, lack of transport means (especially in rural areas) and lack of language support affect the access for children to services they need. In the first case, children may not have the possibility to reach services, which are physically far from where they live. In the case of language, stakeholders have identified problems mainly in schools, where children with migrant background find it difficult to attend classes as they fall behind. The same applies to deaf children who experience problem considering that no further language support (sign language) is provided for them.

Recommended actions to be included in the European Child Guarantee

Stakeholders asked for direct EU financial resources and national budgets to strengthen national healthcare, education, and social care services and structures, ensuring that children in vulnerable situations have access to free health care and to community based mental health

and psychosocial support. In addition, it would be important that those children could access the European Child Guarantee in all EU Member States with no restrictions.

Education

Owing to the COVID-19 pandemic, many children are left out of education. Children cannot follow online classes due to the insufficient or lacking equipment and internet access. Stakeholders thus suggested that the EU invests in e-accessibility and digital skills for everyone through supporting and financing access for all families to broadband internet (at home or via sufficient public access points). They also proposed to grant free access to school in order to facilitate enrolment, as well as equal access to high quality and inclusive education to be provided to all children without distinction. In addition, socio-economically disadvantaged children including refugees, migrants and Roma should be provided with effective targeted support. Stakeholders also called on quality educational support structures to be in place for all children in residential settings such as hospitals and respite settings, in order to help them overcome gaps in their schooling.

Early childhood education and care (ECEC)

Regarding ECEC, stakeholders stressed that all children must not only have access, but that places are fit for children with special needs, disabilities, traumatic experiences, and other unique challenges throughout the span of their educational experience. Furthermore, stakeholders asked to ensure decent salary and fair working conditions for ECEC staff, as high quality services for children require highly qualified and well-remunerated professional staff.

Play, recreation, sport and cultural activities

Stakeholders highlighted that outdoor leisure activities are of vital importance to the physical and emotional wellbeing of children. Indeed, they stressed the importance of investments in green spaces, safe play areas, and active mobility schemes as important determinants of children's health. Stakeholders also asked for play and recreational activities to be inclusive and age-appropriate for all children in need.

Healthcare

Regarding healthcare services, stakeholders asked to implement specific healthcare professional training to enhance the skills of health professionals working in paediatric hospitals. This would help to identify and deal with child abuse in the form of neglect, which can relate to health, education, emotional development, nutrition, shelter and safe living conditions, and provide a clear process to help the child. About three-quarters of respondents to the targeted questionnaire consider providing free mental health and rehabilitation services both to children in need and to their parents or guardians to be a very effective policy response.

Nutrition

Many stakeholders agreed that the European Child Guarantee should call on Member States to provide healthy school meals and/or fruit and vegetables free of charge at all levels of education (i.e. ECEC to secondary). Four out of five respondents to the targeted questionnaire stressed the importance of promoting healthy eating habits, including by limiting advertisement of unhealthy foods and prohibiting their sales on school premises.

Housing

The consulted stakeholders tend to agree that well-designed and targeted housing allowances is the most effective policy to support children's access to adequate housing. During the strategic dialogue, stakeholders emphasised that housing and all linked aspects (housing exclusion, overcrowding, housing cost overburden) should have a role in the definition of the scope of the initiative. More generally, they called for the promotion of social housing in non-segregated areas, prioritizing families with children. Stakeholders asked to make sure that parents with children at risk of eviction or already homeless are not placed in homeless shelters but in temporary accommodation settings that will resemble a family environment, until a permanent solution is found.

EU and national funds to support the European Child Guarantee

Stakeholders welcomed the use of EU funds in relation to the initiative. Moreover, contributions stressed the importance for EU to focus on allocating funds to equalize opportunities so that every child is provided with equal access to all services.

In this context, stakeholders asked the Commission to urge the Member States to use EU funds strategically, and in line with their European Child Guarantee national action plans, as well as to recommend national governments to earmark 5% of the ESF+ resources to tackle child poverty at national level. Nevertheless, some stakeholders recognised the allocation of 5% of the ESF+ would not be sufficient to achieve the goal of the initiative. In general, stakeholders recommended Member States to complement national funds with EU funding. In addition, stakeholders call on the EU to include also other funding instruments, such as the EU cohesion policy and the Recovery and Resilience Facility.

Governance and monitoring

Stakeholders stressed the need for measurable and binding targets through which the Member States and the Commission may monitor improvements achieved at national and regional/local level. Stakeholders stressed the importance of the collection of better and more reliable data about children in need at national level, as this would allow easier and faster identification of these children. Improving the quality of data on child health, wellbeing, and social inclusion would help to monitor, compare and assess progress towards reducing child health inequalities, child poverty and vulnerability. Moreover, stakeholders also claimed that national governments should report to the EU on how they are progressing to end child and family poverty taking into account specific issues. These reports from Member States should feed into the European Semester process and to the monitoring of the Action Plan implementing the Pillar for Social Rights.

Involvement of children, civil society and cities

Many stakeholders stressed the importance of having children more involved in the decision-making process for policies that affect them directly, both at European and national levels. This should include the participation and dialogue with civil society working on children inclusion at Member State level, to allow civil society organisations and services providers to be able to comment and discuss policy options, with direct involvement of disadvantaged children and young people. Children, especially those in vulnerable situations, should be involved in the monitoring and evaluation of the national action plans and the multi-annual child poverty strategies.

In addition, representatives of cities stressed the role cities should play in the shaping of the ECG at all levels (EU, national, regional and local) in order to adjust the ECG to the local needs and contexts. Cities should be involved from the very beginning in defining national

strategies and lines of action to combat child poverty, as cities are closest to people and have better knowledge about children's needs and can also share at national level good practices for the fight against child poverty.

Outline of the consultation process:

Period of consultation	Stakeholders involved	Consultation format
July – September 2020	Cities	Online questionnaire, organised by Eurocities
25 September – 2 November 2020	Children	Online questionnaire and focus groups, organised by UNICEF, Eurochild, Save the Children, World Vision and Child Fund Alliance
19 August – 30 November 2020	General public, Civil Society Organisations, Public authorities, International Organisations, Researchers	Feedback on Roadmap and the open Call for input on the Action Plan on the Implementation of the European Pillar of Social Rights
16 October 2020	European Social Partners	Dedicated hearing
20 October – 10 November 2020	Public authorities (national, regional and local level) Civil Society Organisations, International Organisations, Academic researchers	Online, targeted questionnaire
11 November 2020	European Economic and Social Committee	Dedicated hearing
20 November 2020	Social Protection Committee	Dedicated hearing
25 November 2020	Committee of the Regions	Dedicated hearing
25 November 2020	International Labour Organisation	Ad-hoc contribution
26 November 2020	Civil Society Organisations	Strategic Dialogue Meeting