

## **Diagnosis of the situation for children in Spain before the implementation of the European Child Guarantee**

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## Acronyms

AC	Autonomous Community
BMI	Body mass index
CGNAP	Child Guarantee National Action Plan
CSE	Compulsory secondary education
EAFRD	European Agricultural Fund for Rural Development
EC	European Commission
ECG	European Child Guarantee
ECV	Encuesta de Condiciones de Vida
ENSE	<i>Encuesta Nacional de Salud</i>
ERDF	European Regional Development Fund
ESCS	Economic, social and cultural status
ESF	European Social Fund
ESL	Early school leaving
EU-SILC	EU Statistics on Income and Living Conditions
F&V	Fruits and vegetables
FEAD	Fund for European Aid to the Most Deprived
MVPA	Moderate-to-vigorous physical activity
NGO	Non-governmental organization
OECD	Organisation for Economic Co-operation and Development
PIRLS	Progress in International Reading Literacy Study
PISA	Programme for International Student Assessment
SEN	Special educational needs
SES	Socioeconomic status
SNS	<i>Sistema Nacional de Salud</i>
SSB	Sugar-sweetened beverage
TIMSS	Trends in International Mathematics and Science Study

## Introduction

This report aims to provide a comprehensive, evidence-based, and nationally-endorsed analysis of the ways in which national and sub-national policies, programmes, systems, processes and mechanisms have helped to address child poverty in Spain, with a particular focus on children who are especially vulnerable.

The review frames the diagnosis their situation in relation to five policy areas included under the European Child Guarantee (ECG) initiative: child poverty, early child education and care, education, health and nutrition, and housing. It is based on a systematic analysis of the indicators, relevant information drawn from in-depth interviews with key informants, and a thorough literature review that brings together previous analyses on child poverty and social exclusion in Spain. The territorial dimension and potential implementation deficits receive particular attention, both in the data analysis and in the review of the existing literature.

It is accompanied by an additional 'deep-dive' report on specific initiatives to reduce poverty and social exclusion among children, with detailed recommendations for the full implementation of the ECG in Spain.<sup>1</sup>

## Background to the European Child Guarantee

In 2015, the European Parliament called on the European Commission and the European Union Member States, *"in view of the weakening of public services, to introduce a Child Guarantee so that every child in poverty can have access to free healthcare, free education, free childcare, decent housing and adequate nutrition, as part of a European integrated plan to combat child poverty"*.

The European Commission proposal for the ECG was adopted by the European Union's Employment, Social Policy, Health and Consumer Affairs Council (EPSCO) in June 2021. The focus is on effective and free access to quality services in the fields of early childhood education and care (ECEC), education, health care, nutrition and adequate housing.

The European Commission (DG Employment) has partnered with the UNICEF Regional Office for Europe and Central Asia (UNICEF ECARO) to test how the ECG could work in practice and provide recommendations for the successful design and implementation of the ECG. As part of this engagement, UNICEF ECARO has been working since July 2020 with national and local governments from seven EU Member States (Bulgaria, Croatia, Germany, Greece, Italy, Lithuania, and Spain) and key national and local stakeholders in these countries.

Part of this support has included the development of 'policy deep dive' country studies. The overall objective of these deep dives is to support the national governments in the seven pilot countries to design, implement, and evaluate ECG. The deep dives are designed to provide the information and evidence base that governments need for the development of evidence-informed European Child Guarantee National Action Plans. The deep dive analyses look at policies, services, budgets, and mechanisms to address children's service access barriers and unmet needs in the five thematic areas of the ECG: early childhood education and care (ECEC), education, health, nutrition, and housing.

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<sup>1</sup>UNICEF, *Initiatives to reduce poverty and social exclusion among children and recommendations for the implementation of the European Child Guarantee in Spain*, UNICEF Europe and Central Asia Regional Office (ECARO), Geneva, 2021.

The deep dives have been designed to help governments to identify the children who should be prioritized in their future CGNAPs and to recommend the policy measures that need to be put in place at national, regional and local levels to complement existing policy measures that have been effective in providing positive outcomes for children. In addition, the deep dives identify, compile and recommend indicators that could be used to monitor and evaluate the impact of the CGNAPs and recommendations on how to address the identified gaps in data.

**For more information on the ECG, see:**

<https://ec.europa.eu/social/main.jsp?catId=1428&langId=en>

## 1. CHILD POVERTY IN SPAIN: KEY TRENDS, DYNAMICS AND CHALLENGES

- Spain has experienced relatively high levels of child poverty since the Great Recession of 2008, with wide disparities across the country.
- Younger children and other vulnerable groups are at the greatest risk of all forms of poverty, including those from larger households, from migrant backgrounds, and from Roma communities, as well as those with disabilities.
- The application of the European Child Guarantee in Spain should aim to balance the need to guarantee basic rights to all children in difficult situations with the need to focus on those who are highly vulnerable to poverty.

Spain is one of the countries that experienced the greatest increase in both inequalities and poverty rates during and following the global economic and fiscal crisis of 2008. The well-being of children was severely damaged over the six years of the Great Recession as a result, in large part, of growing unemployment rates and the poor level of social protection available to large segments of Spanish society.

While most children suffered the consequences of the cutbacks in education and social programmes that were introduced in response to the Great Recession, the plight of Spain's most vulnerable children – who were already disadvantaged in comparison to those in most other European countries – deteriorated still further.

More recently, worsening socioeconomic conditions for many vulnerable households as a result of the COVID-19 pandemic have made an already difficult situation even more fragile for large numbers of children. Unfortunately, the available data do not yet enable us to grasp the full magnitude and intensity of the impact.

This chapter will examine the overall situation of child poverty before exploring its specific forms, its evolution as a policy issue, its budget indicators and the governance and distribution of welfare. It will also examine gaps between policy goals and outcomes before setting out its conclusions.

### 1.1. The situation of child poverty

#### Relative income poverty

According to 2019 data, 27.4 per cent of children in Spain live at moderate risk of poverty, 13.1 per cent are at high risk, and 6 per cent are at severe risk (Alto Comisionado contra la pobreza infantil, 2019).<sup>2</sup>

Children appear to be particularly vulnerable to relative income poverty: in 10 of the last 12 years, those aged 0 to 17 have been the age group most likely to be at moderate risk of poverty (Alba et al., 2020). If we disaggregate the indicators by sex, we find that 26.4 per cent of boys are at moderate risk of poverty, while girls are at even higher risk (28.5 per cent). A closer look at age groups reveals that 29.3 per cent of children aged 12 to 17 are at moderate

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<sup>2</sup> The at-risk-of-poverty rate is the share of population with an equivalized disposable income (after social transfers) below a poverty threshold. The three most common thresholds are set at 60 per cent (moderate), 50 per cent (high), and 40 per cent (severe) of the national median equivalized disposable income after social transfers (see Eurostat Glossary: At-risk-of-poverty rate).

risk of poverty, while the rates are lower for those aged 6 to 11 (26.4 per cent) and for children younger than 6 (26.7 per cent) (See Table 1.1).

**Table 1.1.** Child poverty in Spain

Children and adolescents at risk of poverty (%)				
By age	< 18y	< 6y	6y-11y	12y-17y
	27.4	26.7	26.4	29.3
By educational attainment level of their parents	< 18y	< 6y	6y-11y	12y-17y
Less than primary, primary and lower secondary education	51.8	51.6	49.9	53.8
Upper secondary and post-secondary non-tertiary education	37.1	40.5	34.4	36.2
Tertiary education	11.7	11.6	11.9	11.5
By country of birth of their parents	Spain		Foreign country	
	19.2		51.1	

Source: *Encuesta de Condiciones de Vida*, 2019.

Looking at anchored poverty reveals hidden poverty by presenting the share of children at risk of poverty using the threshold of a specific point in time in the past (i.e., keeping the purchasing power of the threshold fixed and, therefore, controlling for changes in the price of goods). Using the 2008 threshold, 31.5 per cent of children in Spain were at a moderate risk of poverty in 2019. After four consecutive years of child poverty reduction, 2019 saw a 3.8 per cent increase in children living at moderate risk of poverty.<sup>3</sup> After disaggregating by sex, we see that 30.6 per cent of boys and 32.4 per cent of girls lived in anchored poverty conditions in 2019.

An exploration of persistent poverty indicators provided by the Spanish Living Conditions Survey (*Encuesta de Condiciones de Vida* – ECV), allows us to see the share of children who have been living in households with relatively low income both in the current year and at least two out of the three preceding years, revealing that 17.4 per cent of children are at a persistent moderate risk of poverty. Poverty is once again feminized in this indicator, with 19.4 per cent of girls at persistent risk compared to 15.4 per cent of boys.

#### Absolute child poverty

Spain's Economically Active Population Survey (*Encuesta de Población Activa* – EPA) publishes household data that enable us to calculate the share of households without any source of income and with at least one child and/or teenager.<sup>4</sup> Data from the fourth-quarter of 2020 show that 138,300 households (or 22.7 per cent of all households with at least one child/adolescent) had no income (Alto Comisionado contra la pobreza infantil, 2019).

#### Material deprivation

Material deprivation indicators provide us with a complementary image of the vulnerability experienced by children. Children are considered to be living with material deprivations if they are unable to access three of a list of nine basic goods and services. If they are unable to access

<sup>3</sup> [https://ec.europa.eu/eurostat/databrowser/view/ilc\\_peps01/default/table?lang=en](https://ec.europa.eu/eurostat/databrowser/view/ilc_peps01/default/table?lang=en).

<sup>4</sup> The OECD Child Wellbeing Index also provides data on relative income poverty and children in jobless households.



four items, they are seen to be living in severe material deprivation.<sup>5</sup> In 2019, 15.5 per cent of children in Spain were in a situation of material deprivation, while 6 per cent lived in severe material deprivation (Plataforma de Infancia, 2020).<sup>6</sup> In all, 18 per cent of children were reported to be at both moderate risk of poverty and, at the same time, living in a situation of severe material deprivation (Alba et al., 2020).

Younger children are the most likely to be affected by severe material deprivation, with 6.7 per cent of those younger than 6 in this situation in 2019. The proportions were lower for those aged 6 to 11 (5.1 per cent), and those aged 12 to 17 (6.2 per cent). Severe material deprivation impacts girls more than boys in the case of children younger than 6 (7.4 per cent of girls compared to 6.1 per cent of boys) according to data from the ECV. However, boys aged 7 to 11 were more likely to suffer severe material deprivation than girls (5.2 per cent and 4.9 per cent respectively), with a similar disparity among those aged 12 to 17 (6.4 per cent for boys and 6.1 per cent for girls). In all, 53.1 per cent of children were thought to live in households that struggled to make ends meet in 2019. This figure was about five percentage points lower than in 2018, but was still higher than the average for the general population (Alba et al., 2020).

The European Union (EU) has enriched child poverty measurement by calculating child-specific material deprivation using a set of 18 personal, household and child-specific indicators. Material deprivation is defined as the lack of five or more of the items, while severe material deprivation in this child-specific indicator is assessed as lacking seven of the items because they are unaffordable (Guio et al., 2012), with data collected for children aged 1 to 15.

In 2014, 28.3 per cent of children in Spain were found to be materially deprived in relation to this indicator, with the mean number of items they were lacking standing at 5.9. The proportion of children materially deprived appears to be correlated to age: with 26.5 per cent of children aged 1 to 5; 27.3 per cent of children aged 6 to 11; and 32.4 per cent of children aged 12 to 15 being materially deprived (Eurostat, 2021).

Disaggregation of this material deprivation by household composition shows that single-parent households (36.3 per cent), and households comprised of two adults and three or more children (36.7 per cent) have the highest degrees of material deprivation. Single-parent households have a child-specific material deprivation rate that is 28.3 per cent higher than the rates for generic households with dependent children. Similarly, households with two adults and three or more children have a child-specific material deprivation rate that is 29.7 per cent higher than generic households with dependent children (Alba et al., 2020).

Taking out the child-specific indicators, the remaining 13 indicators are used to calculate the material and social deprivation rate, with an individual defined as being materially and socially deprived if they are unable to acquire five of the items. The country of citizenship also appears to have a significant impact on diverging results for those aged 16 to 19. In 2019, 11 per cent of those who were Spanish were materially and socially deprived, while this rate rose to 28.8 per cent for those with foreign citizenship. This drastic difference remains when we compare the deprivation rate among EU citizens living in Spain (excluding Spaniards), which stands at 14.7 per cent, with the rates among those who are not EU citizens standing at 33.6 per cent.

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<sup>5</sup>The nine items are: to pay their rent, mortgage or utility bills; to keep their home adequately warm; to face unexpected expenses; to eat meat or proteins regularly; to go on holiday; a television set; a washing machine; a car; a telephone. Someone is considered to be deprived if she has an enforced inability to access an item.

<sup>6</sup>It is important to note that this (and a large share of the indicators presented here) is based on household data. Therefore, it considers the household's overall capacity to afford the items and not the individual capacity of those within the household.

### Multidimensional income, asset and work-based poverty

The 'at risk of poverty and social exclusion' (AROPE) multidimensional indicator provides information about the extent to which children experience relative poverty, severe material deprivations, and/or live in households with low work intensity (households where the adults of working age were unable to work for more than 20 per cent of their working potential during the previous year). The AROPE indicator suggests that around one third of all children (30.3 per cent) are at risk of poverty or social exclusion in Spain (Plataforma de Infancia, 2020) (see Table 1.2).

When disaggregating the results by income quintile and household type, we confirm that both single-parent households with dependent children and households with two adults and three or more dependent children have the highest shares of children at risk of poverty or social exclusion. In all, 46.8 per cent of children living in a single-parent household and 93.2 per cent of those in the poorest quintile and in a single-parent household are at risk of poverty or social exclusion (Eurostat, 2021).

**Table 1.2. Percentage of children and adolescents 'at risk of poverty and social exclusion' (AROPE)**

By age	< 18y	< 6y	6y-11y	12y-17y		
	30.3	29.7	29.3	31.9		
By income quintile and household type	Total	1 <sup>st</sup> quintile	2 <sup>nd</sup> quintile	3 <sup>rd</sup> quintile	4 <sup>th</sup> quintile	5 <sup>th</sup> quintile
Single person with dependent children	46.8	93.2	29.8	5.8	7.8	5.6
Two adults with one dependent children	21.3	88.8	22.8	4.1	1.7	2.2
Two adults with two dependent children	22.9	87.3	28.2	1.2	3.7	0
Two adults with three or more dependent children	43.8	89.9	35.5	0.9	1.4	0
Three or more adults with dependent children	33.4	86.8	32.9	5.6	4.4	3.2
Household with dependent children	28.6	88.5	29.0	3.1	3.4	1.4
By educational attainment level of their parents	< 18y	< 6y	6y-11y	12y-17y		
Less than primary, primary and lower secondary education (levels 0-2)	58.1	57.9	57	59.4		
Upper secondary and post-secondary non-tertiary education (levels 3 and 4)	39.4	43.3	37.2	37.7		
Tertiary education (levels 5-8)	13	13,5	12,9	12,7		

Source: *Encuesta de Condiciones de Vida*, 2019 (Spanish Living Conditions Survey, INE, 2019).

The risk of child poverty or social exclusion appears to have a negative correlation with the educational attainment of a child's parents. In all, 58.1 per cent for children whose parents have less than a primary education is at risk of poverty or social exclusion, falling to 39.4 per cent for children whose parents have had an upper secondary education, and 13 per cent for children whose parents have attained a tertiary education. A child's migration background is also relevant when examining those at risk of poverty or social exclusion: 49.6 per cent of children with at least one migrant parent were at risk of poverty or social exclusion in Spain in 2019, the highest rate in the EU (Eurostat, 2021; Alba et al., 2020).

While the AROPE indicator is one of the indicators used most often to measure poverty in Europe, it does not lack consider multiple dimensions of poverty. This limitation can be resolved by the use of UNICEF's Multidimensional Overlapping Deprivation Analysis (MODA) indicators, which are included in the other policy domains covered in this report.

## **1.2. The development of child poverty as a policy issue**

Although Spain has experienced abnormally high child poverty rates for years, this has not always been a major focus for public opinion or the political agenda. The topic was addressed, defined and debated in academic forums, and certainly did not pass unnoticed by civil society organizations, but it rarely featured in social and political debate.

Spending on social protection programmes for families and children in Spain increased well above the European average in the years before to the 2008 economic crisis. But those programmes were quickly sacrificed in response to the increasing financial demands from the social protection schemes that operated as automatic stabilizers once the crisis started. According to estimates by the Centro de Estudios Económicos Tomillo for a UNICEF report (2015), total expenditure on children was reduced by €7.776 billion (16.4 per cent) from 2010 to 2013, a reduction that was particularly harmful for programmes that were already underfunded.

Greater socio-political visibility for this area of policy in recent years has been driven by a combination of at least three factors: 1) the inspiration of debates taking place elsewhere in Europe; 2) the work of non-governmental organizations (NGOs) dedicated to the analysis of this issue and/or the provision of services to populations at risk; and 3) the intensification of the social problems provoked by a succession of crises (Marí-Klose and Moreno Fuentes, 2021).

In the middle of the first decade of the 21<sup>st</sup> century, various international organizations began to point at the anomalous levels of child poverty in Spain. The first warning signs appeared in the 2010 *Joint Report on Social Protection and Social Inclusion* from the European Commission (EC), where Spain not only appeared as one of the countries with the highest incidence of child poverty, but also as one of the most ineffective EU Member States in reducing this poverty through public transfers. In its 2010 periodic report, the Committee on the Rights of the Child issued a request to Spain to address the problem of child poverty (Committee on the Rights of the Child, 2010).

Further, in its 2018 report, this Committee stated its serious concerns about a level of state investment in children that was not high enough to offset the negative impact of the severe economic and social crisis that began in 2008 and that has led to increased poverty and social inequality. The Committee urged Spain to *“define budgetary lines for children in disadvantaged or marginalised situations that may require affirmative social measures and make sure that those budgetary lines are protected even in situations of economic crisis, natural disasters or other emergencies”* (Committee on the Rights of the Child, 2018: 3, observation 9c). Reports and pronouncements by the Organisation for Economic Co-operation and Development (OECD) and the Council of Europe (2013) also brought attention to the same anomalies.

The framing of child poverty in the public debate owes much to the work of various NGOs. Their role in bringing child poverty to public and policy attention, depicting it as a violation of

child rights and denouncing its implications, as well as calling for policy action, have been key factors in bringing about policy change. It took some time before they could claim any success, given that – after a protracted crisis – there was a long list of social needs that were competing for public attention.

The very first academic papers that focused specifically on child poverty in Spain date back to the late 1990s, with pioneering UNICEF-sponsored research by Cantó- Sánchez and Mercader-Prats (1998). In 2008, a report by Marí-Klose et al. on social inclusion in Spain generated major media coverage, depicting children as the age group facing the highest incidence of relative poverty (Marí-Klose et al., 2008). In the following years, as the consequences of the recession and fiscal consolidation policies extended, additional reports by other third-sector organizations such as Observatorio social la Caixa, Caritas, UNICEF, Save the Children and Educo highlighted the anomalous situation of child poverty in Spain.

These reports, together with recommendations from international organizations, contributed to a gradual internalization by Spain's public administrations of the need to systematize crucial information. This included information about the actual functioning of policies and programmes to tackle children's vulnerability, about the impact of cash transfer schemes on the reduction of child poverty, and about the need to estimate the impact of different budget appropriation items on children.

### **1.3. Budget indicators and expected impacts of investing in children**

The implementation of the ECG involves a medium-term social investment effort to improve the quality of services needed by children. This section analyses some of the problems related to the child investment policy, as well as the budgetary indicators that must be taken into account in the design of Spain's Child Guarantee National Action Plan (NAP). The design of the NAP could include three objectives (among others) in terms of budgets and finance:

- estimating the cost of the programmes in relation to the main objectives of the ECG, such as school meals, access to early child education and care (ECEC), the costs of extracurricular activities, provision of free health services and resources to tackle homelessness)
- estimating the economic resources needed to implement the strategy, but based on the resources currently invested, particularly the spending by central and territorial public administrations
- establishing a set of indicators to monitor and measure the final impact of public spending (outcomes).

A first approach or methodological framework is already in place for the first objective: estimating the cost of the programmes. This was developed recently by the European Commission (EC) and will require refinement before validation and general acceptance (Guio et al., 2020; related to Spain: Moreno Fuentes and Rodríguez Cabrero, 2020; Save the Children, 2019).

The achievement of the second objective means quantifying the public spending invested in children and its functional or programme distribution (as seen in the report on the impact of the Spanish State Budget on children, adolescents and families, Ministerio de Hacienda, 2019).

Obviously, public spending does not include *all* spending on children: it is necessary to include resources from organized civil society and from companies (for example, for the financing of childcare centres). In relation to the third objective – establishing indicators to monitor and measure the expected social impact of the ECG – the Child Guarantee Recommendation stresses the need to define a common monitoring framework of quantitative and qualitative indicators to assess ECG implementation by the Member States.<sup>7</sup>

We focus mainly on the second objective: how best to quantify public spending on children. What are the proposed methodologies? Can we build consensus on how to measure investment in childhood – an area where there has been some progress through the efforts made by UNICEF Spain (see section on national indicators)?

At present, the literature on budget indicators related to childhood has no common framework for analysis. Recommendations are usually made on the use of public spending for children (see, for example, The Committee on the Rights of the Child, 2018), but no precise measurement and monitoring indicators can be deduced from these recommendations. The literature available on Spain (Fundación Tomillo and UNICEF España, 2015; UNICEF España, 2017; UNICEF España and Fundación Tomillo, 2021) includes the international debate on how to measure public spending on children. This is not the case, however, with monitoring indicators.

In relation to measurement, the debate is reduced to the measurement of expenditure, either direct or indirect, and even extended<sup>8</sup> (age participation in general expenses for security, defence, infrastructure, etc.). More precisely, this approach limits the choice to two criteria: to estimate all spending that benefits children directly or indirectly, or to estimate where that spending goes (if, for example, spending benefits children more than adults). The first criterion is seen as preferable, given its greater ease of implementation. Obviously, it is necessary to assess the distribution of spending when it is shared with adults or specific population groups. This criterion would also apply when analysing expenses or tax deductions.

The literature on monitoring indicators focuses on both the evolution of spending over time and changes in its function. In some cases, the nature of the literature is economic (González Bueno, 2018). In other cases, it focuses on the function of spending on programmes (economic benefits, education, social welfare, health and nutrition) in combination with the organic (who spends) and economic (how much is spent) (Plataforma de Infancia, 2015). In these analyses, as in others of a similar nature (UNICEF, 2015), no distribution of spending is identified across the different target groups of children emphasized by the ECG.

### Budgetary indicators

To make progress on the definition of child spending indicators, it is necessary to analyse three levels of information: European, national and sub-national indicators.

*European indicators.* So far, the only comparable indicator at the EU level is the European System of integrated Social Protection Statistics (ESSPROS): Family / Children Function. This

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<sup>7</sup> The implementation of the ECG Recommendation requires adequate resources and optimal use of national and EU funds. Council Recommendation (EU) 2021/1004 of 14 June 2021 establishing a European Child Guarantee, ST/9106/2021/INIT OJ L 223, 22.6.2021, p. 14–23 ( [https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=uriserv:OJ.L\\_.2021.223.01.0014.01.ENG](https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=uriserv:OJ.L_.2021.223.01.0014.01.ENG)).

<sup>8</sup> By 'extended', we mean the estimation of theoretical participation of children in the different areas of public spending.

indicator is limited to the economic and social benefits of social protection. It does not include expenses for education services or social service programmes. Similarly, the OECD defines spending on the family and childhood function as spending on family benefits, including financial support, that are exclusively for families and children. Spending recorded in other social areas, such as health and housing, also assists families but not exclusively, and is not, therefore, included in this indicator. Information from the EU Structural Funds, such as the European Social Fund (ESF) and others, must be added to this indicator.

*National indicators.* At this level, the methodology developed by UNICEF Spain stands out, allocating both direct and indirect public spending on children related to: social protection, education, programmes of personal social services, health and unemployment (although health is not included in UNICEF's application of the methodology to the State Budget Project for 2021). Here, spending on children includes both direct and indirect spending and tax deductions. While the UNICEF methodology provides a good functional analysis of spending on childhood, it does not cover the social spending related to specific risk groups.

*Sub-national or regional indicators.* UNICEF Spain has supported the analysis of the distribution of spending on children, directly and indirectly, in some Autonomous Communities (ACs – the common term for Spain's regions) with the findings included in, for example, the nine reports on social protection of children developed to date. In these and other reports, their analysis of spending is in line with the recommendations of the European Commission, with the exception of spending on children identified as being in particular need. However, the objectives proposed by the ECG Recommendation intersect with the logic of spending based on the rights of the child.<sup>9</sup>

*Local indicators.* A large part of local authority expenditure comes from current and capital transfers from the regions and from European structural funds. Although there are examples of spending distribution at the local level, particularly in large cities, there are no integrated accounts of local spending on children.

The Tomillo Foundation has classified public spending into five categories or groups of beneficiaries, working within the framework of the UNICEF Spain research and following a review of the international literature on the measurement of spending on children (Garcimartín et al., 2018). Two of these categories (spending on children plus children and adults) constitute expenditure on childhood, capturing both direct and fiscal spending. This expenditure is called 'extended' when the public spending of certain social groups or territories that are being analysed is added to it. It is 'total expenditure' when different overheads are added.

The difference in results is important because the direct expenditure would have amounted to €4,706 million, the extended expenditure to €5,822.6 million, and the total expenditure to €24,983 million. This translates into different levels of public spending on childhood of 0.38 per cent, 0.52 per cent and 2.24 per cent, respectively, in relation to GDP. These differences demonstrate the need to choose or adapt the measurement option that is most closely aligned to the reality of the social policies that are being applied.

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<sup>9</sup> 1. *Right to survival*: Food, Housing and basic infrastructure, Health, Social assistance, Economic welfare. 2 *Right to full development*: Education, Culture and leisure, Youth policies, Economic and environmental development. 3. *Right to protection*: Basic rights, Protection, security, Justice. 4. *Right to participation*: Information, Participation. 9. *Other public goods*. UNICEF has applied this model of analysis of spending on children to the 2019 budgets of Andalusia, the Basque Country and Catalonia.

It is necessary, therefore, to move towards a consolidated comprehensive account of spending on children, particularly in the fight against child poverty (Noguera, 2019). This requires a consensus on the part of public managers, NGOs and experts, to propose a set of functional indicators and, if possible, indicators that report the levels of spending on defined social groups. It is also necessary to determine whether public and fiscal spending should adapt to a classification of children rights (as already demonstrated by UNICEF Spain). This involves articulating three levels of spending analysis: the logic of rights, the functional classification, and the distribution of public spending among groups at risk.

There is a general methodological agreement on what must be considered public and fiscal spending on childhood. Yet two problems still need to be resolved. First, how to allocate functional spending between specific groups of children who are vulnerable and excluded. It is sometimes possible to detail public spending across social groups, such as children with disabilities or those living in institutional care. In other cases, this is not possible (in the case of Roma children), or it is complex (in relation to children from a migrant background) or extremely complex (homeless children, children experiencing severe housing deprivation, and children in precarious family situations) because current data approaches cannot capture the detailed public expenditure for these social groups. And second, how to consolidate functional spending at the local administration level as a prerequisite for the consolidation of all public spending on childhood.

*EU funding instruments.* The ECG employs a multi-funded approach, with national financing (state and sub-national) converging with the European Structural and Investment Funds.<sup>10</sup> European funds focus on co-financed projects, particularly local projects that are of a certain duration, scale and sustainability. From the experience of structural funds invested in Spain from 2014 to 2020, it can be deduced that there is wide room for improvement in both their use and effectiveness (Rodríguez Cabrero and Marbán Gallego, 2019). Similarly, the Administrative Unit of the ESF (UAFSE) has pointed out that the effectiveness of the funds for the programming period 2021 to 2027 is based on a comprehensive approach to the policies in which national, regional, and local projects materialize (personal interview, UAFSE, 7 May, 2021). This is a viewpoint shared by different social agents (such as NGOs in the childhood sector) and institutional actors (such as the Secretariat of Social Rights).

The methodological approaches used by UNICEF Spain to quantify public spending and tax benefits, which combine the economic and functional classifications with the logic of the rights of the child, represent a step towards a consensus on the measurements to be mobilized by public administrations, NGOs and research experts (UNICEF, 2015). Only in this way will it be possible to make rigorous comparisons between ACs. Taken together, the evidence points to the need for the EC to propose a common methodology to measure spending on children (Ayala et al., 2018).

#### **1.4. Multilevel governance complexity and the distribution of welfare responsibilities**

The implementation of the ECG in Spain will be complex, and its potential advantages will depend on its spread across multiple programme areas. This, in turn, requires the mobilization of many different levels of government and different departments at both central and sub-national levels. Indeed, coordination problems and incomplete results have already been

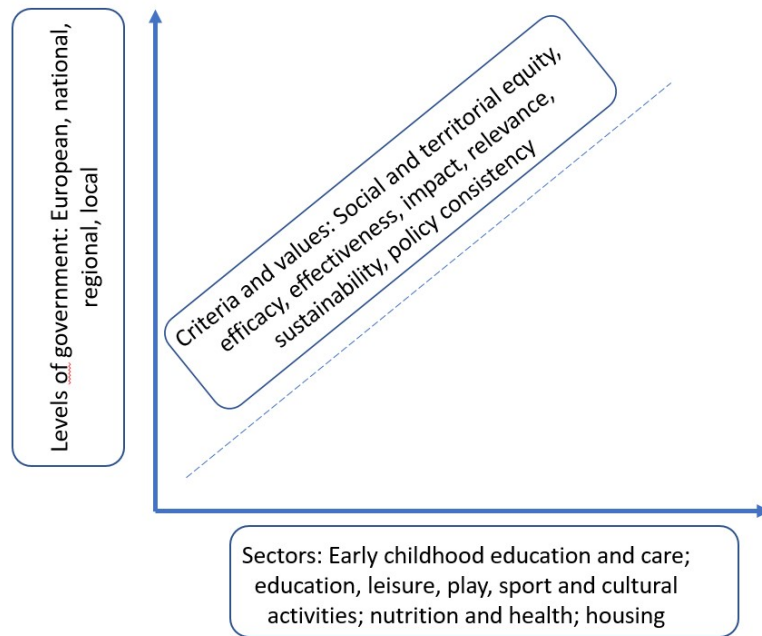
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<sup>10</sup> European Social Fund+ (ESF+), European Regional Development Fund (ERDF), Fund for European Aid to the Most Deprived (FEAD) and the European Agricultural Fund for Rural Development (EAFRD), as well as the next Recovery and Resilience Facility, among others.

identified in the implementation of some public policies for children (2013 EC Recommendation on ‘Investing in Children: Breaking the Cycle of Disadvantage’; Comprehensive Plan for Family Support, 2015-2017; National Strategic Plan for Children and Adolescents, 2013-2016).

The design of the governance of this initiative, therefore, requires a major effort. It entails territorial and inter-sectoral coordination to ensure that the results are effective, efficient and relevant in terms of their impact for both social and territorial equity (Figure 1.1).

**Figure 1.1.** Intersectoral and multilevel governance of the ECG in Spain



Source: Authors' own elaboration inspired by Schröder-Bäck et al. (2019).

Given a long tradition of strong centralization, decentralization was one of the more striking changes in the Spanish Welfare state from the 1980s to the 2000s (Moreno, 2003). As a result of this shift, regional governments have used their power to develop distinct models of welfare provision in areas such as healthcare, education and long-term care (Gallego and Subirats, 2012; Moreno Fuentes, 2009). Over time, the intergovernmental distribution of roles and resources has created a situation of strong interdependence between the central government and the ACs that has affected citizens' preferences and the way in which decisions are made and implemented in the field of social policies (Gallego, 2016; Calzada and Del Pino, 2015).

The consequence is that ACs are now the main actors in the system. Over 70 per cent of regional annual budgets are devoted to social policies (including healthcare, education, housing and social welfare). Regional governments control the social welfare services, and the role of municipalities in this domain depends on the regulations enacted by the ACs, with significant variations across the regions. While housing is, formally, in the hands of ACs, the central government has the capacity to provide general regulations and guidelines for housing policy, establishing a general framework that derives from its constitutional power over the basis of (and overall planning for) economic activity. Municipalities also have their own powers and responsibilities in this domain, as established by regional housing laws.



Responsibility for education and for the Spanish National Health System (*Sistema Nacional de Salud*, SNS) has been devolved to the country's 17 ACs since 2000. In both cases, however, the central government is currently responsible for the regulation of the right to education and healthcare and the basic elements of the organization, coordination and financing of these systems. The ACs legislate within the framework of the basic state regulation, decide on the configuration and management of their own educational services and the Regional Health Services, and were in charge of 80.4 per cent and 92.5 per cent of education and healthcare spending, respectively, in 2018.

Recent research has analysed the impact of the Great Recession on Spain's welfare policies and the responses of the national and regional governments to specific policy problems, both of economic efficiency and social justice in the context of the crisis (Del Pino and Fernández Llera, 2019; Del Pino and Ramos, 2018; Bacigalupe et al., 2016; Conde-Ruiz et al., 2016; Del Pino and Pavolini, 2015; Moreno Fuentes, 2015; De la Fuente, 2013). These analyses have shown that the adverse economic and financial situations placed severe constraints on both the national and regional governments, to the extent that they were forced to implement cuts in areas such as healthcare that are highly sensitive for citizens. Despite these constraints, however, regional governments have been able to ensure a certain room for manoeuvre in the re-design or reform of the social policies for which they are directly responsible.

There are multilateral cooperation bodies in all of these policy areas – so-called ministers' councils, or sectoral conferences – in which different levels of administration participate. These bodies constitute a workspace where the policy agenda can (to a certain extent) be defined. In the arena of social services, for example, the Territorial Council of Social Services spans all three levels of government: national, regional and local. The Inter-territorial Council of the SNS (CISNS) and the Sectoral Council of Education are the cooperation bodies that bring together the regional and national healthcare and education ministries, working through second-level bodies. In the health field, for example, the Public Health Commission can be very relevant when proposing common guidelines related to the ECG through different policy instruments. In other areas, these bodies include the Sectoral Council of Housing and the Sectoral Council of Consumer Affairs (which covers nutrition issues), which are the highest bodies for cooperation between the central government and the ACs in their respective fields. However, unlike most of these bodies, which meet on a regular basis, the functioning of the Sectoral Council of Consumer Affairs is more sporadic.

The Conference of Presidents is the body at the highest political level of cooperation between the central government and the ACs (and the autonomous cities of Ceuta and Melilla). As a result of nature and its high political level, the main aim of the Conference is to discuss agreements on matters of particular relevance for the whole country.

The current government has placed a strong emphasis on children's issues, as demonstrated by the creation of a High Commissioner against Child Poverty within the Prime Minister's Office; a new law on violence against children; the creation and promotion of the Directorate General on Children's and Adolescents' rights; the preparation of a new National Strategic Plan for Children and Adolescents for a period of another 10 years; the establishment of the State Council for Children's Participation; and the implementation of other minor but significant programmes, particularly for children on the move. Given this emphasis on children, it is worth exploring the possibility that the implementation of the ECG could be discussed at the next Conference of Presidents.

Shared management of the ESF allows for the assignment of policy responsibilities at the appropriate level of government in each country. But it also implies the implementation of a complex administrative framework. From a territorial point of view, one major problem for effective management and impact in Spain is its very large number of municipalities – many of them small. There are, in all 8,131 municipalities, more than half of them (5,005) with fewer than 1,000 inhabitants and only 63 with populations larger than 100,000. This implies a serious problem of management capacity for small municipalities, making it very difficult for them to manage complex programmes such as European projects and funds. It is, therefore, necessary to consider support mechanisms, both for the design of the projects, and for the management of the funds they may receive.

In addition, many small municipalities have seen their populations dwindle in recent years (53 per cent of municipalities in Spain saw falls in their populations in 2020). It is clear that the concentration of resources in more developed areas (with more management capacity) can be inequitable from a territorial point of view.

Responsibilities for all programmes that may be included under the ECG belong to different national and regional ministries. Importantly, the Law on Violence against Children that was passed in May 2021 foresees the creation of a Sectoral Conference on Childhood and Adolescence as a body for cooperation between Public Administrations on the protection and development of children and adolescents. However, this has not yet been established, and a decision is needed on which of the ministries and regional ministries involved in children's issues will be part of this new cooperation body to ensure the adequate integration of sectoral and territorial components. We do know, however, that the ACs, local entities and the High Commissioner for the fight against child poverty will participate in this new forum, in addition to the central government.

Finally, despite the lack of formalized cooperation bodies, Spanish Public Administrations, working in close cooperation with civil society organizations, have made progress on children's issues (e.g. through the Children's Observatory). In particular, the third sector has participated through the Platform of Children's Organizations and other NGOs, together with university experts, in the elaboration of the Strategic Plans for Childhood and Adolescence (I and II National Strategic Plans for Childhood and Adolescence 2006-2009, and 2013-2016), and the III Action Plan against Sexual Exploitation of Children and Adolescents. In the same way, all relevant actors, including NGOs, have participated in the development of the National strategy for preventing and fighting poverty and social exclusion (2019-2023) and its operational plans for 2019 and 2020. The same applies to the new National Strategic Plan for Children and Adolescents.

### **1.5. Gaps between policy goals and outcomes**

There has been an extensive development of legislation on the rights of children at both national and AC level in Spain over the past decade. However, important challenges remain when it comes to the practical implementation of policies and the daily coordination between services in the provision of benefits and services to households that face poverty and social exclusion.<sup>11</sup>

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<sup>11</sup> One distinctive feature of child-related policies in Spain is that they are not aimed at children but at families, working on the assumption that policies designed to reduce poverty and social exclusion among parents will also solve poverty and social exclusion among children. As a result, the vast majority of research is focused on policy measures that target households rather than children.

As mentioned in Section 1.4, it is important to ensure consistency in policy implementation across different governance levels and sectors in the Spanish system. At present, however, what should be an integrated process of interventions across the social, education and healthcare domains is often a series of distinct and uncoordinated stages (Aguilar Hendrickson et al., 2012). Specifically, the unclear identification of functions and of target populations to be served by each programme, combined with the multiplication of interventions, a lack of cross-cutting training for front-line workers, and the absence of joint working strategies across levels and policy sectors are seen as contributing to the fragmentation of the Spanish social protection system (Martínez Virto and Pérez Eransus, 2018; Fantova, 2017). These coordination shortcomings, in turn, affect the adoption of effective measures to tackle poverty and social exclusion (Cantó and Ayala, 2020).

In this context, front-line workers – social workers, teachers, health professionals and administrative workers, among others – act as a bridge between an increasingly complex and heterogeneous array of services and organizations (Sánchez Castiñeira, 2021). In doing so, research has demonstrated that they play a significant role in determining access to a variety of social benefits and services on a discretionary basis (Aguilar Hendrickson, 2013). However, their decisions are shaped by individual attitudes towards beneficiaries, as well as by the organizational and economic constraints they face in their everyday encounters with households at risk of poverty and social exclusion (Sánchez Castiñeira, 2021). Specifically, the main limitations to effective coverage and service provision for such households – as identified by front-line workers themselves – are scarce economic and human resources to deal with increasing demand, an overload of information and multiplication of tasks, bureaucratization of procedures, the more stringent eligibility criteria to access social programmes (particularly after the Great Recession), and a lack of coordination of interventions (Martínez Virto and Pérez Eransus, 2018; Soto-Rosales and González-Losada, 2018; Clua-Losada et al., 2011).

Deficits in policy implementation constrain access to services and benefits for households in situations of poverty and social exclusion, and, therefore, have an impact on children's well-being. While coverage is supposedly guaranteed under the law, there is a lack of take-up of social benefits and of participation in welfare and healthcare programmes in Spain. The causes include lack of knowledge about existing programmes as a result of poor information and communication strategies from the public administration, rigid and multiple procedures, and the costs of applying for benefits and programmes (stemming from large waiting lists, the need to gather proofs of eligibility and administrative delays) (Aguilar Hendrickson et al., 2012; Matsaganis and Flevotomou, 2010; Colectivo Ioé, 2004).<sup>12</sup>

Muñoz Higuera et al. (2021) identify lengthy resolution times, the need for documentation and the lack of publicity as contributing to non take-up of regional minimum income schemes. Similarly, Khalifi et al. (2016) calculate a non take-up of autonomic minimum income schemes by homeless people of 67 per cent, linked to the low amount of benefit, the high costs of application and a lack of information. Barcelona City Council (2018) estimates a non take-up of 22.5 per cent for its pilot project B-MINCOME, which aims to combine a guaranteed minimum income with active social policies in deprived urban areas, pointing out the need for different information and communication strategies (such as leaflets, phone calls and information sessions) to reduce non take-up among potential beneficiaries.

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<sup>12</sup> Analyses of the lack of take-up of social benefits in Spain are rare and focus mainly on minimum income schemes as a result, in large part, of a lack of appropriate data. Existing analyses of access barriers/non take-up for the specific policy areas covered by the ECG are included in the following sections.

One other major barrier to applying for social benefits is the stigma associated with ‘welfare dependency’. According to recent research (De Quintana et al., 2019; García de la Rocha, 2019), non take-up is increased by the social and self-induced stigma associated with being eligible for poverty-related measures and a lack of anonymity when applying for benefits.

While these shortcomings are highlighted in the academic debate, the policy monitoring and evaluation that are needed for their solution are limited or completely absent in Spain. Indeed, the institutionalization of monitoring and evaluation in the country remains among the lowest in Europe (Viñas, 2009). There has been significant progress in terms of evaluation culture, but the limited degree of institutionalization means that – with a few isolated exceptions – most evaluations depend on political will, rather than being a normative requirement (Sociedad Española de Evaluación de Políticas Públicas, 2020). As a result, the lack of inclusion of vital phases, actors and resources from the earliest design stages of policies limits the chances of assessing the implementation of existing measures to address children’s needs and the actual results for their well-being in a systematic way (Moreno and Lara Montero, 2016).

Given these challenges, it comes as no surprise that the level of satisfaction with social services varies greatly across the Spanish population. According to the Survey on Integration and Social Needs by Fomento de Estudios Sociales y Sociología Aplicada (Fundación FOESSA, 2018), only 45.9 per cent of households in a situation of extreme exclusion valued social services as being good or very good, compared to 46.5 per cent of households in a situation of moderate exclusion, and 56.4 per cent of households that were not affected by social exclusion.

## **Conclusions**

The impact of the 2008 financial crisis and the 2020 COVID-19 pandemic, coupled with ineffective policies to tackle child poverty, pose a major challenge for Spanish society. Child poverty has emerged to occupy a central space in the country’s public and policy spheres over the past decade, thanks to the work of third-sector organizations and innovative programmes implemented at different levels of government. However, child protection remains characterized by its uneven development. While there is particular dynamism in the sphere of the legal protection of children, their rights and efforts to end violence against them, we see both limited effectiveness of social protection and unequal access to essential services for vulnerable children.

As a result, 98 per cent of children belonging to the Roma community, and 50 per cent of those who have a parent who migrated to Spain are at risk of poverty or social exclusion. Children with disabilities and other special needs continue to experience deficits in coverage for their specific healthcare needs and suffer from both architectural and social barriers to their access to the basic services that are their right. Children without shelter or housing constitute 2.6 per cent of the total homeless population in Spain. The situation for children living in institutions and alternative accommodation could clearly improve, and there is an urgent need to expand and reinforce foster care.

The application of the ECG in Spain should, therefore, balance the general objective of guaranteeing basic rights to all children in difficult situations, and the need to pay particular attention to those who are highly vulnerable. Special attention must be paid to coordinated measures and effective governance, as well as to intersectionality.

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## 2. EARLY CHILD EDUCATION AND CARE (ECEC)

- Children in Spain under the age of three are disadvantaged in terms of access to early child education and care (ECEC), with certain vulnerable groups within that age group facing even greater barriers to participation.
- Families on low-incomes – but also some that are better off – often struggle to afford ECEC services for their young children.
- The opportunity offered by the implementation of the ECG could greatly contribute to efforts to improve ECEC services in Spain by focusing on their quality, as well as on their scope, paying particular attention to vulnerable children who are missing out on services that are vital for their early development and well-being.

This chapter outlines the recent Spanish context regarding the provision of and access to ECEC. It focuses on children aged 0 to 3 as the age group facing the greatest remaining challenges in this area, and on the situation of particularly vulnerable groups of children that are missing out on the early support that may be so important for their cognitive, personal and social development and future well-being.

### 2.1. Lack of access

ECEC in Spain is characterized by high enrolment rates in the second cycle of non-compulsory pre-primary education for children aged between 3 and 6 years old. In contrast, and despite efforts to expand first-cycle ECEC (for children aged 0 to 3), up to 40 per cent of children aged 2 do not attend these services, and the younger the children, the higher the proportion missing out. There are also significant variations between ACs, with enrolment rates at age 2 ranging from around 93 per cent in the Basque Country in 2018-2019 to around 30 per cent in Ceuta or Murcia (Requena and Salazar, 2021; Ministerio de Educación y Formación Profesional, 2020a).

**Table 2.1.** Enrolment rates in early child education and care by age (2017-2018)

	< 1 y	1 y	2 y	3 y	4 y	5 y	6 y
<b>Percentage of children enrolled</b>	12.3	40.2	60.0	96.4	97.4	98.0	0.7
<b>Enrolment in 2019: 5 ACs with the HIGHEST rates</b>	Basque Country: 20.2 Galicia: 19.8 Madrid: 19.4 Andalusia: 13.7 La Rioja: 13.7	Madrid: 54.9 Andalusia: 50.7 Basque Country: 48.8 Galicia: 48.3 Catalonia: 43	Basque Country: 92.7 Madrid: 73.4 Cantabria: 73.4 Andalusia: 70.1 Galicia: 69.4	Estimates based on EU Statistics on Income and Living Conditions (EU-SILC, 2019) from Requena and Salazar, 2021			



<b>Enrolment in 2019: 5 ACs with the LOWEST rates</b>	Ceuta: 3 Cantabria: 4 Murcia: 4.1 Melilla: 6.1 Balearic Islands: 6.6	Cantabria: 9.1 Ceuta: 10.5 Murcia: 19.6 Canary Islands: 22.5 Asturias: 22.7	Murcia: 30.4 Ceuta: 30.9 Asturias: 33.6 Canary Islands: 35 Castile and León: 35.9	As above
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Source: Requena and Salazar, 2021; Ministerio de Educación y FP (Sistema estatal de indicadores de la educación, 2020a).

The key challenges to access to high-quality ECEC for all children – and particularly for those who are disadvantaged or who have special needs – are the lack of universal provision of free-of-charge or affordable services, inequalities in access, and substantial variations across the different regions of Spain.

#### Lack of sufficient provision despite a general increase in supply

A child's legal and universal right to a free-of-charge, publicly financed preschool slot starts only at 3 years of age, when the upper cycle of ECEC begins. First-cycle education for children under the age of 3 has expanded considerably, with average attendance rates at this level more than doubling over the past decade, from 17.8 per cent in 2007 to 36.4 per cent in 2017 (Espinosa Bayal, 2018). This expansion has been supported by the development of the so-called plan Educa3 (promoting an increase in childcare slots for those aged 0 to 3), the II National Strategic Plan for Children and Adolescents 2013-2016 (PENIA) and the National Action Plan for Social Inclusion 2013-2015. However, demand for ECEC services for this age group still exceeds public supply (Vélaz-de-Medrano Ureta et al., 2020; Espinosa Bayal, 2018).

Spain's ACs are responsible for pre-primary education (European Commission, 2019) and there are, therefore, large regional differences in both provision of and access to ECEC services. Admission criteria and measures to compensate for socioeconomic inequalities (by prioritizing access by families with fewer socioeconomic resources) also vary widely across the country.

Three models for the admission of children aged 0 to 3 coexist in Spain: one based on family income, which promotes access by children from disadvantaged environments (Basque Country, Catalonia, Valencian Community); one based on the parents' labour market status (Andalusia, Extremadura); and a mixed model that is focused on the reconciliation of work and family life, but also prioritizes children from low-income families (Madrid, Asturias, Castile and León). In practice, the latter model often favours work-family balance rather than equity, depending on the allocation of varying weight to each criterion and the precise level of the low-income threshold. This conditionality creates barriers to access to ECEC for children with one or both parents in unstable labour market positions (Espinosa Bayal, 2018).

#### Relatively low public investment

Spain's overall expenditure on social protection for families with children under 3 is very low in European terms. In 2015, Spain allocated less than €400 per inhabitant to families and children, which can be compared with the €800 to €1,200 allocated in countries such as France or Germany, or the €1,500 (approximately) allocated in the Nordic countries (Funcas, 2018).

Public expenditure on early child education and care in Spain amounted to 0.6 per cent of gross national income in 2018 (Eurostat, 2021a). This is similar to the EU average for 2017, yet significantly lower than the average for the Nordic countries (which ranges from 1.0 per cent in Denmark to 1.7 per cent in Sweden). The specific provision of family benefits for child day care

totaled 0.5 per cent of GDP in 2018, a figure slightly above the EU average, yet far below that of the Nordic countries (ranging from 1.1 and 1.3 per cent of GDP) (Eurostat, 2021b).

Public expenditure on ECEC per child (aged 0-5) is relatively low for an OECD country: US\$2,900 in 2015 in contrast to an OECD average of US\$4,600 – and particularly for children under the age of 2 (just US\$300 per child) (OECD, 2021). At this point, families bear the costs of ECEC themselves to varying degrees, depending on where they live. According to Funcas, a Spanish think tank, only around 6 per cent of ECEC slots are fully subsidized, and the remaining 94 per cent are financed, at least to some extent, by families (Funcas, 2018). This makes it more difficult for socially vulnerable families to make effective use of these services.

Public investment has tended to increase, and there has been a trend towards reducing or eliminating the costs for families (e.g., La Rioja, Madrid, Ceuta, Extremadura, Aragon, Cantabria and Valencian Community are taking steps in this direction). However, sub-national variations remain considerable. Urban areas have a greater supply of both public and private ECEC services, while rural areas depend, for the most part, on public centres.

#### Large share of fees paid by families

Given Spain's low levels of investment in family and child-related benefits – amounting to around half of the European average in terms of percentage of GDP (Espinosa Bayal, 2018) – the ability of families to meet these costs depends mainly on their economic and labour-market situation. On average, around 41 per cent of the total cost of early education for children aged 0 to 3 is paid by households, rising to 23 per cent for children aged 3 to 6 in the second cycle. In practice, the proportion of the costs that falls on households varies significantly between private and public centres in both cycles, with families' contribution varying according to their income, and all of these factors shaped, in turn, by where the family lives.

There is striking variability across ACs in terms of the distribution of 0-3 ECEC costs between public institutions and the private sector and, therefore, the share that is covered by the government and by families, respectively. In La Rioja, for example, families pay 41.5 per cent of the total cost, rising to 60 per cent in Asturias.

Maximum levels for monthly fees, as well as related tax allowances and tax breaks, also vary significantly across ACs. Maximum fees in public ECEC centres for children aged 0 to 3 range from €196 per month in Melilla to €460 per month in Valencian Community (not including tax allowances and tax breaks that reduce the cost for families to different degrees) (Espinosa Bayal, 2018). On average, monthly fees for children under 3 amounted to between €250 and €500 in 2019 (Vélaz-de-Medrano Ureta et al., 2020).

The private sector also plays a substantial role in the provision of ECEC for children under 3, which entails significant costs for families – adding to the barriers to access – and resulting in a substantial variation in quality. There are considerable variations between ACs regarding enrolment in public vs. private centres. In Extremadura, for example, 90 per cent of the children enrolled in pre-primary education attend public schools, while the proportion is only 40 per cent in Andalusia. While private education is sometimes subsidized, there are also large variations in the extent of the cost that is publicly covered (Vélaz-de-Medrano Ureta et al., 2020). Compensatory public policies often only reach – at best – families in the very lowest income quintile. Furthermore, there are not always enough public slots for all the families who need them, which entails further inequalities in access as some families have no other option than to send their children to private centres.

### Large share of other costs paid by families

Families also face different costs for the same or similar additional services, depending on the AC in which they live. These services include school meals, extracurricular activities, crèche options before and after school, extended opening hours, etc., which are crucial for family-work balance and act as a potential socioeconomic equalizer.

Monthly fees for school meals, for example, can range from 0 (Asturias, Castile and León) to €118 (Aragon, where the fee also includes other services). Related tax allowances and compensation measures are also very disparate (Vélaz-de-Medrano Ureta et al., 2020). These variations across Spain's regions affect not only access (or the lack of it), but also the quality of services, as there are diverse regulations on staff-to-child ratios, support staff, staff qualifications and the educational project (Espinosa Bayal, 2018). Opening schedules also vary, ranging from 25 to more than 40 hours a week (Vélaz-de-Medrano Ureta et al., 2020). So far, only two ACs (Madrid and Navarre) have regulated the provision of professional ECEC services ('day mothers') in home environments (European Commission, 2021c).

One of the most salient characteristics of the Spanish ECEC system is that access to publicly-funded ECEC for children aged 0 to 3 is not widely guaranteed. In fact, Spain is one of the EU Member States with the lowest percentages of totally publicly funded slots for children in that age group (Ministerio de Educación y Formación Profesional, 2020a). As shown in Table 2.2, only around half of the children aged 0-2 who are enrolled in ECEC attend public centres.

Average ECEC spending per child by families (regardless of the cycle) amounted to €485 in public schools in the 2019/2020 school year and to €1,352 and €2,692 for subsidized and fully private schools, respectively (INE, 2020). Spain allows a tax deduction of up to €1,000 per year for ECEC (first-cycle) expenses. However, this is only available for working mothers (Agencia Tributaria, 2021) and is not sufficient to compensate for economic disadvantages.

**Table 2.2.** Enrolment in public centres by age as a percentage of those enrolled (2019-2020)

	<1 y.o.	1 y.o.	2 y.o.	3 y.o.	4 y.o.	5 y.o.	6 y.o.
<b>Percentage of children enrolled in public ECEC centres</b>	48.8	51.6	52.9	67.6	67.5	67.5	70.3

Source: Ministerio de Educación y FP (EDUCAbase).

Some private centres are publicly subsidized, but they constitute a minority in first-cycle education. Table 2.3 shows that, most ECEC centres in Spain for those aged 0 to 3 are private and the majority do not receive any public subsidies at all. The picture is radically different in second-cycle education, which is provided mainly by fully public schools or by publicly-subsidized private schools (95.7 per cent of the total in 2019/2020). Private pre-primary education is a minority option at this stage.

Again, there is considerable territorial variation. In the first cycle, the share of children (of those enrolled) in public centres is very high in Extremadura, Asturias, Navarre and Cantabria and markedly low in Andalusia, Valencian Community or the Canary Islands. In the second-cycle, the highest shares of public enrolment are seen in Castilla-La Mancha, Extremadura and Melilla, while the lowest are found in the Basque Country and Madrid (Espinosa Bayal, 2018).

Total expenditure in first cycle ECEC services at the regional level also varies considerably across ACs. In addition, it is difficult to find aggregate, comprehensive statistics on public expenditure as a result of the very diverse organization and provision of ECEC for children aged 0 to 3 across ACs and municipalities. Public investment in second cycle ECEC is, at any rate, far higher than that devoted to the first cycle (€6,693 million vs €2,500 million in 2016) (Vélaz-de-Medrano Ureta et al., 2020). As noted, this means that a high proportion of ECEC costs falls on families of children aged 0 to 3.

There are also tax deductions, allowances and benefits for ECEC at the regional level. For example, low-income households and/or other groups (large families, families with disabled children, single-parent families) benefit from tax deductions and/or other reductions in the cost of services in Andalusia, Asturias, Navarre, Valencian Community, La Rioja and Melilla. However, these measures are very diverse, are sometimes restricted to very vulnerable households, and are not available in every AC (Espinosa Bayal, 2018).

**Table 2.3.** Distribution (in percentages) of early child education and care provision by type of ownership/funding (public, private yet publicly subsidized, fully private). 2019-2020

	Public centres	Private yet publicly subsidized centres	Fully private centres
<b>FIRST-CYCLE EDUCATION (0-3 stage)</b>	48.1	16.7	35.2
% of children enrolled in public centres relative to all those enrolled in first-cycle education (0-3) - ACs with highest %	Extremadura: 89.5 Asturias: 88.5 Navarre: 83 Cantabria: 80.1 Castille and León: 69.4	Own calculations with EDUCAbase data	
% of children enrolled in public centres relative to all those enrolled in first-cycle education (0-3) - ACs with lowest %	Andalusia: 37.8 Valencia: 44.3 Canary Islands: 45.4 Madrid: 46.4 Murcia: 48.8	Own calculations with EDUCAbase data	
<b>SECOND-CYCLE EDUCATION (3-6 stage)</b>	74.0	21.7	4.3
% of children enrolled in public centres relative to all those enrolled in second-cycle education (3-6) - ACs with highest %	Castilla-La Mancha: 80.6 Extremadura: 78.7 Melilla: 78.1 Ceuta: 77.3 Andalusia: 76.2	Own calculations with EDUCAbase data	
% of children enrolled in PUBLIC centres relative to all those enrolled in second-cycle education (3-6) - ACs with lowest %	Basque Country: 51.9 Madrid: 54.9 Balearic Islands: 62.8 Navarra: 64.1 La Rioja: 65	Own calculations with EDUCAbase data	

Source: Ministerio de Educación y FP (EDUCAbase).

## 2.2. Access barriers

The asymmetrical costs in the public and the private sector entail substantial access barriers for many children under 3, particularly those in disadvantaged families, as shown by the

different indicators provided in Table 2.4. Enrolment rates are highest in the 5th (top) income quintile (where attendance at first-cycle centres is the norm) and lowest in the 1st (bottom) quintile. Attendance rates for the other quintiles are fairly similar yet relatively low (between 42 per cent and 47 per cent). Interestingly, 27 per cent of the households in the first income quintile and up to 50 per cent in the second quintile cover the total cost of their children's attendance at ECEC centres, with the latter percentage approaching the share paid by households with higher incomes. Public measures to facilitate access to ECEC services for children aged 0 to 3 in economically vulnerable households fail, therefore, to reach a substantial share of them.

This conclusion is reinforced by the additional indicators shown in Table 2.4. The proportion of households in the second income quintile that do not pay any fees for ECEC attendance is low (less than one quarter). Even in the second and third income quintiles, we can see that families face real difficulties in meeting the costs. Indeed, families within these two quintiles are the most likely to experience great difficulties in covering the costs of ECEC. At the same time, a substantial share of children in the most vulnerable groups – those in the first and second income quintiles – do not make any use of ECEC services (including childminders).

These difficulties only reinforce family vulnerability, as external ECEC services are often vital to reconcile care needs with paid employment (particularly for mothers), and they are likely to fuel intergenerational disadvantages. Furthermore, a very substantial proportion of families in the two bottom quintiles (above 60 per cent) declare that their need for childcare is not met because they cannot afford it, while few, if any, cite a lack of supply, inconvenient schedules or poor service quality as being particularly important. The data indicate that the fairly limited use of ECEC services for children aged 0 to 3 – particularly by those in the lowest income quintiles – is about affordability, rather than availability, quality or lack of demand.

**Table 2.4.** Access and barriers to first-cycle (0-3) early child education and care by income quintile (2016)

PERCENTAGE OF HOUSEHOLDS	1st quintile	2nd quintile	3rd quintile	4th quintile	5th quintile
With children attending ECEC centres	26.3	46.4	41.6	44.8	62.5
Paying the total cost of attendance at ECEC centres (only households with children attending ECEC centres considered)	27.3	50.3	53.1	64.2	63.7
Paying part of the cost of attendance at ECEC centres (only households with children attending ECEC centres considered)	7.3	23.6	31.1	19.3	25.9
Not paying any of the costs of attendance at ECEC centres (only households with children attending ECEC centres considered)	65.4	24.2	13.5	16.4	10.4
Making use of ECEC services (both attendance to preschool centres and use of childminders included)	33.1	52.9	44.3	51.4	70.6
Experiencing any difficulties in meeting ECEC costs	29.7	48.5	36.5	34.9	29.4
Not having to pay any ECEC-related fees	22.8	11.5	2.9	3.5	3.2
Not having their needs met regarding access	35.9	35.4	36.9	25.6	20.3

to ECEC centres					
Not having their ECEC needs met because the household cannot afford it	63.6	67.1	53.2	40.4	19.7
Not having their ECEC needs met due to lack of available slots	2.5	5.4	0.2	7.6	0.0

Source: Instituto Nacional de Estadística (INE), Encuesta de Condiciones de Vida. Módulo año 2016. Acceso a los servicios. Note: \*missing values not included in table; 2016: latest available year.

### A lack of systematic information at the local level

The literature on ECEC at the local level is limited, given the difficulties in compiling official, systematic and disaggregated information on municipalities' services. Studies even reveal a picture of growing heterogeneity, as the characteristics of municipal schools may differ from those run by the ACs. There is also variation in terms of fees – and therefore equity in access – between the two types of public centres that coexist with private centres at the local level.

One frequent consequence of such variations is segregation based on costs and access barriers (Jiménez-Delgado et al., 2016). The distribution of responsibilities between the regional and the local level also generates a variety of regulations and areas of involvement (Save the Children, 2019) that is difficult to navigate.

### **2.3. Children in need**

There are, unfortunately, data issues in Spain that hamper the assessment of the provision of quality ECEC that guarantees the social inclusion of minority groups. The main microdata sources, for example, lack representativeness and there is also insufficient granularity in official statistics. This prevents a thorough understanding of the interaction between general socioeconomic vulnerability and the specific situation of the groups that are, potentially, the most disadvantaged.

In a country where participation in ECEC is nearly universal in the second cycle and in pre-primary education, children from migrant backgrounds show similar enrolment rates as natives (Eurofound, 2015). In fact, there has been an increase in ECEC enrolment among these children over the past decade in response to an increase in the available slots and the incorporation of their mothers into the labour market. Most children from a migrant background are now enrolled in public centres as a result of revised admission regulations, school zoning policies in some regions, and the lower costs involved (Grau Rubio and Fernández Hawrylak, 2016). The main gap between native children and those from a migrant background, as previously noted, is seen during first-cycle ECEC (Vélaz-de-Medrano Ureta et al., 2020).

Children who were born in another country accounted for 9.8 per cent of the children enrolled in ECEC in Spain in the 2019/2020 school year (own calculation; Ministerio de Educación y Formación Profesional, 2020b; Ministerio de Educación y Formación Profesional, EDUCAbase). However, while the number of children from migrant backgrounds attending ECEC centres has increased (Grau Rubio and Fernández Hawrylak, 2016) parents from countries outside the EU are far less likely to use first-cycle ECEC services than native parents and EU citizens (25.8 per cent compared to more than 40 per cent). It is not entirely clear what is driving these differences. Some ACs grant priority access to first-cycle ECEC centres to children of migrant origin and children belonging to ethnic minorities (Vélaz-de-Medrano Ureta et al., 2020).

It is also challenging to assess the situation of Roma children, given the difficulties in obtaining current data, particularly on their first-cycle attendance. There is evidence of progress on ECEC attendance for Roma children over the past two decades (Centro Social Comunitario Gastón Castelló, 2017) and up to 95 per cent of Roma children between 4 and 6 years old were enrolled in ECEC in 2014, compared to 97 per cent of children in general (European Commission, 2020; European Union Agency for Fundamental Rights, 2016). Such high levels of enrolment in second-cycle ECEC – which, unlike first-cycle ECEC, is free of charge – could signal the importance of affordability.

Some of the main barriers to ECEC enrolment for Roma children, as identified by organizations working for their rights, are residential segregation, low incomes, limited awareness of the importance of ECEC among families, long distances between families' homes and ECEC centres. Other issues include the scant presence of Roma personnel at schools, and difficulties with work-family balance (particularly for women).

There is also little comprehensive information on the ECEC participation of children with disabilities or other special needs (Eurofound, 2020). On average, 1.1 per cent of the children enrolled in second-cycle ECEC in ordinary schools in Spain have special educational needs. The percentage varies between ACs, from 0.6 per cent in Cantabria to 3.2 per cent in Murcia (Ministerio de Educación y Formación Profesional, 2021).

The ACs – following guidelines established by the Ministry of Education and Vocational Training – develop plans for diversity that target these children (European Commission, 2021b). Nevertheless, there are important regional disparities in the mechanisms and ratio reductions devised to meet their needs. Some ACs count each child with special educational needs as two when calculating general class ratios. Others determine the maximum number of children with special needs in each unit; some resort mainly to increases in auxiliary or supplementary staff. The most common formula is a ratio reduction equivalent to one child in the total number of slots assigned to each group (Vélaz-de-Medrano Ureta et al., 2020).

There is also considerable regional, local, and even 'between-school' differences related to early detection processes, whether early intervention is provided for children aged 0 to 3, the kind of measures devised, the type of support and specialist educational staff involved (and related ratios), and the training the latter receive. Legislation at the regional level for ordinary schools only applies to public and publicly-subsidized centres and is often rather vague on these issues.

Most importantly, there is evidence of considerable gaps between, on the one hand, the needs of children and ECEC centres, and, on the other, the degree of specialization of school personnel and the amount, timing and types of support provided by the authorities. A lack of resources and specialization in ordinary schools has also been identified as a major factor that hinders the satisfactory inclusion of children with disabilities in ECEC services (Jiménez Lara et al. 2019).

For the most part, children with disabilities in ECEC in Spain are enrolled in ordinary centres. Only 1.16 per cent of the pre-primary children enrolled in ECEC are officially designated as having special educational needs. Enrolment in special education is, therefore, extremely rare, with 99.89 per cent of the total pre-primary population enrolled in mainstream ECEC, and 99.85 per cent of these taking part in inclusive education, understood as placement in a mainstream class for at least 80 per cent of the time (European Agency for Special Needs and Inclusive Education, 2020).

Up to 71 per cent of children aged 3 to 6 in special education attend public schools (Ministerio de Educación y Formación Profesional, 2020c). Enrolment in the public system is also the norm, with 78 per cent of children with special needs attending ordinary schools. Only 1.7 per cent attend fully private schools, and just over 20 per cent are enrolled in schools that are publicly subsidized (own calculations; Ministerio de Educación y Ciencia, EDUCAbase). Subsidized private schools are allowed to charge fees for supplementary services (European Commission, 2021c) and this could add to the financial pressures on the families of children with disabilities. Parents already face significant costs related to disability (therapies, materials or equipment), coupled with particular challenges to their continued participation in the labour market (Jiménez Lara and Huete García, 2011).

There are national-level aids and subsidies for children over 2 years enrolled in ECEC centres who have special educational needs related to disabilities. However, these are not universal and are tied to certain economic requirements (in the case of aids) or reserved for large families (subsidies) (Plena Inclusión, 2015).

Data issues also mask the situation of children in alternative care, with a lack of complete, disaggregated data on their enrolment in ECEC services (Lerch and Nordenmark Severinsson, 2019). Family-based care (either within or outside the extended family) is the norm for children under 6 who have been separated from their families, in contrast with other age groups. However, the number of families offering a home to such children fell in 2019 and 8.4 out of every 100,000 children in Spain aged 4 to 6 now live in residential care (compared to 35 out of every 100,000 who live in family-based care). The figures for children under the age of 3 are 7.2 per 100,000 versus 40.4 respectively (Ministerio de Derechos Sociales y Agenda 2030, 2020).

Children in situations of extreme vulnerability (such as children in precarious family situations, homeless children, or children experiencing severe housing deprivation) who lack sufficient family or social support are placed in alternative care if their situation of social risk is seen as very substantial or prolonged (CRS España, 2014). Children in alternative care have a legal right to be prioritized in admission to the educational centre that best suits their personal circumstances and needs. However, there is, as noted, no systematic data on their situation regarding ECEC (Montserrat et al., 2015).

While many children are still growing up in institutions, there is a lack of de-institutionalization strategies and, at present, no national strategic framework to encourage a transition from institutional care to family- and community-based care. The need for comprehensive changes in this area has, therefore, been underscored. The main priorities for reform have been identified as increased coordination between the regions and the central administration to establish common criteria for alternative care, and the provision of adequate financial support for a family-based care model (Lerch and Nordenmark Severinsson, 2019).

Other important dimensions of ECEC include its provision within families and the extent to which parents can reconcile the care needs of their children with their own employment. About 36 per cent of children under 3 and only 1.5 per cent of children aged 3 to 6 in Spain were cared for exclusively by their parents in 2019 (Eurostat, ILC\_CAPARENTS indicator). According to data from the ECV, children spent an average of 15.2 hours each week in formal childcare in 2019, rising to 28.3 hours among children aged 3 to 6. If only children with some formal childcare are considered, the percentages are 26.5 and 28.8 (Eurostat ILC\_CAMNFORALL and ILC\_CAMNFORG0 indicators, respectively). Even in the best scenario, the hours covered by this formal arrangement do not come close to the number of hours



parents usually spend at work, which reveals significant and unmet needs in terms of ECEC schedules. Despite the extension of paternity leave from 2 to 16 weeks with 100 per cent wage replacement over the past decade and the considerable increase in uptake by fathers (Jurado-Guerrero and Muñoz-Comet, 2020), mothers remain significantly more likely than fathers to leave paid work to care for small children (Men in Care, 2021).

In addition to the care-related gender gap – which is particularly large when children are small – and insufficient measures to reconcile the demands of work and family, experts have underscored the need to develop public policies that encourage a co-responsible distribution of care and, therefore, the maintenance of employment for both parents. While the recent replacement of paternity and maternity leave by gender-neutral individual birth leave is a positive step in this direction, additional efforts are needed, such as workplace measures that facilitate men’s involvement in care (Men in Care, 2021), the reinforcement of public ECEC (Baizán et al., 2013) and the promotion of men’s uptake of paid and unpaid leave to care for young children.

Insufficient access to enough hours of childcare is likely to reduce mothers’ participation in the labour market and this, in turn, increases the risk of household poverty, given that having only one breadwinner is not enough to meet material needs in Spain today. Indeed, women account for 94 per cent of those who work only part-time for care reasons (Instituto de las Mujeres, 2020). Many Spanish households are, therefore, in a position of increased socioeconomic vulnerability as a result of insufficient work-family reconciliation measures, limited access to formal ECEC that is fully compatible with work schedules and the related gender gap in care. Their situation is exacerbated by the uncertainties that characterize the Spanish labour market, coupled with the need for two salaries to sustain a family (Gálvez Muñoz, 2013).

## **Conclusions**

The children in the greatest immediate need for ECEC support in Spain are those between 0 and 3 years’ old who live in situations of particular socioeconomic vulnerability. These children include those in low-income households, who face barriers to ECEC access related to affordability. It is also worth highlighting, however, the situation of families in the second income quintile, who often struggle to meet the costs of ECEC, yet do not qualify for preferential access or subsidies as a result of very restrictive requirements or income thresholds.

Children of non-EU migrant origin under 3 years of age also show significantly lower ECEC enrolment rates than their native counterparts, possibly as a result of financial difficulties, perhaps combined with cultural factors. Such barriers have also been underscored in the case of Roma families and, given that there are virtually no statistics on their use of first-cycle ECEC services, they merit particular attention.

Finally, it is important to note that, while children with disabilities are generally enrolled in mainstream ECEC centres that are publicly financed, there are concerns about delays in the detection of special needs and related interventions, as well as the extent of specialized support. As a result, it is vital to focus on the quality and scope of the services they receive, given the substantial educational and developmental challenges they so often face. Likewise, it is essential to develop measures targeted at children in alternative care who, in addition to

their preferential access to formal ECEC services, need greater efforts to strengthen family-based models for their care.

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### 3. EDUCATION

- While there is universal access to compulsory education in Spain, children's experience of schooling can be enhanced or hampered by the nature of the country's education systems, as well as their own living conditions.
- A significant share of children become alienated from education as a result of the segregation of schooling, with the most vulnerable children often concentrated in specific schools and the use of grade repetition for those lagging behind.
- The implementation of the ECG in Spain should promote the effective identification of students who need greater educational support, and interventions to meet their needs.

This chapter focuses on the process of school disengagement and failure of disadvantaged pupils in Spain, and the many factors that shape these challenges, taking into consideration different levels of analysis (local, regional and national). We structure our review around three key areas: resources (which enable success in education); inequality in educational trajectories; and school conditions. While some vulnerable groups, such as children from a migrant background or in precarious family situations are covered in standard microdata on education (such as PISA, TIMSS, PIRLS, EU-SILC<sup>13</sup>) data on other children, such as those with disabilities, those from a minority racial or ethnic background (particularly Roma), and children in alternative (mainly institutional) care, is sparse and limited to specialized datasets.

We take a wide view of education that includes both formal and informal educational settings as well as children's living conditions. All of these can shape their educational opportunities and trajectories and have the potential to either enhance or limit their academic attainment and their participation in extracurricular activities. In addition, Spain is a country characterized by substantial regional differences in educational performance.

There is a recognition at the EU level that students failing in school are not one homogenous group and that there is no single predictor of who will leave school early: *"neither underachievement nor early school leaving is a result of only interpersonal factors, but rather a combination of personal, social, economic, education and family domains"* (European Commission, 2014). Early school leaving is a process rather than a one-off event. That process often begins during primary education with children who experience low performance and growing alienation from school. Transitions between schools and educational levels are particularly difficult for pupils at risk of dropping out (European Commission, 2014).

What matters for service provision is whether the education system is inclusive, equitable and of the same quality for all. In that sense, lack of resources, school segregation, underachievement and early leaving are all indicators of inequalities, discrimination and a failure to reach out to the most vulnerable children and take steps to compensate for their disadvantages.

#### 3.1. Investment in education and school conditions

Almost 85 per cent of Spain's public expenditure in education is managed by the ACs, which explains why resources per student, their composition and trends all vary across the country's

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<sup>13</sup> Programme for International Student Assessment; Trends in International Mathematics and Science Study; Progress in International Reading Literacy Study; EU Statistics on Income and Living Conditions.

regions. Average annual expenditure for every full-time equivalent student from primary to tertiary education was among the lowest for OECD countries between 2012 and 2017 (OECD, 2020). The reduction in public spending during and following the Great Recession also meant a significant increase in private spending, which grew by 25 per cent between 2008 and 2014 (Pérez and Uriel, 2016).

There is agreement that the characteristics of any educational system influence students' learning and achievement and have an impact on educational inequalities (OECD 2016a; 2011a). In Spain, there is an ongoing process to update two structural elements of the educational system: a revision of both the curriculum and of evaluation to move towards competence-based learning in line with the EC recommendations on key responsibilities for lifelong learning (2018). This will entail a revision of teaching management, with a greater emphasis on diversity, students' needs and social change (Interview with central public administration).

**Table 3.1.** Public expenditure on education

Educational expenditure (2018)		
	Spain	ACs
<b>Public expenditure on education as a % of GDP</b>	4.23% EU-27 (2019): 4.7% (Ireland 3.1%; Sweden 6.9%)	Basque Country: 5.2% Catalonia: 3.67%
<b>Public expenditure on education per pupil/student</b>	Mean: €6,063 Early child education: €4,875 Primary education: €5,110 Secondary education: €6,373 Tertiary education: €8,398	<i>Public schools</i> Basque Country: €9,298 Navarre: €7,456 Madrid: €4,727 Andalusia: €5,077

Source: Sistema Estatal de Indicadores de la Educación 2020 (Ministerio de Educación y Formación Profesional); Eustat (Basque country); Idescat (Catalonia); Eurostat (2019).

### Segregation

School segregation refers to the separation of students by origin, socioeconomic background, minority status or other characteristics within the school system. High levels of segregation signal limited contact between groups, and more segregated systems tend to display more educational inequality (Ferrer and Gortazar, 2021; OECD, 2016a).

Segregation in Spanish schools results in different educational opportunities for children, with students in the least advantaged schools often receiving comparatively less resources and academic input (Prieto-Latorre et al., 2021; Tourón et al., 2018). The literature has focused on segregation between students from migrant and non-migrant background, advantaged and disadvantaged backgrounds, and levels of educational achievement (OECD, 2019b). In addition, one report has analysed the segregation of Roma students (Santiago and Maya, 2012).

School segregation in Spain is higher in primary education than at the secondary level (Bonal et al., 2019; Ferrer and Gortazar, 2021; Prieto-Latorre et al. 2021). Indeed, Spain has one of the highest rates of socioeconomic segregation in primary education in the OECD, with only

Lithuania and Turkey being more segregated (Ferrer and Gortazar, 2021). In contrast, segregation by origin in primary education, while substantial, is close to the OECD average. The region of Madrid, where segregation in primary education has increased steeply over the past decade, is even more segregated than the Spanish average (Ferrer and Gortazar, 2021; Gortazar, 2021). As a result, socioeconomic segregation in primary education is now a key concern in Spain.

At the secondary education level, Spain exceeds the OECD average in terms of socioeconomic segregation: in Europe only Hungary and the Czech Republic are more segregated (OECD, 2019b). The data also suggest large regional variations, with Madrid, the most segregated region in Spain, displaying one of the highest segregation rates in the OECD. Segregation is also high in the Canary Islands and Catalonia, and lowest in La Rioja, Cantabria and Aragon (Murillo and Martínez-Garrido, 2018; Ferrer and Gortazar, 2021). While segregation by origin is below the OECD average, there are, once again, strong regional variations, with the Basque Country, Extremadura and Andalusia showing the highest segregation, and Navarre, Murcia and the Balearic Islands the lowest (Ferrer and Gortazar, 2021). Decreases in segregation in secondary education are related, in part, to higher school drop-out among students from a migrant background.

Santiago and Maya (2012) collected data on areas in Madrid (Community of Madrid), Barcelona (Catalonia), Badajoz (Extremadura) and Córdoba (Andalusia) that were characterized by a high concentration of Roma populations. Their study uncovered a strong concentration of Roma students in specific schools in all four provinces (with some schools attended almost exclusively by Roma students), even though those from the Roma minority accounted for only between 15 per cent and 50 per cent of the population in the area. Their findings indicate schools that are extremely segregated.

School segregation reflects, in part, residential segregation (Bonal et al., 2019; OECD, 2019b). School places are allocated according to varying (albeit relatively similar) rules by ACs, with a component linked to place of residence and other factors such as siblings, special needs, etc. having varying weights. However, research in Madrid and Barcelona has found school segregation to be stronger than residential segregation, indicating that there are other elements in play (Bayona and Domingo, 2021b; Gortazar, 2021; Bonal et al., 2019). For example, Barcelona has high levels of school segregation among children from a migrant background, and a comparison of residential and school segregation shows that the latter is always greater (Bayona and Domingo, 2021b). In Madrid, Gortazar (2021) estimates that 40 per cent of socioeconomic segregation and 75 per cent of segregation by origin takes place within neighbourhoods. The presence of inequalities that are not associated with residential segregation suggests that there is potential for educational policy to have an impact on segregation.

The literature highlights that segregation is the result of complex and multifaceted processes involving residential segregation, provision, parental preferences and inequalities in access (Bayona and Domingo, 2021b; Ferrer and Gortazar, 2021; Bonal et al., 2019, 2021; Allah, 2018; OECD, 2016). The latest OECD (2019b) report on educational equity unpacks segregation in three factors: social segregation between public and private schools, social segregation among private schools and social segregation among public schools. In Spain, social segregation between public and private schools is far higher than the OECD average. Equally, 80 per cent of students from a migrant background attend public schools (Estadísticas de Educación, EDUCAbase, 2021).

There are also large differences between regions. Those with higher proportions of private and subsidized schooling, such as Madrid and the Basque Country, also deploy high levels of segregation. The cost of subsidized education is one factor that locks families out, and it increases segregation as poorer families cannot afford its (sometimes hidden) costs (Bonal et al., 2021; Allah, 2018; Santiago and Maya, 2012). Indeed, the neighbourhood supply of private subsidized schooling has been identified as a main predictor of educational segregation (Gortazar, 2021; Bonal et al., 2019).

Segregation occurs not only between the public and the private system but also within those systems (Prieto-Latorre et al., 2021; Murillo and Martínez-Garrido, 2018). While some segregation is to be expected (e.g. associated with educational preferences), segregation within the public system can be seen as a cause for concern. The high segregation in Spain appears to reflect the concentration of high economic, social and cultural status (ESCS) students within a few public schools (Murillo and Martínez-Garrido, 2018; also Prieto Latorre et al., 2021, using data for Andalusia). In Madrid, for example, the adoption of the bilingual educational system promoted an exodus of disadvantaged and migrant students out of public schools that adopted English as a teaching language (Anghel et al., 2016). In Catalonia, the Síndic de Greuges (2016) challenged the concentration of disadvantaged, migrant and Roma students in certain public schools. The concentration of disadvantaged students has been exacerbated to some extent by the allocation of newly arrived students to particular schools (Bayona and Domingo 2021a), an issue that the new Catalan admissions law intends to tackle (2021, interview).

Research on the segregation of Roma and migrant communities has identified a process labelled as ‘white flight’, where advantaged and majority students avoid schools perceived as problematic (Ferrer and Gortazar, 2021; Allah, 2018; Farre et al., 2018; Santiago and Maya, 2012) and where the most educated students are also the most likely to switch schools in response to an increase in immigration (Farre et al., 2018). In addition, there is anecdotal evidence that some schools employ dissuasion techniques to avoid the enrolment of students from marginalized groups (Síndic de Greuges, 2016; Santiago and Maya, 2012).

There is some agreement that school choice is a key factor in increasing segregation in Spain (Bonal et al., 2021; Allah, 2018). Gortazar (2021), for example, identifies demand and supply factors that underpin school segregation in the country. Demand factors include household preferences and residential dynamics, while on the supply side, Gortazar highlights the local provision of private schools, economic and language barriers, school organization and admission policies. Differences in educational quality between schools (whether perceived or real), shorter school hours, changing schools between primary and secondary education, and less developed school services in some areas are all associated with increased segregation (Gortazar, 2021). The design of effective policies to reduce segregation would benefit from further exploration of the interaction between such factors and their variations across Spain.

### **3.2. Educational disadvantage**

Deprivation measures assess the ability of individuals and households to meet socially defined needs, with outcomes for children shaped by the school environment as well as household resources (Lanau, 2021; Richardson et al., 2021; Ayllón, 2017). Household resources enable children to cover their needs and participate in key education and development activities. However, data on education and deprivation are scarce and are often limited to the national level. Here we consider three sets of indicators: difficulties in covering the cost of education,

deprivation of essential education-related items, and inequalities in access to information technologies.

**Table 3.2.** Educational deprivation in Spain (percentage of school-aged children)

Children aged 4 to 16 who cannot participate in:	Deprivation		Notes
	Total	Poor	
School trips and activities that cost money	11%	27%	The data do not allow disaggregation by ACs or target groups
Leisure activities	13%	30%	

Source: Authors' elaboration using SILC 2014.

#### Difficulties in covering the cost of education

Even when services are free at the point of use, barriers may still prevent children from accessing these services effectively (Lanau et al., 2020). Attending school and, even more so, making the most of educational opportunities, implies costs for households to cover transport, activities, books and other materials. According to the SILC, one in three children in Spain lived in households who found it very or moderately difficult to cover the costs of formal education in 2016. The costs of education are more of a burden for children in low-income households (50 per cent of households find it difficult), in lone parent households (40 per cent) and those living in peri-urban areas and middle-sized towns, compared to those in either cities or rural areas (38 per cent versus 28 per cent) (EU-SILC, 2016, own calculations).

#### Deprivation of essential education-related items

The most common forms of deprivation among Spanish children relate to a lack of participation in social and leisure activities, and in extended educational opportunities (Ayllón, 2017). Access to leisure and sport activities also depend to some extent on household income, but also on the availability of public services (e.g., summer camps, spaces for recreational activities, sports clubs, etc.) (Lanau et al., 2020), which points to a gap in service provision. Such forms of deprivation occur chiefly in the most disadvantaged households (Lanau, 2021), although participation can also be particularly costly for children with special educational needs and/or those living in rural areas.

Participation in out-of-school activities is highly valued by children and is important for their healthy development (Pillas et al., 2014). In general, participation in these activities is also associated with better educational outcomes (Carmona Rodríguez et al., 2011), although there is some debate as to the potential of such activities to compensate for educational inequalities (OECD, 2011b). Countries with higher educational achievement in the Programme for International Student Assessment (PISA, which assesses children aged 15) have longer school hours on average, while their students also tend to spend less time in extracurricular activities (OECD, 2011b). Equally, resilient students (students from disadvantaged backgrounds who achieve high educational outcomes) also tend to spend more time in school (OECD, 2011a). Extracurricular activities with school teachers are found to have a positive correlation with equity (OECD, 2011b). In short, the positive association between resilience and school time and between school time and reduced inequality may reflect, in part, the quality of education.

National data on children's educational deprivation, including participation in school trips and activities as well as out-of-school programmes, were only collected in the EU 2014 SILC module



on child material deprivation. Data on child deprivation data at the regional or local level tend to be sparse and sporadic. One exception is the 2014 Barcelona Barometer, which found that 11 per cent of children were unable to take part in leisure activities on a regular basis, a proportion similar to the Spanish average (13 per cent) and well below the estimates for Catalonia (21 per cent), suggesting that leisure deprivation was an issue in the region, particularly outside the capital and perhaps in rural areas. A similar pattern is seen for deprivation in relation to educational activities that cost money, although its prevalence is lower: 7.5 per cent in Barcelona, 13 per cent in Catalonia and 12 per cent in Spain (Marí-Klose et al., 2016). The national data also suggest a slight disadvantage for children living in peri-urban and rural areas.

That is not to say that there are not extremely disadvantaged students in the city. The survey had a boost sample in one of Barcelona's most disadvantaged neighbourhoods, *Ciutat Meridiana*. There, one in three children could not afford leisure activities and one in four could not participate in school activities that cost money (Mari-Klose et al., 2016). Ensuring accessible and affordable educational and leisure provision has the potential to improve the lives and opportunities of some of the most vulnerable children. The sharp disparities within this one Spanish city demonstrate that local and neighbourhood diagnoses are essential to identify children's needs and design adequate interventions.

#### Educational digital deprivation

The vast majority of Spanish children and adolescents aged 10 to 15 (over 90 per cent), have access to high speed internet (INE, 2020). Nine in ten children and adolescents have used a computer in the past three months, and a similar proportion has used the internet. Access to a computer is highest in the Basque Country and Valencian Community and lowest in the Autonomous Cities (around 6 in 10) (INE, 2020).

There is, however, a marked digital divide, with vulnerable children far more likely to lack access to technology. A survey by Secretariado Gitano (2020) found that only one in three Roma children had access to a computer and only 40 per cent had access to the internet, which translated into having difficulties in keeping up with education during the lockdown triggered by the COVID-19 pandemic.

In addition, having equipment in the household does not guarantee that a child can use it for their schoolwork (Save the Children, 2020). We define 'educational digital deprivation' as not having a computer that can be used for schoolwork or an internet connection at home. And the digital divide between children from different economic backgrounds, origins, minorities and regions is often considerable, as shown in Table 3.3.

**Table 3.3.** Educational digital deprivation by socioeconomic characteristics

% students without computer at home that can be used for schoolwork					
Spain	Differences between ACs	q1 (ESCS)	q2 (ESCS)	q3 (ESCS)	q4 (ESCS)
8.6%	Catalonia 5.1%-Ceuta 19.4%	20.2%	8.0%	4.2%	1.7%
Female	Male	Native	First-generation immigrant	Second-generation immigrant	Roma*
7.4%	9.7%	7.4%	16.6%	15.5%	40%

Source: PISA 2018. \*Roma data from FRA: proportion of students without internet access.

All in all, improving equal opportunities in education requires a reduction in education-related costs, making activities such as school trips and leisure activities more affordable and accessible and supporting the digital transition for all.

### 3.3. Educational performance, achievement and trajectories

Some students are trapped in a vicious circle of poor performance and demotivation that leads to more bad marks and further disengagement from school. Poor performance at age 15 is the result of a combination and accumulation of multiple barriers and disadvantages that affect students throughout their lives (OECD, 2016) and that can be detected at the early stages of their compulsory education. Here we discuss evidence on underachievement, performance inequalities and vulnerable educational trajectories.

#### Underachievement and poor performance

Spain has a high proportion of students who are low performers and underachievers throughout their educational trajectory when compared to the average for OECD countries. According to TIMSS 2019 (Trends in International Mathematics and Science Study, 4<sup>th</sup> grade, children aged 9 to 10), Spain has a proportion of students at the lowest levels of the mathematics and science scale that is far above the average (see Table 3.4) as well as regional differences that are already apparent in primary education. Socioeconomic inequalities in reading are already apparent at this age and the gaps widen during lower secondary education. The achievement gap between native students and those from a migrant background increases between the ages of 9 to 10 and 15 to 16, but narrows when previous levels of achievement are considered. These results stress the importance of early intervention to improve performance during compulsory secondary education and to tackle educational inequalities (Choi et al., 2018).

**Table 3.4.** Underachievement by socioeconomic background

Underachievement		Low/very low performance				
<b>9/10 years old</b>	<b>Spain</b>	<b>Differences between ACs</b>				
Mathematics	9%	Very low: Castile and León 3% - Ceuta 22%				
Science	6%	Very low: Castile and León 1% - Ceuta 22%				
Reading	17%	Very low/ low: La Rioja 1%/12% - Basque Country: 4%/21%				
<b>15/16 years old</b>			<b>q1 (ESCS)</b>	<b>q2 (ESCS)</b>	<b>q3 (ESCS)</b>	<b>q4 (ESCS)</b>
Mathematics	23%	Low: Cantabria 15% - Melilla 56%	38.8%	26.7%	17.2%	8.3%
Science	20%	Low: Galicia 12.1% - Ceuta 52.3%	32.3%	22.6%	15.3%	7.8%

Reading	22.1%	Low: Castile and León 15.5% - Ceuta 57.5%	34.0%	25.0%	18.5%	10.8%
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Sources: Ministerio de educación y Formación Profesional, 2020 (TIMSS, science and maths 9/10 years old); Ministerio de educación y Formación Profesional, 2017 (PIRLS, reading 9/10 years old); PISA 2018 (15/16 years old).

The underachievement indicator in PISA measures the share of 15 year-old students failing to reach level 2 ('basic skills level') in three core school subjects: reading, mathematics and science. Here, socioeconomic status is a strong predictor of both performance and underachievement (Bilican Demir and Yildimir, 2020).<sup>14</sup> It explains 12 per cent of the variation in mathematics performance in Spain (and 14 per cent of the variation across the OECD countries), and 10 per cent of the variation in science performance (compared to 13 per cent for the OECD) (OECD, 2019a). Almost four in ten low-ESCS students are also low performers: 4.6 times more than students in the top quartile of ESCS. Furthermore, 29 per cent of underachieving students are below proficiency level 1 (lowest performers). Finally, almost half of the first generation students from a migrant background in the bottom quartile of ESCS have lower performance in the three responsibilities.

According to the Barcelona Education Consortium (2021, interview), there are significant inequalities both in terms of school results (primary and secondary), and in the Compulsory Secondary Education (CSE) graduation rate. For example, 7 times more adolescents do not achieve basic English language skills in lower-income districts such as in *Ciutat Vella* (27.4 per cent) or *Nou Barris* (23.9 per cent) than in *Sarrià-Sant Gervasi* (3.5 per cent) or *Les Corts* (3.7 per cent), which are both high-income areas. While 96 per cent of teenagers graduate in districts such as *Les Corts* or *Sarrià Sant-Gervasi*, this falls to 82.4 per cent in *Nou Barris* and 78 per cent in *Ciutat Vella* (Institut d'Infància i Adolescència de Barcelona, 2019).

### Absenteeism

Absenteeism – particularly among low performers – means that many students miss out on learning opportunities. At 29.6 per cent, absenteeism in the Spanish educational system remained above the OECD average of around 21 per cent (OECD, 2018). Students from low-income households are more likely to miss school.

At the local level, districts with low average household income in both Barcelona and Madrid have 5 to 15 times more absenteeism than higher-income districts (Portal de Transparencia, Ayuntamiento de Madrid, 2020; Institut d'Infància i Adolescència, 2019). Using 2018 PISA data, García and Weiss (2020) find substantial differences between ACs in Spain, with a gap of 14 percentage points between Asturias, the region with the highest absenteeism rate (35 per cent), and Galicia, the region with the lowest rate (21 per cent) (compared to a Spanish average of 29.6 per cent in their sample). Severe absenteeism, where students have missed school for three or more days, ranges from 8 per cent in Asturias and the Basque Country, and 4 per cent in Castile and León and Cantabria, with the Spanish mean at 7 per cent.

Absenteeism is especially high among Roma students, particularly girls (de la Rica et al., 2019). Municipalities with a high concentration of Roma show higher absenteeism, both in primary and, especially, in secondary education (Fundación para el Secretariado Gitano, 2013; Fundació Jaume Bofill, 2001). It is also important to recognize the particular case of children in care and the problem of system-induced absenteeism: "*children in care are too often pulled*

<sup>14</sup> In PISA, pupils' socioeconomic background is estimated by the PISA index of economic, social and cultural status (ESCS), which is based on information about the pupils' homes and background.

out of the classroom to attend meetings, or appointments linked to their status of foster child including visits to a therapist, social worker, or guardians” (interview with academic).

### Repetition

Repetition of an academic year due to poor grades is one of the main tools used in Spain to respond to poor school performance. However, there are several arguments against its application: it is considered a very expensive policy (Manacorda, 2012) and it may have a negative impact on students’ motivation (Ikeda and García, 2014). In addition, empirical evidence indicates that it is applied unequally: low-socioeconomic status (SES) students and those from a migrant background are at greater risk of having to repeat a grade (Cordero et al., 2014; OECD, 2014). Repetition is also associated with a higher probability of early school leaving (Stearns et al., 2007; Jimerson et al., 2002).

Using PISA 2012, Choi et al. (2018) observed that living with both parents reduces the probability of repeating a grade considerably. Being a boy and from a low-SES household increases the likelihood of grade retention in secondary education (even when controlling by PISA scores). The authors highlight the importance of students’ previous performance for their probability of repeating a grade in lower secondary school: *“A one standard deviation increase in reading competencies at ages 9/10 reduces the risk of grade retention by almost 62%. This result suggests that early intervention could have a substantial effect in reducing high school failure rates in Spain”* (Choi et al., 2018, p.32).

Disparities between ACs are also high (see Table 3.5). Notably, some ACs such as the Balearic Islands and the Canary Islands already have very high repetition rates in primary education: close to or greater than 20 per cent. In general, the ACs with lower repetition rates in primary education are less likely to apply this measure in secondary education.

**Table 3.5** Repetition of an academic year by socioeconomic characteristics

Repetition at least once (at 15 years of age)					
Spain	Differences between ACs	q1 (ESCS)	q2 (ESCS)	q3 (ESCS)	q4 (ESCS)
28.7%	Catalonia 15.1%-Ceuta 49.1%	48.8%	35.1%	21.8%	8.9%
Female	Male	Native	First-generation immigrant	Second-generation immigrant	
34.1%	33.1%	25.8%	50.4%	41.0%	

Source: PISA, 2018.

### Early school leaving (ESL)

Early school leaving (ESL) is considered an important predictor of poorer outcomes for both the individual and for society. Those who do not complete upper-secondary education tend to come from groups that are marginalized and tend to go on to experience multiple disadvantages into adulthood (de la Rica et al., 2019; Save the Children, 2015). Reducing ESL remains a key challenge in Spain, which had the EU’s highest share of early school leavers from education and training in 2020 at 16 per cent, well above the EU27 average and the benchmark target for 2020 of 10 per cent.<sup>15</sup>

<sup>15</sup> The term ‘early school leaving’ includes all forms of leaving education and training before completing upper secondary education or equivalents in vocational education and training. The high early school leaving rates

Both individual student characteristics and, by aggregation, those of the centres they attend have a major influence on educational attainment and transitions from primary to secondary schooling. The socioeconomic and labour context, the educational system and public spending are important drivers of the disparities in attainment and ESL, but can also play a role in the reduction of inequalities that may derive from individual and school characteristics.

Most EU Member States reduced their ESL rates over the period 1997 to 2007. Spain, however, was the exception, with its ESL rate remaining at roughly 30 per cent. Any significant decreases have only been seen since 2008 (when ESL in Spain stood at 32 per cent). Since the early 2000s, ESL rates in Spain have appeared to follow a pro-cyclical pattern, with the number of early leavers increasing during periods of economic growth and falling during periods of depression (Guio et al., 2016; Petrongolo and San Segundo, 2002). The opportunity costs of remaining in education may be larger for low-SES households and were, indeed, particularly high in Spain during the period 2000–2007 when the total number of jobs increased by one third.

Again, there are marked differences in ESL across regions: northern regions have the lowest rates while Mediterranean and southern regions have the highest (see Table 3.6). Despite some fluctuation in these figures, these regional differences have remained largely unchanged over recent decades. The urban-rural gap is also relevant: Spain both rural and peri-urban areas in Spain have higher ESL rates than cities: 20 per cent, 19 per cent and 14 per cent respectively (Eurostat 2020).

These patterns would seem to strengthen the plausibility of the labour demand hypothesis: that students drop out of education because of the relative ease of finding low-skilled jobs (Choi and Calero, 2013). Regions with low-skilled youth workforce development or with low educational levels of the population show higher ESL rates. Also, post-secondary education alternatives, and particularly vocational studies, appear to have an impact on ESL rates, with lower rates in areas offering more training and vocational education (Alegre and Benito, 2010). Other authors find that a well-functioning vocational system helps to prevent ESL (Plank et al., 2005; Haywood and Tallmadge, 1995; Digest, 1987), as does the implementation of vocational systems with a strong component of industry experience (Gutiérrez-Doménech, 2011).<sup>16</sup> In all, 36 per cent of upper secondary students in Spain enrol in vocational education and training (VET) programmes compared to an average of 42 per cent for OECD countries (OECD, 2020).

Class inequality is also relevant for educational performance and for educational choices. Working class children, for example, are more likely to choose vocational training than the academic track (*Bachillerato*) (Bernardi and Requena, 2010). Compared with upper secondary education, vocational training implies lower costs in time and money and better labour market returns in the short run, avoiding unemployment or unskilled occupations. Yet, many students do not finish intermediate vocational training: the gap between registration and graduation is 15 per cent compared to 8 per cent in the academic track. Unlike the academic track, the specificity of vocational training means that the training desired by the student may not be available near the family home. The costs of travel and/or accommodation, coupled with a scholarship system that does not provide financial security, limit a student's choices to options

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recorded during the last decade led the European Commission to establish a higher specific threshold for Spain of 15 per cent.

<sup>16</sup> As an illustration, model estimates suggest that the dropout rate in Spain in 2007 would have been 6 percentage points lower had Spain adopted the Austrian learning model which produces Europe's highest share of vocational studies in upper education (Gutiérrez-Doménech 2011).

that are accessible but that may not match their interests: 24 per cent of those who drop out of VET do so because they do not like their course (Serrano et al., 2013).

According to the literature (Carabaña, 2007; OECD, 2007), while increasing education expenditure does not seem to have much impact on ESL levels, targeted spending strategies (*becas*) may be more effective, particularly for students with greater socioeconomic difficulties and/or lower academic expectations (Alegre and Benito, 2010). This type of student-focused support could, in turn, help to minimize the impact of low-skilled job development on ESL by reducing the opportunity cost of education for low-SES students (Alegre and Benito, 2010).

Economic inequalities are central to the high dropout rates across Spain as a whole and are also observed territorially. In the city of Barcelona, for example, 10 per cent of students do not graduate from compulsory secondary education (CSE). This average hides substantial disparities between districts: in *Les Corts* (with a high average household incomes) 96.3 per cent of teenagers graduate from CSE, while the rate is up to 9 per cent lower in districts with lower average household incomes, such as *Ciutat Vella* (78 per cent) and *Nou Barris* (82 per cent) (Institut d'Infància i Adolescència, 2019).

**Table 3.6.** Early school leaving rates

Early school leaving		
Spain	Differences by ACs	Differences by income quintiles
16%	Basque Country: 6.7% Madrid: 11.9% Balearic Islands: 24.2% Melilla: 24.1% / Ceuta: 24.7%	Q1 30% Q5 4%

Sources: Eurostat, 2020; INE, 2020.

Other factors, such as country of birth or ethnicity, are also relevant (de la Rica et al., 2019): for example, the percentage of ESL among students from a migrant background is more than double that of native students (29 per cent and 13 per cent respectively, according to EU-SILC 2019 data). Similar results are obtained for Catalonia by Bayona and Domingo (2021a) in an analysis of transitions to post-compulsory education, which finds that 24 per cent of pupils of migrant origin cease studying, compared with 13 per cent of native pupils. Even among those who continued studying, the post-compulsory education itinerary shows segregated paths. Among the native pupils, the first destination is the *Bachillerato* (61 per cent), with just 22 per cent entering vocational training. For pupils from a migrant background, only 45 per cent enter the *Bachillerato*, although the rate for vocational training is similar, at 23 per cent (Bayona and Domingo, 2021a).

A study by the Spanish Roma Foundation (*Fundación Secretariado Gitano*) shows that 63 per cent of Roma students dropped out in 2012, almost 40 percentage points more than the average for that year (Ministerio de Educación, Cultura y Deporte, 2013). According to a study carried out in Asturias in 2008, 85 per cent of the Roma students in secondary education were in the first two years of secondary education, falling to only 15 per cent for the next two years. The loss of the Roma presence is especially intense in post-secondary education (Iglesias et al., 2010) and only 17 per cent of Spain's Roma population has completed compulsory secondary education (de la Rica et al., 2019).

### Special educational needs

The Convention on the Rights of Persons with Disabilities (CRPD, 2006) encourages states to guarantee quality and inclusive education and training for all children with disabilities. In practice, that means prioritizing the integration of students with special educational needs (SEN) into ordinary schooling through the provision of specific resources and adaptations to guarantee equity in education (Jiménez Lara et al., 2019).

Spanish legislation establishes three sets of possible adjustment measures for students in compulsory education: ordinary measures that do not require curriculum adjustments; extraordinary measures that do require adjustments; and exceptional measures, where ordinary and extraordinary measures are deemed insufficient (European Commission, 2021). Such measures can apply to students with SEN associated with a physical, mental or sensory disability, or severe conduct disorder, as well as to students with specific support needs (e.g. with high intellectual abilities or who have been late in joining the education system).

As with other areas of education, some aspects of SEN provision are regulated nationally and some depend on ACs. As a result, there are – yet again – significant variations between regions in the extent to which students with SEN are integrated into the mainstream, as well as in the resources assigned to students, although evidence on the latter is scarce. All ACs consider Special Education Centres (*Centros de Educación Especial*) as an exceptional measure, prioritizing the integration of children with SEN into mainstream education (Jiménez Lara et al., 2019).

According to the latest data from the Ministry of Education (Estadísticas de Educación, EDUCAbase, 2021), the proportion of SEN students in mainstream education in 2019-2020 ranged from a low of 68 per cent in the Valencian Community to a high of 93 per cent in Galicia. Aragon and Extremadura were at the lower end of the scale (with 73 per cent and 75 per cent), and Navarre, Ceuta and Asturias were at the higher end, with rates of 90 per cent, 88 per cent and 87 per cent, respectively.

It is also important to note, however, that there are large fluctuations between years, which are likely to be caused by data issues (Jiménez Lara et al., 2019) although efforts are being made to harmonize data across ACs (interview, Ministerio de Educación y FP). There are also substantial variations by disability: most students with auditory and visual disabilities are integrated into the mainstream system, but this is less common for students with intellectual disabilities, severe developmental disorders and particularly for students with multiple disabilities.

The specialized literature highlights differences in the offer made by ACs to students with SEN in terms of objectives, resources allocated to students, student-teacher ratios and other measures (Jiménez Lara et al., 2019; Abellán et al., 2019; Ojeda et al., 2019). For example, in their comparison of 'Aulas de Educación Especial' (AEE, within mainstream schools) across ACs, Abellán et al. (2019) conclude that these function as a replacement for special needs centres in some regions (Asturias, Cantabria, Castile and León and La Rioja) and are equally isolated; in others, they constitute a mechanism to ensure the participation of SEN students in mainstream schools. A study on AEE in Murcia (Arnaiz et al., 2021) reveals a tension between inclusivity and specialized support, and the need to achieve a balance between the two in SEN interventions.

Finally, there is a data gap on the achievements, skills, early drop-out and graduation of students with special educational needs (interview, 2021). Equally, there is limited information

on how regulations translate into practice. Assessing the effective implementation of integrative education programmes requires information that is not yet publicly available about the allocation of resources (such as hours of support), as well as outcomes (e.g. skills achievement, attainment, graduations), ideally considering both types of disability and their severity.

## **Conclusions**

While universal participation in school has been achieved, Spain is tackling a number of important challenges on quality and equity. Children from low socioeconomic status backgrounds, from some minority groups (Roma students and those from a migrant background), children with special educational needs, and children in care are more likely than others to experience tensions in the transition from primary to secondary schooling and to find themselves lagging further behind. The amount of data on some of these children is limited, which makes it difficult to monitor their educational trajectories or their access to educational services and to evaluate their evolution.

Three key issues need to be addressed to improve educational outcomes and access to services for disadvantaged children: school segregation, the repetition of academic years, and weaknesses in the Spanish scholarship system.

First, school segregation based on different attributes (learning needs, migration status, socioeconomic level) contributes to inequality in the learning conditions of students and disrupts educational results for the most disadvantaged. The multidimensional and multi-causal nature of school segregation makes it difficult to identify universal measures that are valid in any territorial context. Yet national and international evidence highlights measures that could reduce school segregation for the most socially disadvantaged pupils. These include, in particular, the effective identification of students with educational support needs and school-place reservations proportional to their presence across all parts of the country.

Second, the burden of repeating a grade undermines students' educational opportunities, especially for those who are the most disadvantaged. There are alternative pedagogical ways to reinforce and support learning that are far less harmful in terms of both efficiency and equity. It is hoped that the educational law (LOMLOE) recently approved in Spain to limit repetition may have a positive effect.

Third, the Spanish scholarship system is poor in its coverage and intensity in comparison to the systems found in other European countries. In terms of its design, the relative strength of the university scholarship programme contrasts with the weakness of the non-university education programmes, particularly at the levels of post-compulsory education. The decentralization of non-university scholarships, in contrast to the centralization of aid in higher education, entails a high territorial dispersion of aid models, with very different distributive capacity.

Contextual factors, such as the Great Recession and the COVID-19 pandemic, have accentuated educational inequalities. Lockdown has increased the educational gaps that already existed between students, with those from more advantaged backgrounds able to adapt and maintain higher standards of education during school closures than students from disadvantaged backgrounds who spent less time on schoolwork, had comparatively few learning opportunities, and whose learning experiences were limited in their diversity (Bonal and González, 2021).



In this context the ECG could be a key tool to identify the most vulnerable children and fund policies to support them. It could help to reverse the current situation in which schooling, which should play a key role in equity and social cohesion is, in reality, reproducing inequalities. The children who face the greatest educational challenges in Spain tend to use multiple services, but their use of these services is unlikely to be coordinated or tailored to meet their multiple psycho-social needs simultaneously, as shown by the situation of children in care. The ECG constitutes an opportunity to reinforce schemes to provide social, cultural and educational support to vulnerable children to help them reach their full potential through education. Such interventions should be designed to help correct institutional barriers (such as segregation, repetition and the current system of financing for scholarships) as a key way to reduce inequality.

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## 4. HEALTH AND NUTRITION

- General healthcare services are free of charge for all children under the age of 15 in Spain, and the percentage of children who cannot access such services is low.
- However, there are disparities across income groups, and children from a migrant background or from Roma communities are more likely to have unmet needs for healthcare.
- The implementation of the ECG constitutes an excellent opportunity to address the deficits in access to healthcare for vulnerable children, most notably in the domains of dental, ophthalmic, and mental health care. It may help to guarantee an adequate, healthy and balanced diet, which is vital to enable these children to reach their full potential.

This chapter reviews the health and nutritional status of children in Spain by covering some of the factors that may shape that status during childhood and adolescence, their effects on health and nutrition, and how these are distributed among the population under 18 years of age. As well as providing available data on child nutrition, we will explore data on access to healthcare, child health (including mental well-being), and health behaviour, such as physical inactivity.

The determinants of child health and nutrition are broad and range from environmental factors, such as access to healthcare services, to more immediate determinants, including everyday behaviour (e.g. dietary intake). These factors themselves are interdependent and are, in turn, influenced by background demographic characteristics, such as migrant status, as well as by socioeconomic factors (including educational status). In this sense, growing up in socioeconomically disadvantaged circumstances is associated with a greater risk of developing unhealthy behaviours, such as smoking, that have an impact on the physical and mental well-being of Spain's children. In addition, children from socioeconomically disadvantaged backgrounds may experience more obstacles to their access to healthcare services.

As highlighted by one of our interviewees, vulnerability and health have a bi-directional relationship, where vulnerability is linked to ill health, which is, in turn, linked to further vulnerability. As he pointed out, this is particularly clear for those healthcare services like dental care, mental care and ophthalmological care, which are normally paid for directly by families. This only increases the inequality gap, and specific programmes are in place in some ACs to narrow that gap, including programmes for oral health in the Basque Country and Navarre, for mental health in Catalonia, and for ophthalmological care in the Valencian Community (interview with expert).

### 4.1. Health and nutrition deficits

The health and nutrition of children living in Spain can be assessed from quantitative analyses of National Health and Nutrition surveys and studies. The problem with these surveys is the difficulty in assessing which children can be categorized as 'vulnerable'. To our knowledge, no deep analysis of the policies dedicated to the provision of services and resources in relation to healthcare and nutrition for children, and specifically for vulnerable children, has been conducted to date.

This chapter presents the most recent evidence on key indicators of children's health in Spain (see Table 4.1). National and regional data are provided, with the selection of individual indicators reflecting the availability of data that are comparable internationally. Two of the sources drawn upon extensively are the 2017 *Encuesta Nacional de Salud (ENSE)*, Spain's National Health Survey (Ministerio de Sanidad, 2017), and the survey by the World Health Organization on Health Behaviour in School-age Children (HBSC; WHO, 2018), which covers almost 50 countries. Other data sources include the *Encuesta sobre uso de drogas en Enseñanzas secundarias en España* (ESTUDES; Ministerio de Sanidad, 2018a), and the *Encuesta sobre alcohol y otras drogas en España* (EADDES; Ministerio de Sanidad, 2018b).

The ENSE is conducted by the National Institute of Statistics and is the main monitoring tool for indicators on self-reported health conditions, morbidity, life quality, access to healthcare, mental health and general health behaviours (Ministerio de Sanidad, 2017). This nationwide home-conducted survey runs every five years and includes a questionnaire for parents of children aged 0-14 years (children over 15 complete the same questionnaire as the adults). The survey includes representative sub-samples of individuals from all ACs in Spain, allowing for regional-level comparisons. There are, however, clear gaps in the collection of data on the status of our specific target groups, such as children living in institutional care.

The HBSC is a WHO collaborative cross-national study (gathering data from 48 countries) that is conducted every four years using self-reported online questionnaires. The HBSC includes answers from children aged 11 to 18 and focuses on understanding their health in their own social context (WHO, 2018). As this chapter will show, most surveys disaggregate their coverage data by sex, geographic area, migrant status and socioeconomic background. However, as shown in Table 4.1, statistics on other groups are less common, particularly children from a minority racial or ethnic background (particularly those from Roma communities) and those living in alternative care.

**Table 4.1.** Summary of indicators used in this section

Indicator	Level of data (geographic unit of analysis)	Source	Level of disaggregation available by target group*
<b>Access to health services</b>			
Coverage of health services	Spain/ ACs / Province	Encuesta Nacional de Salud (ENSE) / Encuesta de Condiciones de Vida (ECV)	1, 2, 3, 6
<b>Mental health**</b>			
Access to mental health services	Spain/ ACs	ENSE	1, 2, 3, 6
Self-perceived health	Spain/ ACs	ENSE/ Health Behaviour in School-aged Children (HBSC)	1, 2, 3, 6
<b>Oral health**</b>			
Tooth brushing	Spain/ ACs	ENSE/HBSC	1, 2, 3, 6

Unmet dental care needs	Spain/ ACs	ENSE/HBSC	1, 2, 3, 6
<b>Nutrition</b>			
Low birthweight (new-borns weighing <2500 gr)	ACs / Province	Spanish National Institute for Statistics (INE)	1, 2, 3, 6
Excess body weight (overweight/obesity)	Spain/ ACs	ENSE/HBSC	1, 2, 3, 6
Fruits and vegetables intake	Spain/ ACs	ENSE/HBSC	1, 2, 3, 6
Sugar-sweetened beverages intake	Spain/ ACs	ENSE/HBSC	1, 2, 3, 6
<b>Health behaviours</b>			
Physical Inactivity	Spain/ ACs	ENSE/HBSC	1, 2, 3, 6
Tobacco use	ACs / Province	ESTUDES / EDADES / HBSC	1, 2, 3, 6
Alcohol use	ACs / Province	ESTUDES / EDADES / HBSC	1, 2, 3, 6

\* Notes on target groups: 1: Children experiencing housing deprivation; 2: children with a disability; 3: children from a migrant background; 4: children with a minority racial or ethnic background (particularly Roma); 5: children in alternative (especially institutional) care; 6: children in precarious family situations. Information on these target groups is collected but is not always publicly accessible.

\*\* The overall aim of the coverage of health service indicators is to synthesize the extent of children's unmet needs for health services over a general and complex indicator.

#### 4.2. Access to healthcare services and to adequate nutrition

General healthcare services – including pre- and post-natal care, paediatric care, dental care for those under 15, among others – are all free for children in Spain. In addition, the public Healthy Child Programme encourages action to promote good health and prevent health problems in the paediatric age range (children aged 0 to 15).

In terms of accessibility, the percentage of the population who cannot access healthcare services is relatively low in Spain. According to data from the EU SILC 2017 ad hoc module, only 0.3 per cent of children in Spain were unable to access a medical examination or treatment in the previous 12 months.

There are, however, disparities. If we assess this measure from a household income perspective, we find that 0.8 per cent of children from families who live on less than 60 per cent of the country's median income experienced healthcare inaccessibility, in comparison with 0.1 per cent of children from families living on more than 60 per cent of the median income. Similarly, the percentage of children with unmet healthcare needs increases when we examine other factors: rising to 4 per cent for children from migrant backgrounds, and to 7 per cent for Roma children. This confirms that children from low-income households or from

migrant or particular ethnic backgrounds should be prioritized in further programmes to improve their access to healthcare facilities.

Evaluating children's access to and use of healthcare services is challenging. Some evidence suggests that in countries with universal coverage like Spain, there are no social inequities in the use of healthcare services linked to greater or lesser vulnerability. Indeed, some studies report that children in need use healthcare services more often than other more advantaged children (Palacio Viera, 2011). However, other studies in Spain have revealed some persistent social inequities related to health. For example, children who live in families with a higher parental level of education or who have double healthcare coverage, with private healthcare insurance in addition to access to the SNA, are more likely to visit a specialist or a dentist.

For this report, this topic is assessed through the data provided by the ENSE and by the *Encuesta de Condiciones de Vida (ECV)*, Spain's Living Conditions Survey. As a result, a secondary indicator has been selected: **healthcare coverage**. According to data from the 2017 ENSE, less than 1 per cent of children aged 0 to 15 have private health insurance and 16 per cent have double healthcare coverage. In terms of social inequities, 13 per cent of children from a migrant background have double healthcare coverage (versus 16.2 per cent of children born in Spain). In addition, only 3.4 per cent of children living in precarious family situations (those in the lowest socioeconomic quintile) have double healthcare coverage, compared to 43.1 per cent of children from the highest socioeconomic quintile.

At the regional level, Madrid, the Balearic Islands and the Valencian Community reported higher proportions of their populations with double healthcare coverage (30.1 per cent, 27.9 per cent, and 22.5 per cent, respectively). However, access to health services was lower in Murcia, Melilla and the Canary Islands (9.63 per cent, 6.39 per cent and 3.75%, respectively) as a result of monetary problems. Yet these data are not disaggregated by age group and refer to the general population.

To better understand the current situation of access to healthcare in Spain it is important to note that some healthcare services are not covered by the Spanish national health system, including ophthalmological and dental health. As a result, the unmet needs for ophthalmological and dental care are higher, particularly for children in the greatest need.

### Mental well-being

Mental well-being is critical for a healthy transition from childhood to adulthood. At the same time, mental health problems are an important driver of suicide, which is the leading external cause of death among adolescents older than 15 in Spain. This topic will be assessed through two main indicators: 1) **access to mental health services**, and 2) **self-perceived health** – a subjective indicator of general health that is useful for gaining a basic and general picture of how children feel about their lives.

Every AC in Spain provides standard mental health services, including access to child psychologists, but there are regional variations in the way child mental health services are delivered. According to data from the 2017 ENSE, 9 per cent of children aged 0 to 14 had visited a psychologist or a psychiatrist in the previous year. In terms of social inequities, a higher proportion of children from a migrant background (8.0 per cent) had visited a psychologist or a psychiatrist in the previous year than for those born in Spain (5.4 per cent).



At the regional level, children from Asturias, the Valencian Community, and Castilla-La Mancha were the most likely to report that they had visited a psychologist or a psychiatrist in the previous year (6.7 per cent, 6.1 per cent and 6.0 per cent, respectively). The lowest estimates were reported for Cantabria, Canary Islands and Murcia (3.0 per cent, 3.5 per cent and 3.6 per cent, respectively). Financial problems were stated as the main deterrent to access.

Measuring and monitoring children's overall self-rated health is an essential step to understanding how they feel about their lives and what they think should change. Self-reported data from the HBSC survey show that girls report poor or only fair health more often than boys. Only 37 per cent of girls from high-income families and 24 per cent from low-income families rated their health as excellent (WHO, 2018). In contrast, 53 per cent of boys from high-income families rated their health as excellent, as compared to 34 per cent of boys from low-income families. Importantly, this survey also finds that mental well-being has deteriorated since 2014.

Data from the 2017 ENSE reveal that 1 in 100 children had some form of mental health problem that year. This survey found that 1.8 per cent of children had a conduct disorder, 0.6 per cent had anxiety or depression, and 0.6 per cent had a less common disorder, such as autism spectrum disorder. Some children were found to have multiple disorders. In relation to those aged between 15 and 24, 2.1 per cent and 0.93 per cent, respectively, were diagnosed with anxiety disorder or depression, according to the most recent data (Ministerio de Sanidad, 2017).

Although the evidence suggests that childhood mental health difficulties are becoming more common, vulnerable children are particularly affected. Research has shown that several social vulnerabilities – including low family incomes or migrant status – are associated with self-perceived poor health (Bradley and Corwyn, 2002). As such, a clear pattern can be observed in almost all studies: the higher the income of a child, the higher the probability of them reporting good or very good health (Reiss, 2013). Furthermore, most European-based studies report that children from a migrant background present worse mental health than their native counterparts (Dimitrova et al., 2016). Potential explanations include the many challenges they face, which can have a negative impact on their mental health, including social exclusion, poor housing, discrimination, and the stress of trying to assimilate into a new and different culture. Data from the ENSE survey also reveal that conduct disorders were more prevalent among boys from low-income families in 2017. This survey showed no clear pattern for girls (Ministerio de Sanidad, 2017).

According to data from the Spanish Association of Eating Disorders (AEETCA), around 4.5 per cent of adolescents aged 12 to 24 in Spain had an eating disorder in 2019.<sup>17</sup> The prevalence of this type of disorder is higher among girls, who account for 90 per cent of the cases of eating disorders diagnosed in Spain. No clear and reliable data were found on the geographical distribution of the prevalence of eating disorders by ACs.

### Oral health

Good oral health is comprised of brushing the teeth twice a day, regular visits to dentists and a diet that is low in sugary drinks and snacks. According to the HBSC survey, 65.2 per cent of children aged 11 to 18 in Spain brushed their teeth more than once a day (74.1 per cent of girls

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<sup>17</sup> <https://www.efesalud.com/farmacias-contr-a-anorexia-bulimia/>.

and. 56.2 per cent of boys). Data from the 2017 ENSE show that 86.2 per cent of children aged 3 to 14 brushed their teeth twice a day, without any clear disparities between boys and girls.

According to the HBSC survey, there are persistent social inequalities in oral hygiene, with adolescents from most affluent families having better oral hygiene. Indeed, this survey reports a difference of 10 percentage points in the prevalence of good oral hygiene by family income in Spain (69.6 per cent for those with higher incomes compared to 59.1 per cent for low-income families). Data from the 2017 ENSE, however, reveal no social gradient in terms of socioeconomic status, yet children from a migrant background were more likely to brush their teeth twice a day than children born in Spain (59.6 per cent versus 45.6 per cent). At the regional level, children from Castilla-La Mancha, Madrid and Catalonia were more likely to brush their teeth twice a day (60.3 per cent, 54.2 per cent and 52.0 per cent, respectively) than children in Cantabria and Asturias – the regions that reported the lowest estimates (27.0 per cent and 29.6 per cent, respectively).

Other indicators of oral health also follow a clear social gradient (Reda et al., 2018). The overall prevalence of dental health problems for Spanish children was 31.1 per cent, rising to 36.4 per cent for children from a migrant background, according to the 2017 ENSE. In addition, the results of that survey also showed a lower prevalence of caries (9.29%) among Spanish children than among children from a migrant background.

Dental treatments such as tooth removals and cavity fillings are freely available to children in Spain aged 6 to 15. Yet, there is still a gap in unmet dental care needs between groups that are considered to be highly vulnerable and those that are not. In Spain, on average, children living in less affluent families were more likely to report the non-regular use of dental services than those children from more affluent families, according to data from the 2017 ENSE. As shown by the same survey, the prevalence of non-regular use of dental services was higher among children from a migrant background (51.8 per cent) than for Spanish children (35.4 per cent), although both proportions exceeded the current recommendations for regular check-ups. Similarly, there are some variations in the use of oral health services across ACs. The average number of visits to an oral health professional in the previous three months varied from 2.12 and 2.10 in the Community of Madrid and Catalonia to 1.50 and 1.33 in Extremadura and Ceuta (ENSE, 2017).

Although these figures do provide a comprehensive picture of the health of vulnerable children, they also confirm wide social inequities in terms of health spending. In Spain, children's utilization of dental health services is clearly well below the recommended level, and falls even lower among those from a migrant background. At the same time, dental care services offered by the public system to children are limited, which presents a barrier for access and contributes to inequalities among vulnerable groups (Rodríguez-Alvarez et al., 2019).

#### Children's nutrition

This topic has been assessed by four indicators: low birthweight, excess body weight, consumption of fruits and vegetables (F&V), and sugar-sweetened beverages intake (SSBs).

**Low birthweight** (<2500 g) is associated with many adverse health outcomes in the weeks immediately after birth, through childhood and on into adulthood, including the risks of high blood pressure, ischaemic heart diseases, diabetes, and metabolic syndromes. There is also considerable literature on its associations with social inequalities (socioeconomic status and educational level; Mortensen et al., 2008; O'Campo et al., 2008).

The prevalence of low birthweight has increased in Spain since 1980. As a result, the proportion of low birthweight babies in the country is above the EU average, at 7.7 per cent in 2018. At the regional level, Andalusia, Catalonia and Madrid have the highest proportions within Spain, according to data from the National Institute of Statistics. There are also wide inequalities as a result of deprivation, as shown by a study conducted in Barcelona that reported a social gradient in the prevalence of low birthweight across neighbourhood, socioeconomic status (SES) and country of origin (Irene et al., 2012). The territory in which a child is born is, therefore, an important factor that merits specific consideration when studying birthweight in Spain.

Looking at other sociodemographic factors, a recent study showed that having a low educational level was associated with an increased risk of low birthweight in Spain (Hidalgo-Lopezosa et al., 2019). However, the authors also observed a somewhat surprising higher risk of low birthweight in new-borns among Spanish mothers than among mothers of other nationalities.

Another relevant indicator is **excess body weight**, now seen as one of the most important public health challenges of the 21<sup>st</sup> century. This health problem tracks into adulthood, increasing the risk of developing cardiovascular diseases, type-2 diabetes, certain cancers and premature death (Di Cesare et al., 2019). Although definitions have changed over time, overweight/obesity can be defined as an excess of body fat. In Europe, researchers have classified overweight as having a body mass index (BMI) of at least or above 85 per cent, and obesity as having a BMI of at least 95 per cent.

Spain's prevalence of excess body weight is among the highest in the EU (Garrido-Miguel et al., 2019; Ahrens et al., 2014) and is still rising, while prevalence rates in some other Member States seem to be levelling off (e.g., France). Specifically, the 2017 ENSE reported that 27 per cent of boys and girls (aged 2 to 14) and 19 per cent of adolescents (aged 15 to 17) presented excess body weight in Spain (Ministerio de Sanidad, 2017). Excess body weight also varies widely between ACs. Murcia, Ceuta and Melilla show the highest proportions of children aged 2 to 17 who are overweight/obese (39.9 per cent, 37.1 per cent and 36.0 per cent, respectively), while Navarre, Aragon and Extremadura show the lowest prevalence rates (15.0 per cent, 20.7 per cent and 22.3 per cent, respectively).

As seen in many other indicators relating to child nutrition and health, vulnerable children are more likely to have poor outcomes. A study by Iguacel et al. (2018) reported that children with a higher number of vulnerabilities in Spain were also more likely to be overweight/obese (50.5 per cent) than those who reported no vulnerabilities (26.0 per cent).

Studies also suggest that the relative inequalities in BMI or overweight/obesity not only persist but are widening (Bann et al., 2018). According to the HBSC survey, excess body weight ranged from 16 per cent in children from high-income families to 39 per cent in children from low-income families (WHO, 2018).

Obesity and overweight are strongly shaped by family income. As such, studies have consistently shown an increased prevalence of obesity among children with specific social vulnerabilities such as having a low socioeconomic status, migrant status or lacking a traditional family structure (Chung et al., 2016; Barriuso et al., 2015). Finally, as highlighted in a survey carried out by Labree et al. (2011) in Europe, migrant children were at higher risk of

overweight and obesity than native children. In particular, ethnic minority children (particularly children who are Moroccan, Turkish, Latin American, or from Roma communities) have presented higher obesity rates than non-minority children. A recent longitudinal study conducted in Europe has also shown that the children of migrant parents had a higher risk of being overweight/obese than children from non-vulnerable groups (Iguacel et al., 2018).

A diet that is nutritionally balanced and varied is vital for the development and health of any child, but many young people do not eat enough **fruits and vegetables (F&V)**. A study by Zaborskis et al. (2020) found that, on average, only 1 in 3 young people in Spain reported consuming F&V daily. This finding echoes the HBSC survey, which reports that only 34.7 per cent of children aged 11 to 18 in Spain reported eating F&V each day. However, data from the 2017 ENSE paint a more positive picture, with 57.5 per cent of children aged 5 to 14 reporting that they eat F&V on a daily basis.

Both surveys, however, present F&V consumption as a socially patterned behaviour. Data from the HBSC survey show that children living in low-income families are less likely to consume F&V daily (13.5 per cent) than children from more affluent families (21.9 per cent). The 2017 ENSE also signalled a social gradient, with 72.7 per cent of children from high-SES families reporting a daily intake of F&V, compared to 59.3 per cent of children from low-SES families. The survey found that consumption was higher among those from a migrant background (63.2 per cent) than among those born in Spain (59.8 per cent). At a regional level, Castilla-La Mancha, Castile and León and Madrid showed the highest proportions of daily F&V consumption within Spain (82.5 per cent, 73.9 per cent and 75.6 per cent, respectively). In contrast, only 19.9 per cent of children from Cantabria reported eating F&V daily.

**Sugar-sweetened beverages (SSBs)**, including energy drinks, represent a serious public health issue, which is linked to a growth in health problems related to diet (e.g., type-II diabetes) (Malik et al., 2013; Schulze et al., 2004). According to the HBSC survey, 15.8 per cent of children aged 11 to 18 consume SSBs every day in Spain. This survey also shows a clear patterning of SSB consumption by family affluence in Spain, which echoes the patterns found by previous studies on the consumption rates of SSBs among children and adolescents (Terry-McElrath et al., 2014). Specifically, 21.5 per cent of children from low-income families consumed SSBs every day, compared to 11.6 per cent of children from high-income families.

The 2017 ENSE also revealed a social gradient: only 3.8 per cent of children from high-SES families reported a daily intake of SSBs, compared to 13.6 per cent of children from low-SES families. This survey also reports higher consumption among children from a migrant background (9.2 per cent) than the average for other children (5.4 per cent). At a regional level, Ceuta, Andalusia, and Melilla showed the highest proportions of daily SSB consumption within Spain (21.6 per cent, 17.1 per cent and 14.4 per cent, respectively), while less than 1 per cent of children from Cantabria reported drinking SSBs daily.

### 4.3. Health behaviours

#### Physical inactivity

For children and adolescents, the benefits of short-term physical activity include improvements in their lipid profile<sup>18</sup>, blood pressure, BMI and mental well-being. In Spain, the proportion of young people meeting the global physical activity recommendation of 60

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<sup>18</sup> A lipid profile is a snapshot of how much healthy or unhealthy fat is circulating in the bloodstream.

minutes of moderate-to-vigorous physical activity (MVPA) every day remains low. According to the HBSC survey, only 19.9 per cent of adolescents aged 11 to 18 met current recommendations for MVPA (WHO, 2018). Breaking this down by sex, 25.8 per cent of boys and 14.0 per cent of girls reported at least 60 minutes of MVPA daily. However, according to data from the 2017 ENSE, 14.0 per cent of children aged 5 to 14 spent their time in sedentary behaviours (10.8 per cent of boys and 17.4 per cent of girls).

There are also social inequalities in physical inactivity, with a higher family income being associated with higher levels of MVPA. In Spain, 23.0 per cent of adolescents from high-income families meet current recommendations for physical activity, compared to only 16 per cent of children from low-income families. Data from the 2017 ENSE also show that children with a migrant background were less likely to be physically inactive than children born in Spain (20.8 per cent versus 26.4 per cent).

## **Conclusions**

Access to primary healthcare services is universal in Spain, and the data show that only a low percentage of children (0.3 per cent) have no access to healthcare. However, children in low-income households, and particularly those with migrant or ethnic backgrounds, have experienced poor access to healthcare services, specifically to certain services that have been insufficiently developed in the SNS: dental, ophthalmologic and mental health care.

The development and implementation of the ECG could create the opportunity for the inclusion of mental health and oral health in the national healthcare system's coverage for all children and adolescents. To date, these services are included only partly for children under the age of 15, and families with children above this age may be unable to afford them. Furthermore, children from a migrant background and Roma children are far less likely to make regular use of these services, according to surveys.

Vulnerable children also have higher rates of overweight and obesity in Spain, particularly those from low-income households, those who live in single-parent households, and those who come from a migrant background or Roma communities. These data correlate with the daily consumption of sugar-sweetened beverages, which is higher among low-income children than among children from high-income households (21.5 per cent versus 11.6 per cent). In terms of daily fruit and vegetable consumption, we have found strong variations between ACs that should be addressed (from 82 per cent in Castilla-La Mancha to just 19 per cent in Cantabria).

One factor that clearly relates to child obesity is physical inactivity. Only 19 per cent of the children in Spain meet the current requirements for daily physical activity. From a socioeconomic perspective – yet again – we found that children from the most affluent families had higher rates of physical exercise. The ECG could support extracurricular activities including physical exercise and healthy nutritional inputs among vulnerable children to promote healthy habits and compensate for unbalanced diets in these groups.

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## 5. HOUSING

- The housing situation in Spain has deteriorated in recent decades. The housing in which a family lives can exacerbate or mitigate their risk of poverty and can have a strong impact on many aspects of a child's well-being. The limited data available reveal that the most vulnerable children are those living in deprived neighbourhoods characterized by poor housing conditions.
- Public housing represents a very small share of Spain's housing stock, while an expanding real-estate market has seen rent increases clearly out-pace rising salaries. Many Spanish families now spend a large share of their income on housing, which reduces their capacity to meet many other costs, including those affecting children's well-being.
- The implementation of the ECG could contribute to the development of initiatives to ease the financial burdens on vulnerable families that are struggling to cover the costs of their housing and, therefore, reduce the negative impact of this situation on their children.

This chapter explores the influence of housing on child poverty in Spain. It argues that housing is a fundamental cross-sectoral policy area that affects many aspects of a child's life and well-being. It also points out that, despite their importance for children, housing policies rarely address their specific needs and tend to include children as yet another member of the household. The relevance of housing has been highlighted by the impact of the COVID-19 pandemic, which has increased child poverty and has had a more damaging impact on migrant families, those living in rural or small-town environments and, very often, single-mother households (EAPN, 2020).

The housing situation in Spain has deteriorated severely in recent decades. According to a survey by the Red Cross (2018), people living in a situation of vulnerability identified housing as the main problem they faced in 2018, with the other issues being health, their economic-financial situation, or work. The vast majority (91.3 per cent) of participants in this survey reported having problems with their homes that were often caused by the poor quality and conditions of their housing. Furthermore, 30.4 per cent of participants in the survey had lost their homes and had moved in with other family members.

### 5.1. Public housing and the real-estate market

In Spain, as in other Southern European countries, public housing represents a very small share – just 1.6 per cent – of the total housing stock (Ministerio de Transportes, Movilidad y Agenda Urbana, 2020), compared to an average of 9.3 per cent for EU Member States, and Spain has only 290,000 public homes available for social rent. Such data suggest that housing is not a priority for Mediterranean welfare systems and that housing provision is, in essence, based on the housing market. Historically, the strategy of the Spanish social housing model has been to capitalize middle- and low-income households, rather than to offer a housing solution based on rentals and large council estates.

On the one hand, Spain lacks social housing. On the other, the Spanish real-estate market has been expanding in terms of both sales and rental prices in recent decades. While the 2008 crisis resulted in some stabilization of prices, this attracted global capital investors who seized the new opportunities presented by the new platform economy based on online sales and technology frameworks, such as Airbnb. As a result, rents increased by 49.3 per cent between



2014 and 2019, real-estate values increased by 12.5 per cent, and household spending on utilities increased by 7.9 per cent. Average salaries, however, increased by only 9.1 per cent (EAPN, 2020). This implies, therefore, that 41 per cent of Spanish households spend more than 30 per cent of their income on housing, which is considered a housing cost overburden.

## 5.2. Children's access to housing

Child poverty – and indeed poverty in general – can be exacerbated or mitigated through housing. Specifically, housing is linked to poverty through a set of different variables that relate to its affordability (housing costs and energy poverty), access to *decent* housing (housing conditions, habitability, overcrowding) and housing insecurity.

### Affordability of housing

Housing costs. These costs range from the cost of access to housing, such as **arrears on mortgage or rent payments** and **housing cost overburden** on family income, to the **costs of supplies** (energy and water), which can lead to energy poverty. In the Spanish context of a very low stock of public housing, the impact of the real-estate market on housing prices is significant, given that housing costs can induce poverty. As Table 5.1 shows, the impact of a scarce supply of public housing in Spain increases the risk of poverty in housing cost overburden dramatically, both in terms of home ownership (47.6 per cent) and rental housing (59 per cent).

**Table 5.1.** Percentage of children living in households with housing cost overburden by housing tenure and poverty risk (2019)

Housing tenure			Housing cost overburden
Home ownership (no outstanding mortgage or housing loan)	Household at risk of poverty	NO	0.0%
		YES	2.2%
	Total		0.5%
Home ownership, with mortgage or loan	Household at risk of poverty	NO	5.2%
		YES	47.6%
	Total		12.2%
Rental housing at market price	Household at risk of poverty	NO	15.5%
		YES	59.0%
	Total		36.5%
Rental housing at reduced price	Household at risk of poverty	NO	6.7%
		YES	15.6%
	Total		13.6%
Free rental housing	Household at risk of poverty	NO	n.a.

<b>Total</b>		YES	n.a.
	Total		n.a.
	Household at risk of poverty	NO	5.0%
		YES	35.8%
	Total		13.5%

Source: Encuesta de Condiciones de Vida, 2019 (Spanish Living Conditions Survey, INE, 2019).

As shown in Table 5.2, housing cost overburden has a marked relevance for children living in single-parent families (33.2 per cent), followed at a great distance by households with 3 or more children (15.1 per cent).<sup>19</sup>

**Table 5.2.** Percentage of children with housing cost overburden by type of household (2019)

Type of household	Housing cost overburden
Single person with dependent children	33.2%
Two adults with one dependent children	10.5%
Two adults with two dependent children	12.4%
Two adults with three or more dependent children	15.1%
Other households with children	9.0%
Total	13.5%

Source: Encuesta de Condiciones de Vida, 2019 (Spanish Living Conditions Survey, INE, 2019).

Housing cost overburden has a particular impact on children living in less advantaged households – an impact that is second only to household composition. As Table 5.3 shows, 56.4 per cent of children living in households that fall within the first income decile suffer from housing cost overburden.

**Table 5.3.** Percentage of children in households at risk of poverty and housing cost overburden by income deciles (2019)

Income deciles	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	6 <sup>th</sup>	7 <sup>th</sup>	8 <sup>th</sup>	9 <sup>th</sup>	10 <sup>th</sup>	Total
% children at risk of poverty and housing cost overburden	56.4	33.7	31.0	7.3	12.2	0.0	0.0	0.0	0.0	0.0	35.8

Source: Encuesta de Condiciones de Vida, 2019 (Spanish Living Conditions Survey, INE, 2019).

Finally, it is important to mention important variations across Spain. As Table 5.4 shows, the regional average for poverty risk and cost overburden is fairly high (35.8 per cent), ranging from 53.8 per cent in the Basque Country to 13.2 per cent in the Autonomous City of Ceuta.

<sup>19</sup> From a gendered perspective, it is also important to stress that 42.9 per cent of households headed by a single mother are at risk of poverty (Save the Children, 2019), a sign of overlapping vulnerabilities for children living in these households that have an impact on their education, leisure time, nutrition and well-being.

These territorial differences, however, cannot be explained through GDP or real-estate market prices alone. Rather, they are the result of a set of other variables, such as the urban structure of each territory, the number of migrants, the availability of cheap housing in peripheral areas, the demographic density of rural areas and social policies, among other factors.

**Table 5.4.** Percentage of children in households at risk of poverty and housing cost overburden by region (2019)

Region	% children at risk of poverty and housing cost overburden
Basque Country	53.8%
Community of Madrid	53.8%
Balearic Islands	53.5%
Catalonia	50.3%
Asturias	47.4%
Autonomous City of Melilla	44.1%
Navarre	43.4%
Canary Islands	38.5%
Valencian Community	37.0%
Cantabria	32.9%
La Rioja	32.8%
Castile and León	31.9%
Andalusia	25.6%
Murcia	23.6%
Galicia	23.3%
Extremadura	23.1%
Aragon	21.4%
Castilla-La Mancha	18.6%
Autonomous City of Ceuta	13.2%
<b>Total</b>	<b>35.8%</b>

Source: *Encuesta de Condiciones de Vida, 2019* (Spanish Living Conditions Survey, INE, 2019).

Energy poverty is affected by three determining factors: insufficient income, housing energy inefficiency and the cost of energy. Energy poverty can have an impact on health; on the material deprivation that forces families to choose between heating and eating (or heating and schooling equipment); on school absenteeism or the educational underachievement of children; on the reduction of social relations; and on educational and work opportunities for adults (Red Cross, 2018).

Energy poverty affects many households in Spain, particularly in a post-crisis context, but its impact is greater for those that are already the most vulnerable: households with three or more children, single-parent families and migrant households are among those who experience the greatest difficulties. In the city of Barcelona, for example, 15 per cent of households cannot afford to maintain a convenient temperature inside their homes and 13.4 per cent have delayed payments for their energy bills. These figures rise to 35 per cent and 29 per cent respectively in *El Raval*, one of Barcelona's most deprived neighbourhoods.

The main strategies used by households to cope with these costs are to reduce their energy consumption and endure being cold, to reduce their consumption of goods and services to pay energy bills, to delay the payment of these bills, or to plug into the network illegally, which carries a high risk of injuries and fire (Enginyeria Sense Fronteras, 2020). In this respect, Save the Children emphasizes the complexity of the programmes to tackle energy poverty and their limited effect on child poverty and housing (interview with an NGO).

#### Access to decent housing

According to the ECV carried out by the Spanish National Statistics Institute (INE), the percentage of people living in deficient homes in Spain declined from 20.6 per cent to 15.9 per cent between 2004 and 2018. However, the data show a direct correlation between income level and housing conditions, with 10 per cent of participants with the lowest incomes living in precarious homes (26.1 per cent).

Housing conditions. This variable includes sub-standard/inadequate housing, poor housing conditions or unfitness, dampness, poor maintenance, poor quality materials and facilities, a lack of modern utilities, and more. Similarly, habitability is understood as the minimum acceptable quality that a house must have in terms of its construction, equipment, structural quality and services to be considered safe (Eurofound, 2016).

As Table 5.5 shows, the percentage of children living in households at risk of poverty and social exclusion that face habitability problems is far higher than for children in households that are not at risk of poverty, and this relation holds true for all types of habitability problems (particularly those related directly to the building, i.e. 'not suitable temperature', 'leaky homes', and 'without adequate light').

**Table 5.5.** Percentage of children living in households with housing habitability problems by housing tenure and poverty risk (2019)

Housing tenure			Housing habitability					
			Not suitable temperature	Leaky homes	Without adequate light	noise	pollution	vandalism
Home ownership (no outstanding mortgage or housing loan)	Household at risk of poverty	NO	1.3%	9.7%	3.4%	12.5%	7.7%	9.3%
		YES	13.5%	17.7%	9.8%	9.8%	7.5%	12.3%
	Total		3.8%	11.3%	4.7%	11.9%	7.7%	9.9%
Home ownership,	Household	NO	2.4%	12.9%	4.7%	11.8%	9.7%	11.0%

<b>with mortgage or loan</b>	at risk of poverty	YES	13.8%	21.7%	4.7%	13.7%	7.0%	13.1%
	Total		4.3%	14.3%	4.7%	12.1%	9.2%	11.4%
<b>Rental housing at market price</b>	Household at risk of poverty	NO	6.8%	16.9%	7.1%	21.4%	12.2%	9.1%
		YES	29.6%	23.1%	9.0%	14.7%	7.6%	11.3%
	Total		17.8%	19.9%	8.0%	18.2%	10.0%	10.2%
<b>Rental housing at reduced price</b>	Household at risk of poverty	NO	4.2%	43.4%	1.2%	30.4%	37.6%	25.3%
		YES	49.1%	39.9%	15.5%	30.5%	18.7%	25.8%
	Total		39.0%	40.7%	12.3%	30.5%	22.9%	25.7%
<b>Free rental housing</b>	Household at risk of poverty	NO	3.3%	9.4%	3.4%	10.1%	8.0%	6.6%
		YES	23.6%	21.0%	12.3%	13.7%	19.0%	19.2%
	Total		11.0%	13.8%	6.8%	11.5%	12.2%	11.4%
<b>Total</b>	Household at risk of poverty	NO	2.8%	12.7%	4.6%	13.5%	9.7%	10.2%
		SI	23.6%	23.0%	8.9%	14.9%	9.4%	14.0%
	Total		8.5%	15.5%	5.8%	13.9%	9.6%	11.2%

Source: Encuesta de Condiciones de Vida, 2019 (Spanish living conditions survey, INE, 2019).

A number of other dimensions should be considered when analysing access to decent housing for children.

- *Overcrowding*, which can be measured in different ways. These include taking into account the age of residents, the availability of space per person, and the presence of multiple families sharing one housing unit. However, international organizations such as Eurostat or the OECD consider that a person lives in an overcrowded situation when their house does not have at least the following specifications: a bedroom per home; a bedroom per couple; a bedroom per single person aged 18 or above; a bedroom per 2 single people of the same sex between the ages of 12 and 17; a bedroom per each single person aged 12 to 17 who is not included in the latter category; and a bedroom per 2 children under the age of 12 (OECD, 2015).
- *The built environment*, which includes issues such as safety (perceived and real), decent public spaces and playgrounds, and access to services, facilities, and to other parts of the city (this is what is meant by living in an unsegregated environment).
- *Subjective housing conditions* refers to the cognitive and perception elements related to satisfaction, joy of life, autonomy, security or control over the use of the home and built environment.

#### Housing insecurity

Housing exclusion refers to factors that have social, economic, and physical origins. Housing insecurity, which is linked to dimensions of housing affordability, implies that children must

leave their home because of an emergency situation. According to civil society organizations mobilized against foreclosures, more than a million evictions have taken place in Spain since 2008 because of the non-payment of mortgages.<sup>20</sup>

There are many reasons why children might be deprived of the moral and material support they need for their survival and their emotional, social and cognitive development. In addition to the obvious problems derived from the inadequate compliance of parents or guardians with their duties, or from gender violence, the threat of losing their home (because of an eviction, or because a rental contract has come to an end or because they are squatting in an apartment) constitutes one of the most serious threats (Martínez Goytre et al., 2020, 21; Martínez Muñoz et al., 2016). According to the authors of the report *Cuando la casa nos enferma* (Provivienda, 2019), changes in the housing environment have a clear impact on the well-being and health of children, as they lose an environment where they once had stable social references.

This situation of housing insecurity is particularly difficult for unaccompanied children and adolescents who have travelled alone from other countries to Spain and who do not have their families with them. Spain is a family-centred society, and it is clear that lacking family support puts children in a disadvantaged position, as they do not have informal support networks (Provivienda, 2019). In these situations, institutional support is the most common solution, although unaccompanied migrant children who have grown up in institutional care tend to face greater difficulties in accessing housing once they reach adulthood.

### **5.3. Housing and vulnerable children**

#### Roma community

In 2019, 46 per cent of Spain's Roma population was living in a situation of extreme deprivation – a percentage that soars to 89 per cent for child poverty (compared with 29 per cent for the wider Spanish population). This high rate of vulnerability is structural and relates to education and housing (Fundación Secretariado Gitano, 2019). Although the housing situation has improved in recent years thanks to social housing that targets the most deprived groups, 9,000 Roma families still live in sub-standard housing, including 2,000 families that live in shacks (Fundación Secretariado Gitano, 2016).

#### Children from a migrant background

A large number of children with a migrant background now living in Spain (20 per cent, or 147,000 in total) are undocumented. Half of them are under the age of 10 and, of these, 40 per cent are under 5. This implies problems related to bureaucratic barriers in accessing social protection measures, such as minimum income programmes or housing support schemes. The aftermath of COVID-19 is expected to have a special impact on these vulnerable and undocumented households, which often rely on salaries linked to non-skilled and informal jobs.<sup>21</sup>

#### Children in institutions

There are structural problems in relation to the living conditions of children in institutional care, such as shortages of materials and facilities. In theory, institutions should meet all the needs of the children in their care. In practice, however, children in such care often face

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<sup>20</sup> <https://afectadosporlahipoteca.com/2020/01/28/desde-2008-se-han-producido-1-002-000-desahucios/>.

<sup>21</sup> <https://www.savethechildren.es/actualidad/informe-aniversario-covid-19>.

violence and the lack of a nurturing environment. The isolation often experienced by such children has been exacerbated by lockdown measures in response to the COVID-19 pandemic.

### Homeless children

Homeless children include those who live households threatened with eviction and those who are sheltered temporarily in a public/third-sector structure or at the homes of friends or relatives. The definition provided by the Children Rough Sleepers (CRS) report is also relevant, as it broadly defines a 'street situation' for children that includes *"not only young people who at some point run away and spend one or several nights away from their home or a protection centre, but also children whose families have been evicted from their homes, minors who live in a settlement with their family, or in a house shared by more families and are on the street all day because they do not want or cannot be at home"* (Díaz Vieco, 2015, 7).

Profiles derive from four situations of children's housing conditions: roofless when they sleep on the street; houseless when they are taken in to protection centres or shelters; living in unhealthy or slum housing; and in insecure homes when they live with the stress of long eviction processes. Children who are at higher risk of becoming homeless are those that experience internal family conflicts, the children of mothers who have experienced gender violence, young victims of trafficking and sexual exploitation networks, or children from unemployed families that have no income or incomes that are too low to meet the costs of food and housing (Díaz Vieco, 2015, 7). Of the 40,000 homeless people helped by Caritas in 2020, about 2.65 per cent were under the age of 18 years, and 18.6 per cent were aged 18 to 29.<sup>22</sup>

### **Conclusions**

When looking at the relationship between housing and child poverty, the relatively sparse data available for Spain suggest that the most vulnerable children are those who live in the most deprived neighbourhoods, often segregated, and often lacking the social capital and resources to cope with the consequences of living in poverty. While this applies mainly to cities (for demographic reasons), there is also a risk of poverty in relation to housing in small towns and in rural environments – a risk that is sometimes harder to detect as a result of limited institutional resources, increased vulnerability and often residential mobility.

Household composition data show that households with more children and fewer adults have higher poverty rates (AROPE). According to data from the living conditions survey (ECV) the average poverty rate is 25.3 per cent, rising to 33.5 per cent for households with more than one dependent child and to 46.8 per cent for single-parent households. This often relates to single-mother and migrant households. Migrant households are also especially vulnerable to poverty, with poverty rates of 46.2 per cent for EU citizens and 54.2 per cent for non-EU citizens, compared to an average for Spanish households of 21.7 per cent. High and increasing housing costs constitute a major factor in these families' struggle to provide for the needs of their members, particularly their children. The ECG constitutes an opportunity to develop initiatives that will help vulnerable families with children, as well as unaccompanied children and adolescents, to cover their housing needs, helping to ensure that those children can develop their full potential.

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<sup>22</sup> <https://www.caritas.es/noticias/caritas-alerta-de-que-la-covid-19-ha-disparado-un-25-la-demanda-de-plazas-para-personas-sin-hogar/>

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## 6. CONCLUDING REMARKS

Taken together, the analysis of the situation of vulnerable families and the findings from every policy area covered by the ECG confirm the need for a sharp and urgent focus on these children and families to uphold their rights to equitable social and economic development.

With regards to the overarching problem of **child poverty**, this report notes the impact of multidimensional poverty, which goes far beyond the lack of income to include a whole range of deprivations, often linked to other child or family characteristics that fuel vulnerability. The authors argue that the ECG should aim to balance the safeguarding of the basic rights of all children and adolescents in difficult situations, with the need to pay particular attention to those who are in a particularly vulnerable situation.

The analysis developed in this report reveals that the most vulnerable children under the age of three are particularly disadvantaged in terms of access to **early childhood education and care (ECEC)**. The authors suggest that efforts to improve ECEC services in Spain should focus on their quality as well as their scope, with a particular focus on the vulnerable children who lack access to the ECEC services that are vital for their future development and well-being.

While there is universal access to compulsory **education** in Spain, children's experience of schooling is often shaped by the nature of the education on offer, and by their own vulnerability. The authors raise concerns that schooling in Spain, which should play a key role in equity and social cohesion, is very often, in reality, reproducing inequalities. They call for the removal of two key barriers that alienate a significant share of children from education: the segregation of schooling (with groups of children clustered in certain schools), and the use of grade repetition as a way to tackle underperformance. The development of initiatives that provide educational support to vulnerable children and adolescents would be a significant contribution to help them reach their full potential.

On child **health and nutrition**, the report confirms that general healthcare services are free of charge for all children under the age of 15 in Spain, and the percentage of children who cannot access such services is quite low. Again, however, there are disparities across income groups, while children from a migrant background or from Roma communities are more likely to have unmet needs for healthcare, notably in the areas of dental, ophthalmologic and mental health. Given the considerable health inequalities affecting vulnerable children and adolescents, the authors make the case for their prioritization in terms of access to healthcare services.

Finally, the analysis finds that the **housing** situation in Spain has deteriorated in recent decades, with public housing representing only a small fraction of the country's available housing stock, and salary increases often out-paced by soaring housing prices. The authors point out that this is a serious issue for children, given the very strong links between the quality and security of their housing and their levels of child poverty and social exclusion. The authors argue for the development of initiatives that guarantee access to adequate housing for children and adolescents as one of the most effective ways to address poverty and social exclusion.

The report foresees that the implementation of the ECG in Spain will be complex, and that no single intervention or actor can hope to address the many multifaceted and interconnected needs of children. The potential of the ECG to make a difference for the most vulnerable children and their families will depend on its reach across multiple programme areas, and on

collective action by actors at every level, from government ministries to grass-root organizations.