# Portugal

Country Profile on the European Semester and COVID-19 crisis from a children's rights perspective

#### Contributors

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22.3%

Children at risk of poverty or social exclusion (AROPE) in 2019

#### **Children in Alternative Care - CiAC**

CHORWEGIAN CSEA

CNORTH

STOCKHOLM @

BERLIN .

• AMSTERDAM

LUXEMBOURG

MEDITERRANEAN

	Total number of institutions (2019)	Number of children (2019)
Institutional care (in total)		According to the CASA report 2018:
		8,557 (4,319 boys   4,238 Girls)
Institutions for children with disabilities		
Institutions for children 0-3		According to the

MADRID

408 boys + 382 girls = 790 total



### Alternative Recommendations

# Supporting children and families in the context of COVID-19 in the short term:

- The government should provide affordable and timely access to mental health services for all, with special attention to infant mental health.
- The government should provide adequate financial support to families in vulnerable situations.
- The government should provide internet access and computers to those families who still do not have it in order to ensure that every child will be able to attend home schooling.
- The government should listen to children's views and suggestions.
- The government should tackle the impact of this crisis on accessing housing.

# Supporting children and families in the context of COVID-19 in the long term:

- The government should take action to reduce inequalities in access to healthcare, by improving the timely access to high quality health services for all, with special attention to children. One way to achieve this is to subsidise private and third sector healthcare providers that complement the national health service (Serviço Nacional de Saúde SNS) to satisfy unmet healthcare needs.
- Portuguese families need adequate financial support, as the current social transfers are known to be not very effective in tackling poverty and social exclusion.
- The government should put children at the heart of all its policies.
- The government should work on housing opportunities for vulnerable families.
- The government should promote health guidelines that do not

- exclude groups of children in the most vulnerable situation.
- The government should prioritise the participation of young people in the shaping of the use of new EU funding period and the Portuguese post-COVID policies and funds.

### Children in Alternative Care (CiAC):

- In the event of a pandemic the government should issue specific guidelines for children and young people in institutional care to differentiate them from the elderly population.
- The government should launch the programmes to promote and develop family-based care as the best solution for children without parental care by accelerating implementation of the legal procedures that will put in place the new law concerning foster families.
- The government should put an end to the institutionalisation of babies between 0-3 years old.

#### **Summary of Ratings**

Government's support for families and children during the COVID-19 pandemic:



Positive EU impact on more child-centred legislation at national level:

-000

2020 Country-Specific Recommendations:



### **Child Poverty**

### Impact of the COVID-19 crisis

#### **Negative developments**

There are no proposed or implemented measures related to the long-term effects of the COVID-19 pandemic. Numerous families have had to face a severe reduction in their income.

During the schools lockdown there were several negative developments: children were deprived of social contacts with their peers; parents had to balance working from home with managing online school activities for their children; many children had no means to follow online activities, as they did not have access to computers and/or the internet; parents can face serious difficulties in helping their children with school activities as they might not have a

sufficient educational background.<sup>1</sup> And this might happen again if the schools will not be able to keep open.

Access to healthcare became more difficult as the SNS and the private health sector stopped all non-urgent appointments (including follow up appointments, screenings and ongoing therapies) and surgeries. The country also witnessed an increase in mental health problems, like depression and anxiety.

According to UNICEF Portugal,<sup>2</sup> the main issues concerning children are: inequalities accessing home schooling due to the lack of available means (computer or internet) and of parenting support; increased food insecurity due to the families' loss of income and to the difficulties in assuring access to school meals for every child in a vulnerable situation; more difficult access to basic goods and services; children with special needs without adequate

health and educational support; insufficient physical activity and playing opportunities; higher risk of abuse at home and online, as well as higher exposure to domestic violence; inadequate follow-up of children in vulnerable situations or at risk, as the child protection system is designed to work in an in-person model, and gaps in the identification of new cases of vulnerability.

#### **Government measures**

The Portuguese government promoted support for families after the schools closed, establishing that workers who need to leave work for urgent assistance to children under 12 or with special needs, resulting from the closure of a school, early childhood support or disability, are entitled to exceptional support for the family. To access this support, the worker must submit a statement to his/her employer, who is responsible for applying for support from Social Security.<sup>3</sup>

The government also adopted the programme Programa de Estabilização Económica e Social (PEES - Economic and Social Stabilisation Programme)<sup>4</sup> which launched two new measures to support families: a stabilisation supplement and an extraordinary family allowance. These social support payments aim to compensate those who lost part of their salary in the last few months due to the pandemic.

Complemento de Estabilização (Stabilisation supplement): is a financial support for workers who were laid off between April and June 2020. This support is a one-off measure which aims to compensate the loss of wages in relation to a month of layoff. Regrettably, only workers who earned less than €1,270 per month are entitled to this stabilisation supplement. Payments vary between €100 and €351.

<sup>1</sup> According to the OECD, in 2018, 50.2% of the Portuguese population aged 25-64 years old had less than upper secondary education

<sup>2</sup> UNICEF Portugal: Coronavirus

<sup>3</sup> Encerramento das escolas - apoio às famílias

<sup>4</sup> Programa de Estabilização Económica e Social

Abono de Família Extraordinário – the extraordinary family allowance was approved by the government to support Portuguese families as a complementary benefit to the family allowance, which will start to be paid in September by Social Security. It covers families with children and young people up to the age of 16, who fall into the first, second or third income bracket. This exceptional support should cover 974,000 Portuguese children and young people.<sup>5</sup>

The main criticism of these measures concerns the fact that the financial supplements are inadequate, the administrative procedures to follow when applying for it are burdensome, and the time delay before receiving the subsidy is quite long.

With the return to school, children and young people who come into contact with colleagues infected with COVID-19 may have to be in preventive isolation; and in such cases, parents can justifiably miss work without being penalised through their income.

#### **Examples of good practice**

- In March 2020, Fundação Nossa Senhora do Bom Sucesso set up a free mental health helpline and managed to maintain remote child psychology, psychiatry and speech therapies, among others, for our users/clients.
- Due to COVID-19, many health services were put on hold, so Fundação Maria Ulrich released a series of videos to help families to maintain the psychomotricity stimulation of children from six to 36 months old.
- Food Bank Portugal had to support families that have not been in a vulnerable situation before - like arts professionals, freelancers, etc. - as the pandemic left them without any kind of work and, consequently, without an income. Similarly, the Fund for European Aid to the Most Deprived (FEAD) together with local campaigns in Portuguese supermarkets and local churches provided food and basic supplies for the most deprived.
- Many civil society organisations maintained their support to families through digital means.

### Concrete examples of challenges in supporting families and children

Portugal witnessed a worrying increase in infant mental health problems. Fundação Nossa Senhora do Bom Sucesso shared the cases of three children, aged 6, 9 and 11, from different families and social backgrounds. Before the lockdown, all of them did well in school and were well-behaved. With the beginning of the lockdown, they started to have sleep problems, nightmares, and became increasingly aggressive. As time went by, they started to have aggressive behaviours towards their siblings and parents. All of them refused to learn from home when online or TV schooling started. The child aged 11 became addicted to YouTube and started to watch violent videos more and more often. Family members and teachers stated that they "did not know that child anymore". The nine-year-old developed regressive behaviour: she/he could not sleep alone anymore and started sleeping with his/her youngest sister: when contradicted, she/he answers with animal-like behaviours: she/he does not want to wash her/himself or get dressed; she/he became addicted to videogames. The child aged six wanted to sleep with her/his parents. She/he became progressively more violent towards her/his mother and showed less and less regret for these behaviours.

<sup>5</sup> Covid-19: conheça as novas medidas de apoio às famílias

### **Policies for Investing in Children**

### National strategy to tackle child poverty

Portugal does not have a national strategy to tackle child poverty. However, the Portuguese Government just created a Committee to present a proposal for a National Strategy against Poverty until de end of this year<sup>6,</sup> which can be a crucial opportunity to put child poverty on the national political agenda.

Breaking intergenerational cycles of poverty takes time. In Portugal public policies are interlinked with electoral cycles, so policy makers are more concerned with what they can achieve in the four years they have in government than in setting up long term strategies. Child poverty is a multi-dimensional and complex social problem, so tackling it requires inter-sectoral collaborative approaches. Due to the Portuguese "working in silos" culture, however, this is very hard to put in place.

A national strategy to tackle child poverty is urgently needed, as 22% of Portuguese children are at risk of poverty or social exclusion and civil society organisations are worried that this rate will rise with the impact of COVID-19. Furthermore, the country still has an in-work poverty rate of almost 10%.

Despite all the evidence and recommendations about the deinstitutionalisation of children, almost nothing has been done in our country. There are around 7,000 children in alternative care in Portugal and only 3% of them are in family-centred arrangements.

Children don't seem to be a priority in Portugal. There is very little child-centred legislation. Policies that affect children, like for instance early childhood education and care (ECEC), are mainly put in place to allow parents to go to work, and not because they can have positive effects on child development.

### EU influence on national developments

The EU has insufficiently influenced the government to implement child-centred legislation. To be more efficient in pressuring European governments towards child-centred legislation implementation the EU needs to:

- Acknowledge that health –
   understood as a state of complete
   physical, mental, and social well being and not merely the absence
   of disease or infirmity is the base
   of our well-being.
- Acknowledge that the first three years of life are crucial in our personal development. Indeed, 80% of the human brain develops during these first years. This implies that there is a unique opportunity to intervene early in the life of a person to promote the development of cognitive, social, and emotional skills.

- Acknowledge that Early Childhood Education and Care cannot be seen merely as a means to allow parents to work, but as a multinational concept that includes a professional response to the specific needs of the children under their responsibility; parenting support and financial support to families.
- Acknowledge that the
   establishment of personal
   safe bonds is crucial in child
   development. This is one of the
   reasons why children should not
   be in centre-based alternative care
   arrangements.
- Acknowledge that investing in the first years of life is the best way to build a healthier and sustainable society as childhood investments have great return potential for both individuals and society.

The 2020 Country Specific Recommendation (CSR) was disappointingly focused only on economic recovery and did not mention children. It was outrageous to read that the need to have better support for families, increase ECEC coverage and promote better policies of work-personal life balance was based on the need to increase the fertility rate, and not on supporting child development and well-being.

Social policy issues - like education or health - seem to be understood uniquely as tools for economic growth rather than means to societies' sustainability (health and education are the two main factors to break intergenerational cycles of poverty and social exclusion!).

There are no specific references to children, child health or child poverty, even if children are one of the most vulnerable groups of the Portuguese population.

Although most of the children in out-of-home alternative care are institutionalised - only around 3% were in family-based care – and this can have severe consequences on child health and well-being, the CSR does not mention the importance of promoting the transition from institutional to family-based care.

In 2016, the Portuguese CSR highlighted the need to ensure the long-term sustainability of the health system, referring to the need to improve the measures aimed at promoting disease prevention and primary healthcare provision in the early stages. While the situation has not changed since 2016, the latest version of the CSR does not mention this utmost necessity.

### Access to financial resources and services of high quality

One of the main concerns is the access of children to quality health care. The country has one of the highest households' out-of-pocket payments for healthcare of the entire European Union – around 28%.

It is true that the national health system is open to everyone who needs healthcare and that in Portugal there is a system of exemptions concerning the national health system for every child (from birth to 18 years old). However, the sum of these two factors is not tantamount to a real access to quality and timely health care for every child. And this is due to the organisation of the national health

system: for a hospital consultation with a specialist, children wait months, or even years.

Additionally, children with special needs don't always have access to the early intervention they need, as the as the National Early Intervention on Childhood System (Sistema Nacional de Intervenção Precoce na Infância) has no means to answer to all the children in need of it.

This lack of access to health has serious consequences both in school and in health throughout the lives of Portuguese citizens. Portugal urgently needs to understand that investing in high quality and timely healthcare leads to a higher well-being, educational success, and better social inclusion. In the long run, this would entail having healthier citizens, with better quality of life; higher employability; higher work capacity; higher productivity; lower labour absenteeism; and so on.

### **Children in Alternative Care (CiAC)**

### Impact of the COVID-19 crisis

The government did not support institutions that take care of children; it just increased the number of monitoring calls to guarantee that sanitary conditions were fulfilled.

According to the rules of the Directorate General of Health, issued at the end of July, a child who has just been removed from his/her family and placed in alternative care must enter the institution alone and cannot be accompanied by a reference figure, not even by the case manager / team (the host meeting must be done by phone or email). The child must do the COVID-19 test and even with a negative result, it is compulsory to isolate a child for 14 days. This rule was suspended with the start of the school year. A complaint was made by civil society to the Ombudsman (Provedoria de Justiça) that this

rule was unconstitutional and undermines the rights of the child.

# Preventing the unnecessary entry of children in alternative care

The gatekeeping mechanisms for the support of vulnerable families are the same for all kinds of families. According to civil society organisations working in institutional care, there is no extra financial support for their organisations, just more pressure from the Ministry of Social Affairs to follow the health guidelines.

### Progress on child protection reforms

Important changes to the foster families' regime came into force in January 2020. The government measures ensured more rights and support for the foster families, which are now equivalent to those for other families in terms of labour law and social benefits.

The State now provides between €522.91 and €691.55 per child, when the previous minimum amount was around €330. The precise amount of the support is assessed according to the age of the children and also considering conditions of vulnerability such as disability.

Unfortunately, the implementation of this new regime is delayed by the practical difficulties arising from the pandemic and a national debate on institutional care.

#### **EU funds**

In 2017 more than €11 million were invested within the scope of Portugal Inovação Social Program (Portugal Social Innovation programme) in 38 innovative projects aimed at combating social problems, such as unemployment, social exclusion or food waste. With regard to children, ECO media reports that these projects included the monitoring of children's health, a new methodology to tackle autism, the promotion

of digital skills to combat school drop-out and promote youth employability. I However positive, these projects are in place only in some Portuguese regions and are not reaching all the national territory. For example, albeit recording the highest number of children in alternative care of the country, the Lisbon Region is not included in the Inovação Social Program. The proposed Child Guarantee could help to change this paradigm by focusing on the childhood segment despite the region of provenance.

For more information, please consult the 2020 Eurochild Report or contact Enrico.Tormen@eurochild. org and Zuzana.Konradova@eurochild.org

<sup>7</sup> Fundos comunitários também ajudam a cumprir sonhos de crianças doentes

<sup>8</sup> Casa Report 2018