

European Care Strategy

Eurochild position



Eurochild
Putting children at
the heart of Europe

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About Eurochild



Eurochild advocates for children’s rights and well-being to be at the heart of policymaking. We are a network of organisations working with and for children throughout Europe, striving for a society that respects the rights of children. We influence policies, build internal capacities, facilitate mutual learning and exchange practice and research. The United Nations Convention on the Rights of the Child is the foundation of all our work.

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Eurochild working papers are exploratory texts that allow for discussions on emerging policy areas and their implications on children’s rights.



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Introduction

Eurochild welcomes the announcement by the European Commission to develop a European Care Strategy¹, and the commitment by the Council of the European Union to ‘promote active and healthy ageing, as well as the accessibility, affordability and quality of childcare and long-term care, including through enhancing support for formal and informal carers.’² Eurochild supports calls from civil society actors³ for a ‘life-course’ and continuum of care approach, which considers **care needs** from **infancy** and **throughout people’s lives**.

Access to, and providing, quality care across the life-cycle is part of a strong ‘social Europe’ as envisaged in the European Pillar of Social Rights Action Plan and necessary for living up to the EU Charter of Fundamental Rights. While the delivery of care is a national competence of Member States, and national models differ, there are commonalities across countries. Therefore, as an EU-wide vision of care could improve access and quality, ensure that the needs of individuals, families and communities are met, and that the dignity and rights of carers and those being cared for are upheld.

The Covid-19 pandemic has put unprecedented strain on the delivery of care, both formal and informal, impacting all age groups. **Children and families have been profoundly affected, with particular disruptions to childcare, early childhood education, child protection services, care for children in alternative settings and children with disabilities and special educational needs.** Many children and families continue to experience the ongoing impact of the pandemic. This has led to growing numbers of children feeling overwhelmed, afraid, angry and had led to an increase in the number of children experiencing mental health problems⁴. While comprehensive data on the impacts of the pandemic on child and adolescent mental health is limited, it is clear that lockdowns, school closures, social isolation, increased poverty and the disruption to mental health support have had a profound effect on the mental health of many children⁵, exacerbating existing rates of mental health problems among children and young people. Children in alternative care have been particularly affected – with increased isolation, restricted opportunities for

¹ *State of the Union 2021*, European Commission

² Council of the European Union, *Taking forward the Strategic Agenda 18-month Programme of the Council (1 January 2022 - 30 June 2023)*, 10 December 2021 <https://data.consilium.europa.eu/doc/document/ST-14441-2021-INIT/en/pdf>

³ *European Care Strategy - The EU as a driving force for better care for all?* AGE Platform Europe, 13 October 2021 <https://www.age-platform.eu/special-briefing/european-care-strategy-eu-driving-force-better-care-all>

⁴ <https://www.eurochild.org/news/children-speak-up-about-the-future-and-rights-they-want/>

⁵ *The State of the World's Children 2021, On My Mind: Promoting, protecting and caring for children’s mental health*, UNICEF, 2021 https://www.unicef.org/reports/state-worlds-children-2021?utm_source=referral&utm_medium=media&utm_campaign=sowc-web

family visits, for education and social interaction, and caregivers often ill-equipped to provide the necessary support.⁶

The proposal for a European Care Strategy is an opportunity to implement a vision of care that addresses the impacts of Covid-19 on children and families – especially those facing poverty and exclusion - and the problems that have been exposed and exacerbated by the pandemic. It is also an opportunity to support existing EU commitments and policy frameworks, including the Social Pillar Action Plan, the European Child Guarantee, the EU Strategy on the Rights of the Child and the European Disability Rights Strategy 2021-2030. An EU Care Strategy must also support gender equality and uphold the rights of carers, both formal and informal, the vast majority of whom are women.

Care and caring for children - the challenges

There is no single definition of ‘care’ or ‘caring’ at EU level. However, there is a growing consensus that care extends beyond keeping people healthy to ensuring that everyone with support needs – across their life-cycle - can live in dignity and enjoy their rights on an equal basis with others.⁷ ‘Care’ refers to a range of services and activities – home and community based social care services, childcare and child protection provision, and care for adults with support needs. Such care can be formal and informal, with specific consideration needed to ensure that care is adequately recognised, valued, remunerated or supported. Overall, quality of care varies significantly, data is limited, and care provision is underfunded and understaffed, with informal carers particularly unrecognised and under-valued⁸.

Children – especially in their earliest years – rely on care and caregivers. Investing early in nurturing care for all children is essential for their healthy development and the wellbeing and prosperity of communities and society. Care work is done by parents, families and other caregivers – whether paid or unpaid. The bulk of caring responsibilities are still

⁶ *Growing up in lockdown: Europe’s children in the age of COVID-19* Eurochild, 2020
<https://eurochild.org/uploads/2020/12/2020-Eurochild-Semester-Report.pdf>

⁷ *EASPD Position Paper on the EU Care Strategy*, European Association of Service Providers for Persons with Disabilities, October 2021 [EU Care Strategy EASPD Position Paper.pdf](#)

⁸ *EPP Group Position Paper on A European Care Strategy*, July 2021,
<https://www.eppgroup.eu/newsroom/publications/epp-group-position-paper-on-a-european-care-strategy#>

currently taken on by women.⁹ There is also the need to help fathers and men play a more substantial role in sharing care responsibilities. Nurturing care¹⁰ for very young children provides the foundation for children to reach their full potential and shapes their preparation for school and beyond.¹¹ Despite increased understanding of the importance of caring for children to ensure their healthy development and wellbeing, especially children with particular or complex needs, the availability, affordability and quality of formal care services remains a challenge, with many children and families not able to access quality services throughout infancy and childhood.

Early childhood education and care (ECEC) plays a crucial role in children's development. Yet provision, access, affordability and quality vary significantly between and within countries, especially for very young children and those experiencing poverty and social exclusion. Our data analysis¹² on early childhood showed the need to guarantee universal access to ECEC services, particularly for children under three and those most in need. In addition, despite targeted policies for children in vulnerable situations, a lack of infrastructure and insufficient preparation and capacity to respond to their specific needs contribute to disparities in access and quality. Addressing these disparities requires increased public investment in ECEC alongside greater support for families with young children at risk of poverty and social exclusion, and strengthening the capacity and professional development of ECEC staff to respond to children's needs from their earliest years, with tailored expertise and support for the most disadvantaged and those with complex needs.

⁹ *Gender inequalities in care and pay in the EU*, European Institute for Gender Equality (EIGE), November 2020 <https://eige.europa.eu/publications/gender-inequalities-care-and-pay-eu>

¹⁰ *Nurturing Care for Early Childhood Development. A framework for helping children survive and thrive to transform health and human potential* (2018) WHO, UNICEF, World Bank Group, Every Woman Every Child, PMNCH, Early Childhood Development Action Network

¹¹ Richter L, Black M, Britto P, et al. *Early childhood development: an imperative for action and measurement at scale*. BMJ Global Health, 2019

¹² *Nine country profiles highlight the need for greater attention to early childhood development across Europe, First Years First Priority campaign*, July 2021 <https://firstyearsfirstpriority.eu/nine-country-profiles-highlight-the-need-for-greater-attention-to-early-childhood-development-across-europe/>

Quality of Early Childhood Education and Care

Despite growing enrolment, many children still don't have access to high-quality ECEC, especially those facing poverty and social exclusion who may attend services that offer poorer quality. Ethnic segregation in educational settings, the lack of inclusiveness and the low quality of services are major hindering factors. For many families, such as those from ethnic minorities or migrant backgrounds, who are more frequently exposed to such disadvantages, ECEC settings can feel unwelcoming. All EU Member States have lower enrolment rates for children from ethnic minorities, refugee children, children with special needs and those from lower socio-economic groups, compared to the general population. Children in rural areas, those living in internally displaced communities and children of economic migrants working in other countries as caregivers, face particular barriers to accessing quality ECEC.

The early childhood workforce is often inadequately prepared, undervalued and underpaid. Public investment in ECEC remains lower than other stages of education, impacting accessibility and quality.¹³ There is a need to improve the quality of teaching, including with ongoing training opportunities, and ensuring a welcoming environment for children from different backgrounds, with targeted programmes and increased awareness of social inequality among teachers and staff. By increasing and valuing diversity in ECEC and improving the capacities and satisfaction of the workforce, the quality of early childhood experiences can significantly improve.

Principle 11 of the European Pillar of Social Rights states that 'children have the right to affordable early childhood education and care of good quality'. The European Care Strategy should help make this ambition a reality.

Caring for children with disabilities

Children with disabilities must be supported with the appropriate level of care that meets their needs, and enables them to live as autonomously as possible and enjoy their rights under the UN Convention on the Rights of Persons with Disabilities and the UN Convention on the Rights of the Child. Children with disabilities must not be separated from their biological families and placed in alternative care due to a lack of community-based services, inclusive education or adequate support. To ensure children with disabilities can stay with their families, a range of measures need to be developed that will support home and community-based care services. These key services must be integrated with healthcare,

¹³ *Starting Strong VI. Supporting Meaningful Interactions in Early Childhood Education and Care*, OECD, 2021

social care, education, financial and other measures that support children with disabilities and their carers.

In line with the European Pillar of Social Rights and the European Strategy on the Rights of Persons with Disabilities, the European Care Strategy must commit to transitioning from institutional care to quality community and home-care services.

Provision of quality family and community-based care

Despite the EU's commitment to the deinstitutionalisation of children in alternative care and to transition to quality family and community-based care, the DataCare¹⁴ project by Eurochild and UNICEF has estimated a total of 303,000 children in residential care in EU countries. In addition, children with disabilities and of migrant and ethnic origin are overrepresented in residential care settings.¹⁵

However, given the diversity of definitions¹⁶, it is hard to estimate how many of those children reside in institutional care. We use the following definition of institutions: children are isolated from the wider community and obliged to live together; children and their parents do not have sufficient control over their lives and over decisions that affect them; the institution's requirements take precedence over a child's individual needs¹⁷. Placement in institutional care is not in children's best interests, and is particularly harmful to very young children, by significantly disrupting a healthy life-course development¹⁸.

¹⁴ *Final findings from the DataCare project make a clear case for monitoring progress in deinstitutionalisation*, Eurochild and UNICEF, December 2021 <https://www.eurochild.org/news/new-research-from-eurochild-and-unicef-makes-a-clear-case-for-monitoring-progress-in-deinstitutionalisation-for-children-in-alternative-care/>

¹⁵ Better data for better child protection systems in Europe: Mapping how data on children in alternative care are collected, analysed and published across 28 European countries, UNICEF and Eurochild, 2021 <https://eurochild.org/uploads/2022/01/UNICEF-DataCare-Technical-Report-Final.pdf>

¹⁶ [Better Data for Better Child Protection Systems in Europe – Eurochild](#)

¹⁷ [OD_DI_QA_07122017.pdf \(openingdoors.eu\)](#)

¹⁸ Marinus H van IJzendoorn et al; *Institutionalisation and deinstitutionalisation of children 1: a systematic and integrative review of evidence regarding effects on development*, *Lancet Psychiatry* 2020; 7: 703–20

For many years, the EU has supported deinstitutionalisation reforms in many countries. Still, much remains to be done to prevent family separation and ensure the transition from institutional to community and family-based care. In line with the Guidelines on the transition from institutional to community-based care¹⁹, additional investment and support is needed to enable all children to grow up in quality family-based care, including their biological families, extended families or foster care, and avoid institutionalisation. In addition, foster care (and professional foster care) as well as specialised foster care for children with special needs should be further developed.

The European Care Strategy should fully commit to the transitioning from institutional care to quality community and family-based care services.

Young carers

While largely hidden from public policy discourse on care and caring, many children and young people under 18 across Europe provide care and assistance to family members or others with support needs. There is very limited data on the number of young carers, but there are indications that they are a significant group²⁰. For example, young carers are estimated to make up 6% of those aged 13-17 in the Netherlands, 8% of children from 10-15 years old in Switzerland, and 7% of children from 14-16 in Sweden.²¹ Many young carers take on substantial caregiving, with levels of responsibility that are typically associated with adults. This can be at the expense of their own needs, with young carers potentially missing out on educational, social and other opportunities, and with risks to their health and wellbeing.²²

The European Care Strategy should recognise young carers, engage them in identifying and voicing their needs and ensure they are supported and can reach their full potential.

¹⁹ *Common European Guidelines on the Transition from Institutional to Community-based Care*, European Expert Group on the Transition from Institutional to Community-based Care, November 2012 <https://deinstitutionalisationdotcom.files.wordpress.com/2017/07/guidelines-final-english.pdf>

²⁰ [Me-We-European-brief.pdf](#)

²¹ A. Hassan, *Who cares for young carers in Europe?* September 2021, <https://entwine-itn.eu/who-cares-for-young-carers-in-europe/>

²² *The young carer's journey: from vulnerability to growth*, Eurocarers <https://eurocarers.org/young-carers/>

Recommendations

We would welcome a European Care Strategy that:

- Sets out a comprehensive, positive, ambitious and life-cycle approach to care across the EU – from birth, infancy and childhood, throughout the life-course and into older age. Synergic collaboration with all interlinked authorities/DGs (not just SANTE, but EAC, EMPL, etc. should be ensured. Such a strategy should be based on fundamental rights and outline ways in which the EU can support Member States, develop a quality framework and catalyse best practice.
- Identifies ways to ensure more public investment in early childhood education and care, including strengthening the capacity, remuneration and professional development of carers so they can respond to children’s care needs, with particular attention and investment in caring for children living in poverty and exclusion and those with complex and multiple needs.
- Supports the development of community-based strengthening programmes and day-care centres for children and families at risk to prevent separation of children from their families.
- Sets out a clear vision and roadmap for ending institutional care for all children and transitioning to quality family and community-based care, with increased investment and support services for family- and community-based care, including foster care and specialised foster care.
- Recognises the role of young carers, understands and supports their needs and ensures their participation in all decisions which affect them.
- Sets out ways to ensure that care workers are adequately recognised, supported and remunerated and have access to occupational training, health and safety and security, with opportunities for professional development and work-life balance.
- Supports improved data collection on formal and informal care across the EU – disaggregated by gender, age, disability, availability and affordability, and the type of care provided or received. Such data must include the role and experiences of carers and those who are cared for, and their families, including children under 18.
- Ensures the meaningful engagement with all relevant stakeholders: European and national civil society organisations, parents, families, caregivers and children in the development, implementation and evaluation of a Care Strategy, including children in alternative care and young carers.

- Supports Member States' implementation of the European Child Guarantee as an opportunity to increase public investment in care services for children, including ECEC services, and to strengthen caregivers' capacity and expertise to respond to children's care needs, especially the children most in need.