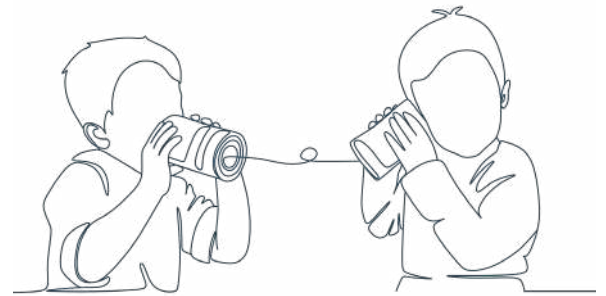


## PRINCIPLE 11

# Childcare and support to children

“Children have the right to affordable early childhood education and care of good quality. Children have the right to protection from poverty. Children from disadvantaged backgrounds have the right to specific measures to enhance equal opportunities.”

- Principle 11 of the European Pillar of Social Rights



## Childcare and support to children as a determinant of health

The time between birth and compulsory primary school age is the most [formative period of children's lives](#), impacting lifelong learning, social integration, health and wellbeing, development, and potential employability.

### Childcare and support to children as determinants of health

Early childhood education and care (ECEC) are key health determinants. They play a significant role in reducing risky health behaviours, increasing health literacy and efficacy of self-care, and preventing chronic diseases in adulthood. Childcare can offer a health-enabling environment in which all children can benefit from healthy diets, physical activity, and psychosocial and cognitive support to set them well for life.

While in principle access to childcare may be universal, practice paints a different picture. The [high cost of ECEC can generate inequalities in access](#). As a result, children from disadvantaged backgrounds and from families with lower socioeconomic status are less likely to attend, and when they do, the services they attend are of poorer quality.

These inequalities lead to [lost opportunity for ECEC as a potential equaliser of opportunities](#). This in turn affects learning and health outcomes in subsequent years, and across the life-course. For example, research shows large cognitive benefits of formal childcare leading to [a potential for higher earnings in adulthood](#), and in the US the increase in yearly GDP due to universal pre-school attendance is estimated to be of 0.16-0.44%. Indeed, the economic return on investment in ECEC is higher than that of any other time during childhood and adolescence.

Over [18 million children in the EU have grown up in poverty or social exclusion](#). Providing conditions which enable affordable ECEC and break the intergenerational cycle of poverty and social exclusion are essential to positive health outcomes across the life-course.

## What does the EPSR Action Plan say?



The EPSR Action Plan sets out **three key goals** for EU Member States:

- ✓ Education and care must be accessible and affordable to all young children in line with the [Council Recommendation on High Quality Early Childhood Education and Care Systems](#) (2019).
- ✓ The number of people at risk of poverty or social exclusion should be reduced by at least 15 million by 2030, where at least 5 million should be children.
- ✓ The provision of formal early childhood education and care should be increased to ensure that at least 78% of the population aged 20 to 64 is in employment by 2030.

## Where are we now?

The [Social Scoreboard](#) measures progress on the principles of the EPSR. Linked to the principle of childcare and support to children, the Scoreboard outlines that in the EU:

- ✓ There is a 24.2% at-risk-of-poverty rate or exclusion for children (0-17).
- ✓ Only 32.3% of children aged less than 3 years are in formal childcare.

\* Latest figures - 2020



## What are public health actors doing?

The following actions taken by public health actors at (sub)national level can support the implementation of this EPSR principle.

### **Bulgaria - Improving maternal and child health and early childhood development in vulnerable groups**

The Bulgarian National Center of Public Health and Analysis (NCPHA) - through its dedicated Department on Child and Youth Health - is actively involved in actions which improve maternal and child health, particularly among vulnerable groups.

- The “Nurse Family Partnership – Bulgaria” project – a home visiting program for pregnant women and children up to 2 years of age from vulnerable groups (mainly the Roma community and families living in poverty). The NCPHA is involved in the programme’s adaptation and implementation within the health system, as a service to these targeted groups.

## Principle 11: Childcare and support to children

- The [We Care Project](#) aims to improve maternal and child health within vulnerable groups with a focus on Roma communities. It brings together eleven organisations in their efforts for system changes at national level in health policies with direct impact on the child's development from pregnancy until the age of 3. Experts from the NCPHA are involved in the project's advocacy initiatives, and in ensuring access to prenatal care, medicines, healthy nutrition and parental services.
- The Center for Maternal and Child Health project is an innovative care model for pregnant women, also providing support to families in raising newborns and children up to age of 3 years. For the implementation of the project, a Memorandum of Understanding was signed between UNICEF, the Bulgarian Ministry of Labour and Social Policy, the Ministry of Health and others, involving the participation of multiple stakeholders.

### France - Health promoting strategies and preventative interventions

- Under the new health inequalities program, Santé publique France (SpF) advocates the reduction of health inequities from early childhood. In partnership with UNICEF, SpF focuses on the inclusion health equity from early childhood is accounted in public policies, particularly with respect to [air quality](#) and mental health.
- SpF is also developing a health promotion strategy to address the need for [psychosocial skills among children, young people and adults](#) in educational settings. This action is part of an inter-ministerial strategy.
- SpF developed a health promotion strategy around the [first 1000 days of childhood](#) to address the need for adapted interventions which account for different socioemotional environments that may impact children and their families, upholding the principle of proportionate universalism.



Other preventative interventions are aimed at families with psychosocial vulnerability factors. For example, the [Panjo](#) programme, organises home visits during pregnancy and the first year of the child, and the [French adaptation of the Family and Parenting Support Program](#) aims to strengthen parenting skills and develop older children's (6-11 year olds) psychosocial skills.

### Wales - Adverse childhood experience (ACE) support hub

The [Adverse Childhood Experience Hub](#), established in 2017, is funded by the Welsh Government and hosted by Public Health Wales. The hub aims to transform public services, organisations, and communities to become aware of ACEs and to be trauma informed in practice, breaking the inter-generational cycle of ACEs, adversity, and trauma across the life course.

The ACE Hub has worked with a range of sectors, including housing, policing and criminal justice, youth work services and sport. From the outset, one of the priorities has been to support the development of a Whole School Approach to Mental Health and Wellbeing, and to ensure that every school in Wales is ACE aware, inclusive and can confidently respond to trauma, helping children to flourish and have the best start in life.

This inclusive approach has garnered impressive results, including increased pupil attendance and less exclusions and has also been adapted for use in pre-school settings. In efforts to transfer the educational system, the Hub has also produced a [Trauma and ACE \(TrACE\) Informed Organisational Toolkit](#) to encourage organisational self-assessment, identification of existing good practice and action plans around areas for strengthening.



## Portugal - Fostering cross-sectoral collaboration in disease prevention

In 2019, the Portuguese National Health Service developed an integrated model for interpersonal violence prevention, implemented through the National Program for the Prevention of Violence in the Lifecycle within the Directorate-General for Health. It included interventions on health action for children and youth at risk, among others.

This National Program was created to reinforce prevention, diagnosis, and intervention mechanisms in interpersonal violence, with special attention to persons in situations of increased vulnerability, especially in early ages. Close collaboration is fostered among health professionals, police, child protection services, educational and judicial and social protection systems.

The National Health Institute Doutor Ricardo Jorge (INSA), a public organisation of the Ministry of Health, carries out research on the health needs of children and works closely with other governmental institutions to provide such information to decision-makers.

### Addressing nutrition and childhood obesity through community involvement

An example of this is the participation of the Food and Nutrition Department in the MUN-SI Programme, which coordinates municipality action, the academia and researchers from the National Institute of Health Doutor Ricardo Jorge, and the institutional support of Health and Education and Science Ministries. It is a child health promotion program that aims to reduce the prevalence of pre-obesity and childhood obesity in Portugal through community involvement. The main aim is to address and tackle childhood malnutrition in Portugal through a set of activities in which local environments can mobilize the community to adopt healthy lifestyles, also in line with the Portuguese National Health Plan on obesity prevention.



## EU tools that help implement Principle 11

There are a range of other **policies and instruments at the EU level** that can help relevant actors in the field, including in public health, to work together to achieve EPSR Principle 11 on Childcare and support to children.

More information about the EU institutions and programmes is available on EuroHealthNet's Health Inequalities Portal.

### More about the EPSR as a tool for regional and national action

The EPSR can therefore be a strategic tool to shed light on national or subnational priorities on childcare and support to children. It could in turn **highlight possible entry points for public health professionals** within existing initiatives and resources created as a result of other EU instruments and encourage strategic linkages between public health and non-health stakeholders.

In view of the already overstretched capacities of the health sector, the **EPSR could be an underpinning framework in promoting integrated approaches** - giving public health elevated importance in the sectors which deal with the social determinants of health and embedding the public health agenda in different fora.

## The European Child Guarantee

The [European Child Guarantee](#) invites Member States to:

- Guarantee free and effective access for children in need to early childhood education and care, education, and school-based activities, at least one healthy meal each school day and healthcare.
- Member States should guarantee effective access for children in need to healthy nutrition and adequate housing.



## The EU strategy on the Rights of the Child

The [EU strategy on the Rights of the Child](#) invites Member States to:

- Prioritise children in national mental health strategies and build networks to support their mental wellbeing.
- Invest in more effective violence prevention and protection measures; provide adequate support to vulnerable children who suffer violence.
- Adopt legislation to ban corporal punishment in all settings.
- Improve the functioning of child protection systems at national level.
- Create a safe digital environment for children through effective and equal access to digital tools, digital and media literacy, accessible online educational tools.
- Promote national strategies which move towards quality, family- and community-based care services.



## The Council Recommendation on High-quality Early Childhood Education and Care systems

The Council Recommendation on High-quality Early Childhood Education and Care Systems offer guidance to

- Work towards accessible, affordable, and inclusive ECEC to support physical, socio-emotional, and cognitive development of children, taking into account the barriers faced by families, particularly those in disadvantaged situations.
- Promote further integration of ECEC in the education continuum.
- Promote transparent and coherent monitoring and evaluation of ECEC, together with adequate funding and a legal framework.

## The European Care Strategy

Focuses on EU action on to provide high quality accessible and affordable care services for children and people in need of long-term care, and to support decent working conditions for care workers.

In 2022, the EU Member States [revised the 2002 Barcelona targets](#) on early childhood education and care to enhance women's labour market participation. The previous targets called on Member States to provide childcare to 33% of children under 3 and to 90% of children from age 3 until mandatory school age.

The new ambitious targets for 2023 aim that:

- 50% of children below the age of 3 are in early childhood education and care;
- 96% of children between the age of 3 and the starting age for compulsory primary education are in early childhood education and care"

The [revision of the Barcelona targets](#) on early childhood care and education further increase participation in affordable, accessible, and quality early childhood education and care.

## Available resources

### Available EU funding

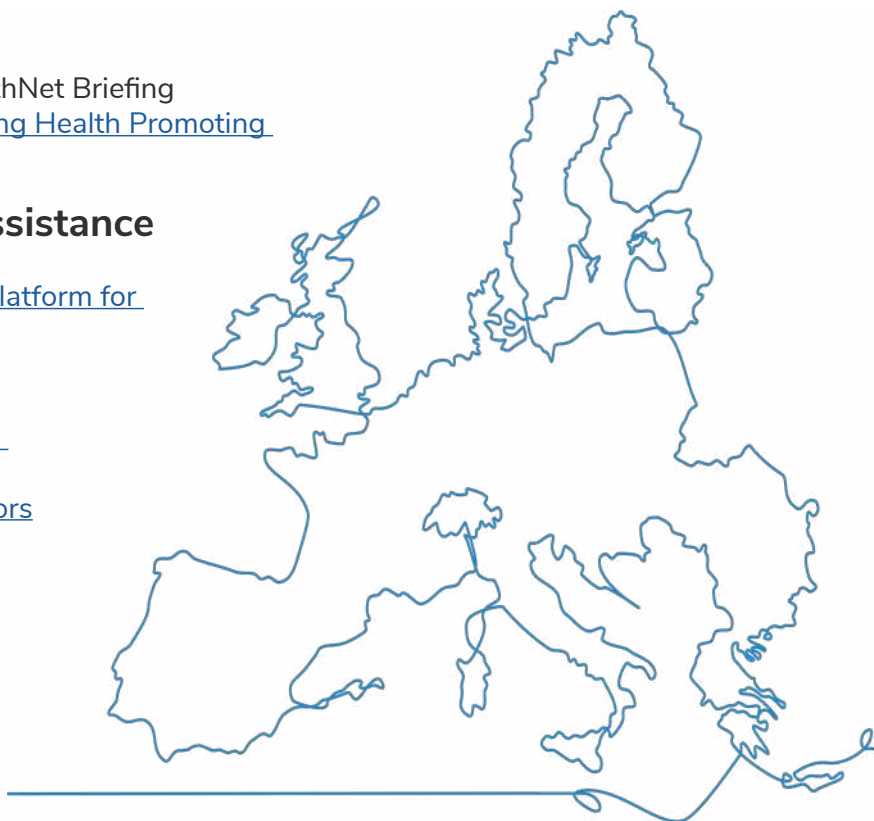
- [EU Funding explained](#) - A EuroHealthNet Briefing
- [EuroHealthNet's E-guide on Financing Health Promoting Services](#)

### Contact points for further assistance

- [European Commission's European Platform for Investing in Children \(EPIC\)](#)
- [EU Alliance for Investing in Children](#)
- [EU Network for Children's Rights](#)
- [Centre for Global Health Inequalities Research \(CHAIN\)](#)
- [National Child Guarantee Coordinators](#)
- [National Ombudsman for Children](#)

### Technical resources

- [Technical support instrument](#)
- [OECD Child Well-being dashboard](#)



## Have your say

Does your public health institute have any promising policies or practices in place that support the implementation of this EPSR principle? Send your thoughts to EuroHealthNet's Policy Assistant, Emilia Lindquist at [e.lindquist@eurohealthnet.eu](mailto:e.lindquist@eurohealthnet.eu).

## References and more flashcards

All EPSR flashcards are available at [epsr-flashcards.eurohealthnet.eu](https://epsr-flashcards.eurohealthnet.eu). Scan the QR code to view more flashcards and to access the links to the references in this flashcard.



# The European Pillar of Social Rights

## Flashcard tool

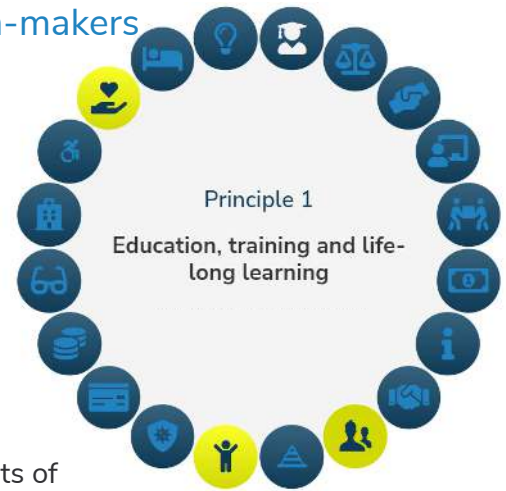
- A guide for public health professionals and decision-makers

### What is the European Pillar of Social Rights?

The EPSR sets out 20 key principles, agreed upon by EU Member States, to **achieve sustainable and inclusive societies**.

The **EU Action Plan on the EPSR** sets out actions at European level to turn the principles in concrete actions. It also proposes headline targets for the EU to reach by 2030.

The EPSR sets the **aspiration and implementation priorities for a more social Europe for all**. A more social Europe paves the way for a healthier Europe. By addressing the underlying determinants of health, the European Pillar of Social Rights can be considered a **European Pillar for Health**.



### About the EPSR flashcards

The flashcards are designed to **demonstrate how EPSR principles can contribute to achieving health and wellbeing**. Each flashcard explores a different principle and sets out what public health authorities across Europe are doing to help build progress.

Each flashcard sets out

- ✓ How the EPSR principle is relevant to public health
- ✓ Concrete goals set out by the EPSR Action Plan
- ✓ The EU tools available to implement the EPSR principle
- ✓ What European public health authorities across Europe are doing to implement the principle
- ✓ Available EU funding and contact points for further assistance

### About EuroHealthNet

**Building a healthier future for all by addressing the determinants of health and reducing inequalities.**

EuroHealthNet is the Partnership of public health agencies and organisations building a healthier future for all by addressing the determinants of health and reducing inequalities. Our focus is on preventing disease and promoting good health by looking within and beyond the health system.

Structuring our work over a policy, a practice, and a research platform, we focus on exploring and strengthening the links between these areas.

Our approach focuses on integrated concepts to health, reducing health inequality gaps and gradients, working on determinants across the life course, whilst contributing to the sustainability and wellbeing of people and the planet.

To find out more about us, visit [www.eurohealthnet.eu](http://www.eurohealthnet.eu).



[www.health-inequalities.eu](http://www.health-inequalities.eu)

[www.eurohealthnet-magazine.eu](http://www.eurohealthnet-magazine.eu)



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