

WELFARE STATES, FAMILY POLICIES, AND
EARLY CHILDHOOD EDUCATION, CARE, AND FAMILY SUPPORT:
OPTIONS FOR THE CENTRAL AND EASTERN EUROPEAN (CEE) AND
COMMONWEALTH OF INDEPENDENT STATES (CIS) COUNTRIES

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This is a paper about the social policy experience of the western, pluralist democracies and the options faced by the central and eastern European countries as they complete the transition to market economies and test the existing child and family policy models. In what follows, I will summarize the current dominant welfare state theoretical literature, drawing in particular, on the work of Esping-Andersen. Second, I will summarize the child and family policy literature, drawing on my own research (and that of my colleague, Alfred J. Kahn), to define family policy and describe the early childhood education, care, and family support policy regimes of the West. Third, I will briefly describe the family policy patterns of the Central and Eastern European countries just before the transition and the overall trends since then. Finally, fourth, I will make a few concluding comments about the issues facing these countries now, with regard to early childhood education, care, and family support.

WELFARE STATE REGIMES AND FAMILY POLICIES

More than a decade ago, Esping-Andersen (1990) published his influential analysis of post-industrial political economies. He used the term “welfare state regimes” as an organizing concept, to describe the social policies of advanced industrialized countries and governments’ roles in managing and organizing the economy, employment, and wages as well as providing social protection. His thesis was that welfare state and employment regimes coincide, and that although the conventional argument has been that economic forces are what directly propel societal change it is actually variations in welfare state regimes that ultimately do so.

The public/private mix in social protection, he notes elsewhere (1999, p. 74), was the principal analytic axis undergirding his regime typology, reflecting the different historical, cultural, and ideological themes that framed his analysis. His tripartite typology of liberal, conservative, and social democratic regimes has been criticized from a variety of perspectives, and he has re-examined and re-assessed his theory since then. The criticisms included the following: His typology was too narrowly based on income transfer programs, too focused on the state-market nexus, and too premised on the traditional male headed/male breadwinner family. Furthermore, some argued that his typology ignored the distinctiveness of the Mediterranean countries (Leibfried, 1992) and/or the Australian/New Zealand model (Castles, 1993), and/or the East Asian model (Goodman and Peng, 1996), that it did not take adequate account of the child-centered French model, and, most importantly, that he ignored gender in his analysis of welfare regime models (Orloff, 1993; Sainsbury, 1996).

In his most recent work (2002), Esping-Andersen refines and expands on his model. He acknowledges the significance of the family and familialism in the “conservative” countries (including the Mediterranean countries) and its role along with the market in the East Asian countries (locating them as a mixture of “liberal” and “conservative”), notes the importance of mass education (and access to health care) along with income transfers as a vehicle for equalizing opportunities and living conditions, points to the emerging concern with “social exclusion” as today’s version of the 19th and early 20th centuries’ “social question,” and stresses the importance of a social investment

strategy and the minimization of poverty and income insecurity as a precondition for an effective strategy.

Of particular importance, Esping-Andersen argues for the centrality of family policy to any discussion of welfare state regimes. In describing his “new” family policy for the “new” welfare states, he stresses:

- the need to accept and respond to new family forms, especially single parent and dual earner families;
- the rising employment rates of women, especially mothers of young children and the centrality of maternal employment to the economic well-being of children and their families;
- the significance of the quality of childhood for child development and for later youth and adult development;
- the need for policies that minimize child poverty and the social exclusion of children and that help reconcile work and family life;
- the centrality of gender equity in family policies.

He states that an effective family policy must be child-centered, women-friendly, and must be regarded as a social investment. Reflecting his welfare state tripartite typology, he argues for a parallel family policy typology:

- The Nordic family policy regime (located in the social democratic welfare state regime), unique in its emphasis on a strong governmental role, stressing gender equity, child well-being, high rates of female employment and the reconciliation of work and family life, and minimizing the roles of the market, and to a lesser extent, the family.
- The Continental European family policy regime (located in the conservative welfare state regime) stresses the role of the traditional family, minimizes female labor force participation, and provides less direct investment in children.
- The Anglo-American (“liberal”) family policy regime, stresses market solutions and responses to high rates of female employment, work/family tensions, and other child/women/family issues.

There are some who would still argue that France does not fit well here. And others who note that inadequate attention is paid to the role of the voluntary sector. Still others argue that, except for the Nordic countries, most countries are hybrids rather than pure models.

Where do the central and eastern European countries fit in this typology? What are the implications? What are their options as they confront and test the social policy experience of the pluralist, democratic, western societies?

CHILD AND FAMILY POLICY AND EARLY CHILDHOOD EDUCATION, CARE, AND FAMILY SUPPORT

“Family policy” is a term used to describe what government does to and for families, in particular those public policies that are explicitly designed to affect the situation of families with children – or individuals in their family roles – and those that have clear consequences for children and their families even though the impacts may not

have been intended (Kamerman and Kahn, 1978, 1989a, 1997). Therefore, family policy may be explicit or implicit. Moreover, in family policy, the family may be both object and vehicle of social policy, for example, policies may be designed to compensate families for the costs of children or to encourage parents to bear more children. As a sub-category of social policy, the family policy field includes those laws that are clearly directed at families: such as family law (e.g. laws regarding marriage, divorce, child custody); child or family allowances (cash benefits provided on the basis of the presence and number of children, their age and/or ordinal position); tax benefits (credits or allowances; wasteable or non-wasteable); maternity and parenting paid and job protected leaves from employment following childbirth or adoption); early childhood education benefits and services; child support or advanced maintenance policies providing financial support for children by a non-custodial parent; child protection services (foster care and adoption); subsidized goods and/or services (e.g. housing allowances); other child-conditioned benefits linked to old age, disability, or unemployment benefits; maternal and child health care. (In common practice, the elderly are treated in a separate field.)

In this paper, I am defining “family” to include a variety of family types with minor children (e.g. husband/wife dual or single earner families; lone mother families). I am defining children as those under 18 but paying particular attention to those under compulsory school age (5, 6, or 7 depending on the country). Finally, for our purposes, I am focusing on those policies directed at these young children and their families, in particular, early childhood education and care *services*, maternity and parental paid and job-protected *leaves from employment* at the time of childbirth or adoption or when a child is ill, and child or family allowances (*cash or tax benefits*) that are targeted on very young children. Although not addressed here, the major components of the social infrastructure on which family policy must draw but which are not systematically discussed here, are: access to universal health care, through national health insurance or services and universal child or family allowances.

The major family policy regimes, as described in earlier work (Kamerman and Kahn, 1989b) are: a focus on young children (the Continental European model); a focus on poor and vulnerable children (the Anglo-American, “liberal” model); and a focus on working families and reconciling work and family life while protecting the well-being of children (the Nordic model).

Early Childhood Education and Care Services (ECEC) and Related Policies in the Western Industrialized Countries

The ECEC programs discussed here include pre- or pre-primary schools (kindergartens, pre-kindergartens, compensatory education programs, and nursery schools), child care or day care centers, family-type day care homes (both regulated and unregulated), publicly subsidized care provided within a child’s own home; and family support programs including both neighborhood-based programs offering a cluster of services to families with very young children and mother/toddler programs such as Time For the Family in Italy, and cash benefits for families with children, to purchase care.

The ECEC policies described include the whole range of government actions designed to influence the supply of and/or demand for ECEC and the quality of services

provided. These government activities include: direct delivery of ECEC services; direct and indirect financial subsidies to private providers, such as grants, contracts, and tax incentives; financial subsidies to parents both direct and indirect, such as cash benefits and allowances to pay for the services, or tax benefits to offset the costs, or cash benefits that permit parents to remain at home (and stop working) without major loss of income.

The Major Policy Dimensions¹ include the following:

The manifest purpose of ECEC programs remains a dual one:

- Education (broadly defined to include socialization and school readiness) for the 2 or 3 to 5 or 6 year olds, with “care” subsumed under the educational goal, remains the primary objective of the pre-primary school programs;
- Care of children while mothers work (in paid employment outside the home), is the dominant goal for younger children (those under age 3), however, there is increasing attention to socialization, development, and cognitive stimulation – or education in the broader sense – as key components or supplementary goals in providing care for very young children,

Among the other goals receiving more attention in recent years are that of: “early intervention,” by which is meant intervention in the early years in order to prevent the development of subsequent problems (Shonkoff and Meisels, 2001); compensatory education as in the U.S. Head Start program (Zigler and Styfco, 1993); and human capital investment (Young, 1996). Math and Reynaudat (1997), suggest still another purpose for certain ECEC policies, namely that of creating jobs for low-wage/low skilled women, as in-home and out-of-home child care providers.

With regard to policy responsibility, the difference has to do with whether ECEC policy is made nationally, as in France (for all the programs) and Italy (for the programs for 3-6 year olds), or whether a national framework is established but major policy decisions are made at the “state” or “province” level as in countries with a federal government structure such as Australia, Canada, Germany, and the U.S., or made at the local level, as in Denmark and Sweden.

Administrative auspice is a key dimension affecting program content and philosophy. The major difference has to do with whether the auspice is education, health, or social welfare – or some combination; and where there is a combination, whether the divided responsibility is carried out sequentially (as children get older the programs serving them shift in auspice) or simultaneously. The dominant continental European pattern is one in which the programs serving 2 or 3-5 or 6 year olds (whenever compulsory school begins) are under educational auspices while the younger children are cared for

¹ This section draws on a background paper prepared by me for the OECD thematic review of early childhood education and care programs, a more extensive “Overview of ECEC Developments in the OECD Countries” in Sheila B. Kamerman, Ed (2001) *Early Childhood Education and Care: International Perspectives*. New York: Columbia University Institute for Child and Family Policy. See also, OECD (2001) *Starting Strong*. Paris, France: OECD. www.oecd.org/els/education/ecec

under health or social welfare auspices. However, there appears to be an emerging trend in these countries to place administrative responsibility for the under 3s as well as the 3- 5 year olds under education, as for example, in Spain, England, Scotland, and some regions of Italy. The Nordic pattern is one in which all children under compulsory school age are the responsibility of one agency or ministry, here, too, increasingly, education. The Anglo–American model tends to divide responsibility between education and welfare for the whole age group but without consistency in assigning responsibility or administering programs.

Historically, eligibility for publicly subsidized ECEC programs was restricted in many countries to poor children with working mothers, or to children with special needs, for example, neglected, handicapped, immigrant children, or those with lone parents. Increasingly, the educational programs for the 3-5 year olds are universal, available to all children whose parents wish them to participate, regardless of parental employment status or family income. However, the programs for younger children (and in the Nordic countries for all under 6) are targeted on children with working mothers primarily, and then, on those with special needs.

Access – the ease with which parents obtain a place in an ECEC program for their children – and Coverage – the percent of children enrolled in ECEC programs – are clearly important indicators of a country’s commitment to young children, and follow a fairly consistent pattern. Indeed, some countries now assume that all young children – or almost all – will be enrolled in these programs, because they are good for children, children would be deprived without the experience, and parents want them to participate. Either by providing full coverage or by making full coverage an explicit goal, countries demonstrate their commitment and assure children (and their parents) of access.

The highest rates of coverage as of the mid-1990s are for children, ages 3-6, enrolled in programs under education auspices. Between 95 and 99 percent of this age cohort is enrolled in the universal (voluntary and free) preschool programs in Belgium, France, and Italy. These programs cover the normal school day, lasting 7 or 8 hours a day, and have available as well “wrap-around” services that supplement the school day program, before and after school, at lunchtime, and during school holidays (at income-related fees).

Medium high rates of coverage exist in those countries in which ECEC programs are targeted at children with working parents, where there are high rates of female labor force participation, and where the programs cover the full work day and year. Countries such as Denmark, Sweden, and Finland have coverage rates of 75-85 percent; all three have announced, as a matter of public policy, a guaranty of a place in subsidized care to any child age one and older with working parents, whose parents wish them to participate. (And all provide paid and job-protected leaves that permit a working parent to provide infant care themselves, if they wish. See below.) Although Germany has about 85 percent of its 3 – 6 year olds enrolled in kindergarten, these programs are largely part-day and supplementary services or extended day programs are not usually available.

Medium rates of coverage, about 55-80 percent of the cohort, characterize another group of countries with preschool programs for the 3-6 year olds, such as Austria, Netherlands, New Zealand, Portugal, Spain, the UK and the U.S.. The UK begins compulsory school at 5, most 4 year olds are already in primary school or in an ECEC program, and the current goal is to cover all 3-year olds as well. The low coverage countries include Greece, Canada, and Japan.

Coverage rates for the under 3s, not surprisingly, are far lower, with no country having enough places for all children whose parents would like them enrolled. Thus, for example, the highest proportion of very young children participating in ECEC programs are found in Denmark, where almost 60 percent of the cohort aged 6 months (when the basic paid parental leave ends) to 3 years is enrolled. In Finland and Sweden, coverage is about half the 1 and 2 year olds (here, too, infant care is assumed to be covered by parental leaves), and in Belgium and France, about 30 percent of children aged 3 months to 3 years.

Most of the European countries that do not yet have full coverage for the 3 – 6 year olds, view this as a priority; the goal is access for all. In contrast to those social benefits that are not used by those who qualify, whether because of stigma or preference, in all countries where these programs exist, take-up is 100 percent, and where there are not enough places for all, there are waiting lists. In most countries, they are viewed as essential programs, desired by parents and viewed as good for children.

In most of the OECD countries, delivery patterns for ECEC programs involve public funding and public delivery. The proportion of children enrolled in “private” programs, largely under religious auspices or other types of non-profit sponsors (parent cooperatives; voluntary agencies; trade unions; women’s organizations) ranges widely across countries, from being a major component of the delivery systems in the Anglo-American countries, Germany, and the Netherlands, to playing an insignificant role in the Nordic countries. However, there has been a significant increase in the number of private (non-profit) providers in some countries which heretofore limited ECEC programs to those delivered by government agencies, for example, Sweden. Nonetheless, for-profit (market) providers remain almost non-existent except in some of the Anglo-American countries such as Canada, the UK, and the U.S..

Even in the Catholic, Mediterranean countries, public programs predominate, especially for the 3-5 year olds. Most ECEC programs, by far, are delivered in “centers” or special facilities sometimes in or near primary schools. Except for Sweden where center care is still preferred (and Italy and Spain where a formal system of family day care has yet to be developed and in-home caregivers are readily available), very young children, the under 3s, are at least as likely to be cared for in a family day care home as in a center, in particular if it is a publicly supervised and regulated home. Often, this is a matter of parental preference.

By and large, governments expand the supply of ECEC places by funding and operating more such programs, or by increasing the subsidies they offer providers. Either local government agencies operate programs, as in the Nordic countries, or greater public subsidies are provided to religious organizations or other voluntary organizations to

expand provision as, for example, in France, Italy, Spain, Germany, and the U.S. The U.S., UK, and Canada are unusual in the extent to which they use the tax system to subsidize parents who purchase these services and offset some of the ECEC costs.

Expenditures, Financing, and Parent Fees: ECEC programs are funded largely by government, either national, state, or local authorities, depending on the country. Only in the Anglo-American countries do parent fees cover most of the costs. Except for the Nordic countries, data on expenditures for ECEC are neither readily available nor comparable across countries. In the early 1990s (a time for which data from several countries are available), public expenditures for ECEC programs were about 2.4 percent of GDP in Sweden, 2 percent in Denmark, 1.1 percent in Finland, and .6 percent in Norway. Of some interest and quite unusual, spending on ECEC services was about equal to expenditures for child allowances, parenting benefits, and child-conditioned tax benefits combined in these countries. These programs are expensive and clearly, these countries are making a very substantial investment in ECEC. Disaggregated data on voluntary sector and market expenditures are not available.

For the most part, preschool programs are free (to parents) for the normal school day and year, with supplementary services available at subsidized and income-related fees. Fees for programs serving the under 3s are usually income-tested and are largely in the range of 10-25 percent of operating program costs in Europe, in contrast to about 70-76 percent in the U.S..

There is no agreed on definition of – or standards concerning – quality of ECEC programs cross-nationally and little systematic attention to this subject in the literature. U.S. researchers have carried out the most extensive efforts at identifying the variables that account for the most significant differences in program quality – and the consequences for children’s socio-emotional-cognitive development. Current indicators of quality include: staff:child ratios, group size, caregiver qualifications (education and training), staff salaries, and turnover rates – among the dimensions of quality that can be counted and regulated, and staff:child interactions and relationships among those variables that require direct observation(Helbrun, 1995; Smith, 1998).

The research literature on outcomes and impacts of ECEC is enormous and well beyond what can be addressed here. A recent review of the international research may be found in Kamerman, Neuman, Waldfogel, and Brooks-Gunn (2003).

Preschool for the 3-6 Year Olds (The Continental European Family Policy Regime)

The major model of ECEC programs is that of a publicly-funded preschool, administered under Ministries of Education and delivered under education auspices. The programs are free for the standard school day, which usually covers 7 or 8 hours, and have supplementary (“wrap-around”) services available before and after school hours, at lunchtime, and during school holidays for parents who have a longer work day and young children in need of care and supervision. Parents pay for the supplementary services at income-related fees. The programs are universal, and available to all children regardless of parents’ income or employment status. Although these were initially established as

educational programs, stress is increasingly placed on socialization and enhancing child development generally as well as cognitive stimulation and preparation for primary school. And meeting the needs of working parents is also being emphasized, despite serving children with at-home parents or caregivers as well as those with two – or sole -- working parents.

The countries that have opted for this model are moving towards coverage of all children in this age group. France, Belgium, and Italy have the most extensive such preschool programs. The French *ecole maternelle*, the prototypical example of this model, is publicly funded and operated as an integral part of the educational system. All children aged two and older are eligible to participate, although there are not usually enough places for all 2-year olds whose parents want them enrolled. The program clearly provides child care for the children of working parents, but participation is by no means limited to these children. All 3-4-5 year olds are now enrolled and almost 40 percent of the 2-year olds. The major priority now is to achieve full coverage for the two year olds, and to develop an appropriate, special “curriculum” for this age group. French research finds that children who do not participate in these programs are likely to be disadvantaged when they enter primary school.

By 1990, the movement toward universal preschool for children from the age of 2½ or 3 until they enter primary school was largely accomplished in most of Europe. The task for those countries is to expand the supply, and in some countries to extend the school day and/or to provide supplementary services to cover the gap between the school day and the work day. Although these programs go a long way toward providing child care while mothers work, they are expanding within a framework in which mother’s employment status is largely irrelevant.

ECEC for the Under 3s

Care for children under age 3 is the major child care issue now, in part because the supply is inadequate and in part because of concern about quality and the consequences for children. Increasingly, the ECEC policy involves some combination of maternity, parenting, and child-rearing leave policies as well as ECEC services. Almost all the OECD countries now provide paid and job-protected maternity or parenting leaves following childbirth to enable women to recover physically, the family to adapt to a new baby, and to help the baby get a good start in life. Some countries provide more extensive leaves as a form of infant care – and even toddler care. These leaves are an important component of ECEC policy (See below) and their duration has significant implications for the scale of need for infant and toddler care services, and the age at which services are needed.

Given the growing trend toward assuming that ECEC in infancy is a task for parents, most programs target “toddler” aged children (1 and 2 year olds) rather than infants, although infant care is still provided in a few countries. The diversity of services is far greater than that for the 3-6 year olds. All the programs target the children of employed mothers; and all charge income-related fees. In no country is there coverage for the full cohort as yet, although some countries appear to be coming close to meeting

current demand. The major differences are whether the services are delivered through a separate system, in particular the health care system, or as an integral part of the ECEC serving all preschool children as in the Nordic model, whether services are delivered in centers or in family day care homes, and if the latter, whether in informal or formal arrangements.

The infant/toddler group programs do not have consistent or uniform curricula and the family day care programs have even less. Programs usually operate 10-12 hours a day and children attend a full day except when parents work part-time. In some countries there are a few programs that operate irregular hours (for those working non-traditional hours) but such programs seem scarce everywhere.

The dominant program mode for this age group is family day care (child minders) usually because the supply of places in centers is limited but sometimes out of parental preference. In contrast to many other countries, family day care in the Nordic countries, France, and Germany are under public sponsorship, with providers often being recruited, trained, supervised, and even paid by local government authorities.

Integrated ECEC Programs

ECEC programs serving all children under compulsory school age, covering the normal work day and year, publicly funded and administered under education or social welfare auspices, constitute the Nordic model. Integrating care and education from the onset, these programs developed initially as a service for the children of working parents. However, since labor force participation rates of Nordic women are the highest in the OECD countries, in the 75-90 percent range, these programs are increasingly serving all children. They are designed to meet children's needs for early education, socialization, and opportunities for enhanced development as well as care. The programs are universal, heavily subsidized by government, of very high quality, and charge income-related fees. The programs are delivered largely through centers but include family day care homes as an important component of the system, especially for the under 3s. In addition, universal family allowances are provided, the financial support by a non-custodial parent is guaranteed to children in lone parent families (advanced maintenance), paid sick leave is available for parents to leave work and care for an ill child, and in Sweden, for example, income-tested housing allowances are available to families with children.

Sweden and Denmark are exemplars of this model. The most important feature of these programs is the emphasis on quality, and they constitute the highest quality of out-of-home care and education available anywhere. The programs are all heavily subsidized but parents do pay income-related fees, usually equal to less than 10 percent of average wage. By public policy, parent fees cannot cover more than 30 percent of operating costs in Denmark but in fact, in the early-mid 1990s, covered about 20 percent – and 20 percent in Sweden, too. Salaries are good and staff turnover is low (about 10 percent a year). The programs are universal and serve all children under age 7, with priority for children with working mothers, lone mothers, from immigrant or low-income families, or who have a disability. Increasingly, the assumption is that all children will have a right to participate regardless of parents' employment status. The governments have announced a policy of

guaranteeing a place for any child whose parents wish them enrolled, from the age of one. (All these countries have parental leaves of at least this length.)

Family day care (called “child minding” in much of Europe) is not regarded as secondary to group care programs in Denmark but seen rather as the major public service providing ECEC to toddlers. Family day care providers are trained personnel who receive good salaries and benefits and who are selected, guided, supervised and made ever more qualified by assigned and qualified supervision. They provide the most commonly used resource for the under 3s for the many parents of young children who prefer this arrangement. It is used less extensively in Sweden, where the parental preference is still for center care.

Education and Child Care: Two Parallel Systems – The Anglo-American Model

A third model of ECEC is a dual system of social welfare day care for neglected, abused, deprived, and/or low-income children and part-day educational nursery school for middle and upper class children. Funding and auspice tend to involve both the public and private sectors. Private providers constitute a large component of the delivery system and include for-profit as well as non-profit providers. Services for 3-6 year olds tend to be in adequate supply but there are shortages of infant and toddler care and there is a very wide range in quality. Informal family day care (child minding) is a large component of the delivery system as well, especially for the under 3s.

This model, best illustrated by Britain, Canada, and the U.S., is now in flux. Compulsory school begins in Britain at age 5 and most four year olds are already in school; A significant proportion of the 3 year olds are in preschool programs and the current government’s goal is to assure access to all whose parents wish it; but most of these programs are part-day. The U.S. has expanded its public school-based preschool programs to include poor and handicapped children and to provide compensatory education for some, as well. Almost all 5 year olds are in kindergarten largely under public education auspices and here the focus is on making these programs cover a full school day. About half the 3 and 4 year olds are in some form of ECEC and a few states are establishing universal preschool programs for this age group. The U.S. seems to be moving towards a two tier system in which one system (education) stresses cognitive, socialization, and developmental goals while the other (social welfare) emphasizes facilitating work for low-skilled poor women and custodial care for children.

Infant Care as Parent Care

Paid, job-protected maternity, parental, and child rearing leaves constitute a significant component of ECEC policy, too and are a major component of both the Continental European and Nordic models. This policy of paid leaves following childbirth (or adoption) has major consequences for infant and toddler ECEC programs. Increasingly, countries are moving towards the establishment of a policy that will make infant care, care by a parent at home. Such leaves range from a minimum of three months in the Netherlands, to six months in Canada, Hungary, the Czech Republic, the Slovak Republic (plus an extended parental leave until the child is age 3 in Hungary and age 4 in

the Czech Republic), 9 months in Italy, one year in Norway and Finland (plus another two years at a lower rate of pay), 15 months in Sweden (plus another 3 months unpaid), two years in Austria and under certain circumstances in France, and two years paid leave in Germany (and a third that is job-protected but unpaid). These leaves form a key part of ECEC policy.

The Swedish Parent Insurance benefit is the exemplar. Including up to 6 weeks before birth and two weeks of paternity leave after childbirth, parental leave provides for up to 18 months of paid and job-protected leave of which at least one month must be taken by the father (or lost). The first year of leave is paid at 80 percent of wages up to a ceiling (and 100 percent for civil servants) another three months at a low flat rate, and the final three months are unpaid, but still job-protected. The parental leave can be prorated or shared by mother and father. All eligible mothers take advantage of the leave. More than 75 percent of eligible fathers took some part of the leave in the mid-1990s, but this amounted to only 11.4 percent of all parental leave taken. Nonetheless, on average, fathers were on leave for 44 days (Swedish Information Service, 1996; See also, OECD 2000).

The Implications?

The movement toward universal preschools has clearly emerged as the dominant Continental European model of ECEC, largely funded and delivered by government. Several countries have already achieved full coverage, regardless of parents' employment status or income or problem; and this is clearly the goal in those countries that have not yet achieved it. These programs are viewed as good for children and access is assured, sometimes as a matter of legal right and sometimes out of societal conviction. The key issues for the future are (1) increasing the availability of supplementary services to supplement the school-day, school-year program and meet the needs of working parents who are employed full-time, (2) integrating care and education services for the under 3s, and integrating them with those for the over 3s, probably under education auspices, and (3) attaining and sustaining adequate quality for all.

The Nordic countries stressed the integration of education and care from the onset. They continue to emphasize high quality, access for all in a universal program, and assume public financing and delivery of services. These countries are now close to achieving their goals.

There appears to be some movement in the Anglo-American countries towards an integrated, education-based program for 2 or 3 to 5 or 6 year olds; but it is not yet clear. Nonetheless, the delivery systems remain fragmented in these countries, coverage and quality are still inadequate, costs are often a heavy burden for parents, and policies and programs are not yet fully responsive to the needs of working mothers (e.g. length of day or year).

Infant and toddler care have emerged as the key ECEC issue for the future, with growing consensus regarding infant care and continuing diversity regarding toddler care. The general trend now is to assume that infants should be cared for by a parent who is subsidized for at least one year at home. There is no consensus yet on the length of the

leave (12-18-24-36 months?). For countries committed to high quality care, an at-home subsidy and a voluntarily taken, job-protected leave following birth may be cheaper – and is often preferred by parents. Family support services that offer a group experience for infants and toddler and their mothers, can provide an important supplement.

Toddler care (care for the 1-2 year olds) is in scarce supply in almost all countries, becoming close to adequate only in the Nordic countries. Committed to achieving full coverage, the Nordic countries have announced policies of guaranteeing a place in subsidized care for all children aged one year and older, to all parents who wish one. Given their existing parental leave policies, implementing this policy should facilitate achieving their goal. There is no agreement yet regarding center-based or family day care. However, the trend appears to be toward acceptance of family day care as a valued component of the ECEC system, as long as it is supervised and regulated, and providers receive some training. When this is the case, however, and family day care providers receive a salary equal to staff in centers, and receive social (or fringe) benefits as well, family day care can no longer be viewed as the “cheap” alternative it now is in many countries, but rather as an alternative for those preferring smaller groups, sibling groups, more flexible hours, and, perhaps, greater intimacy.

Public financing is the dominant mode in the Nordic and Continental European countries. Parent fees play a minor role in meeting the costs. Costs are high for good quality programs but there appears to be growing recognition of their value and its importance. Government subsidies are generous and given to providers, in most countries. Public delivery is dominant in the Nordic and Continental European countries, with a small but growing role for voluntary sector programs in some countries (and a significant role in a few, in particular Germany, the Netherlands, and the Anglo-American countries). The market plays a significant role only in the Anglo-American countries.

CENTRAL AND EASTERN EUROPEAN COUNTRIES: PATTERNS AND TRENDS IN CHILD AND FAMILY POLICY

As stated by Cornia (1991) with regard to the pre-transition experience of the central and eastern European countries, “Child and family policy was particularly comprehensive in terms of the range and generosity of the benefits provided.” (p. 94) The characteristics of these policies included the following (Kammerman and Kahn, 1993):

- Family allowances were universal (albeit linked to employment) and an important component of family income.
- Family allowances were the most important public social expenditure after pensions and disability benefits; there was no unemployment insurance.
- Consumer prices for essential goods and services (e.g. milk, bread, school meals, vacation resorts, housing) were heavily subsidized.
- ECEC services were extensive, especially for the 3-6 year olds.
- ECEC services for the under 3s were much less extensive but were significant.

- ECEC services were funded and operated by government directly, or indirectly through enterprises (which were owned and operated by the government) and fees were very low.
- Maternity leaves were generous and the benefits usually replaced full wages.
- Several of the countries adopted a policy initially developed by Hungary, of an extended parental or child rearing leave following the end of the childbirth-related maternity leave, until a child was age 3 (or sometimes 2) years old. (Such policy subsequently adopted by several of the Western European countries as well.)

What was the impact of the transition (Kangas, 1999; Pascal and Manning, 2000; OECD, 2000)?

By the end of the 1990s, per capita GDP had declined in all these countries although there were significant differences among them, with the central European countries better protected than those in eastern Europe. (Kangas, 1999) The core family benefits and services remained: family allowances, maternity and parental leaves and benefits, ECEC services; but consumer subsidies largely disappeared and social assistance became far more important. The pre-transition benefit/service package was designed to compensate parents for the costs of child rearing, to facilitate female labor force participation, and to help reconcile paid employment with unpaid care work. All were relatively generous. Although the family policy benefit/service package remains important, it plays a much smaller role in the family economy than pre-transition. And the portion of GDP spent on these policies has declined in most countries. Coupled with a decline in the value of other family benefits, the result is a significant decline in the situation of children and their families in most of these countries. Despite efforts at maintaining the living standard of children, child poverty increased during the 1990s, and large families, single parent families, workless families, and Roma children and families were especially hard hit (Foster and Toth, 2001; Darvas and Tausz, 2002). Although child poverty rates in the Czech Republic are low when a relative definition of poverty which reflects income distribution, is employed (5.9 percent in the mid 1990s for those with incomes below 50 percent of median income) (Unicef 2000). Foster and Toth (2001) estimate that over 80 percent of the children in the Czech Republic, Hungary, and Poland would be considered poor if the U.S. absolute poverty measure were applied.

Family or child allowances are provided for children from birth to ages 16-18 in most countries (but 15 in Czech Republic and Latvia) and usually administered through Ministries of Labor and Social Affairs. They are usually universal but were reduced in value and became means-tested in several countries in the 1990s (e.g. the Czech Republic, Lithuania, and several of the FSU countries). In some countries, they are still limited to families with a working head (e.g. Czech Republic) despite high unemployment rates. (Kangas, 1999) Benefit levels are about 6-10 percent of average wages in the Czech Republic, Estonia, Hungary, Latvia, Poland, and Lithuania (SSA 2002), about what they are in the West, but wages are much lower.

All the transitional countries have paid and job protected maternity leaves with benefits that replace 80-100 percent of wages, and extended parental or child rearing leaves, but with much lower benefits. (Pascall and Manning, 1999; Kocourkova 2002). There has been some decline in these benefit levels but the duration remains long (3 years in Hungary and Slovakia, 4 years in the Czech Republic (or 7 if a child is handicapped). Leaves for caring for an ill child exist in almost all these countries and have been sustained over time.

The countries of Central Europe seem to have sustained their preschool (kindergarten) enrolments, with Hungary covering 86 percent of 3-5 year olds in 1997, the same proportion as in 1989 and the Czech Republic also covering 86 percent but a rate that is significantly lower than a decade earlier (96 percent). Children cannot participate in these programs in the Czech Republic when a parent is home on extended parental leave (up to 4 years after childbirth) (OECD, 2000). As a result some 3-4 year olds are closed out of this important experience. The programs operate for a full day (10-12 hours a day depending on the country) providing care for children whose mothers work full time. These programs are almost uniformly under Ministries of Education, even though most are established and operated by municipalities; and they are largely publicly funded and delivered, although government funding in some countries (e.g. the Czech Republic) has been replaced by a system of multiple funding sources and parent fees have been raised in all countries. The delivery system is more diversified than earlier; nonetheless, fewer than 2 percent of Czech programs, for example, are private.

Coverage of the under 3s was modest in the pre-transition era, ranging from 9-14 percent in the central European countries but has largely disappeared since 1990. Where services for the under 3s exist, they are administered under Ministries of Health. In most countries, parental and relative care is substituting for nursery care, and not always by choice. There is some beginning development of community-based family support services (part-day and/or part-week mother/child programs; toddler programs (Kamerman and Kahn, 1994).

Family allowances, child care for the under 3s, parental leave benefit levels are all being curtailed, thus reducing support for families. Policies that previously helped reconcile work and family life are losing financial support. Child poverty rates have risen and maternal employment has become more essential to protect children against poverty just when employment is less available and government income and service supports are being reduced in. Families are expected to play a larger role and lone parent and large families are especially hard hit.

In the Czech Republic, for example, (OECD, 2000) female labor force participation declined, public attitudes toward maternal employment when children are young changed and became more negative about work during those years, total fertility rates declined from 1.9 in 1989 to 1.2 or 1.3 in 2000, and parental leaves were extended. Preschool coverage was sustained but parent fees were raised. Government funding was increasingly replaced by a system of multiple funding sources including higher parent fees, and the burden on families increased.

There is some development of a voluntary sector, with ECEC services delivered by NGOs, often church-related. In the Czech Republic, Hungary, Poland, Slovakia, NGOs are beginning to develop foster family care and community based social services as an alternative to large impersonal institutions (Sellick, 1998), but their role in ECEC programs is still very limited.

Administrative responsibility for ECEC services remain fragmented, and the Ministry staffs do not appear to coordinate their policies.

CONCLUSION

Family policy was a core policy domain in the central and eastern European countries, as it is increasingly, now, in the West. Family allowances, maternity and parental paid and job-protected leaves from employment, and early childhood education and care benefits and services are at the heart of any family policy (with the addition of maternal and child health care, child support/maintenance benefits, and, sometimes, housing allowances). The general pattern in the Central and Eastern European countries has been to stress a strong role for government in funding and delivering early childhood education and care services for children under compulsory school age and funding and assuring maternity and parental leaves, facilitating female labor force participation along with parenting. Government funding, however, has been curtailed in all these areas. As a result, the financial burden on families and the stress on parents, especially mothers, has increased, and the standard of living for children and their families generally, has declined. Services for the under 3s have been almost eliminated while parental leaves have been sustained (but with lower benefits), and policy making is fragmented as multiple agencies/ministries are involved in disparate ways, in education, care, and family support.

Government remains of paramount importance in this field, and in this respect the picture in central and eastern Europe resembles that in the Nordic countries. Given the history of these transition countries, an emphasis on an extensive government role is understandable. But the level of support and investment is nowhere near that of the Nordic countries and unlikely to achieve that level in the near future, even if this model is the goal. Families are expected to play an increasingly large role, and the assumption is that parents (overwhelmingly mothers) and relatives (especially grandmothers) will provide both infant and toddler care. The resulting picture with its long parental and child care leaves resembles the Continental European (or young child) model, despite the fact that non-traditional families are becoming more prevalent and female labor force participation is still high, albeit lower than before. Given resource constraints, however, countries have curtailed their benefits and services, and seem to be focusing more on the most disadvantaged, vulnerable, and poor children. This increase in targeting coupled with the emergence of means-testing suggests that the Anglo-American model has more relevance than desired or believed. Yet there may be some aspects of this model that do have relevance. If not a strong role for the market, there could be a stronger role for the voluntary sector. Regardless of which model is chosen, the extended parental leaves clearly will continue to play an important role, as will preschool programs for the 3-4-5 year olds. One would also hope for some return to the more generous and universal family allowances of earlier, and some development of programs for the under 3s, perhaps similar

to the family support programs developed in Italy. Support for a “pure” model seems unlikely; a more realistic vision could be eclectic, employing characteristics of each existing model and perhaps some innovation as well.

Table 1: Child Care Policy Dimensions in Selected OECD Countries in the 1990sE

Country	Locus of Policy Making - National or Local	Admin. Auspice - Ed., Health, Welfare	Age Group Served	Eligibility Criteria - Universal, Poor, With special needs., Working parents	Funding strategies (Gov't, Employer, Parent fees, Comb.)	Delivery strategies (Supply, Demand)
<i>Austria</i>	State/local	Welfare	3 - 6 0 - 3	Working parents	State and local gov't and parent fees.	Supply
<i>Belgium</i>	State	Education Welfare (Center and FDC)	2 1/2 - 6 under 3	Universal With working parents, With special needs, Poor	Gov't-free to parents. Multiple incl. gov't, employer, parent fees, income-related.	Supply Mixed
<i>Canada</i>	State	Education Welfare	5 - 6 under 5	Universal; With special needs, Poor, Working parents	Gov't-free. Mixed, largely parent fees.	Mixed
<i>Denmark</i>	National and local (primarily)	Education Welfare	5 - 7 6 mos. - 6 years	Universal Working parents	Gov't. Gov't (local) Parent fees income-related – max. 20-30% of costs.	Supply
<i>Finland</i>	National and local	Education Welfare	6 1 - 7	Universal Universal - Priority for working parents	Nat'l and local gov't, and Parent fees income related @ 10% of costs.	Mixed
<i>France</i>	National (primarily) and local	Education Health/welfare	2 - 6 3 mos. - 3 years	Universal Working parents, With special needs	Gov't-free to parents. Mixed local gov't, family allowance funds, and parent fees income related, max 25% of costs.	Supply Mixed
<i>Germany</i>	State	Education Welfare	3 - 6 under 3	Universal With special needs, Poor, Working parents	State and local gov't plus parent fees (income related, max 16-20% of costs).	Supply
<i>Italy</i>	National Local	Education Health/welfare	3 - 6 under 3	Universal Working parents	Nat'l gov't, free. Local gov't and parent fees, income related, average 12% of costs, max 20%.	Supply
<i>New Zealand</i>	National	Education	under 5	Universal	National gov't and parent fees.	Supply
<i>Spain</i>	State/Local	Education	0 - 6 Under 3	Universal (3-6)	Gov't, free. Gov't and parent fees, income related; max 20% of costs).	Supply Modest tax benefit for low income parents for under 3s.
<i>Sweden</i>	National and local (primarily)	Education	0 - 6	Universal, Working parents, With special needs	National and local gov't. Parent fees, income related; about 13% of costs.	Supply
<i>U.K.</i>	National/local	Education Welfare	3 - 4 0 - 4	 With special needs, poor	Gov't, free Free or income related fees.	Supply and demand.
<i>U.S.</i>	National/local	Education Education and welfare	5 0 - 4	Universal With special needs, Poor, Welfare, Working parents	State and local gov't. Federal/state/local gov't. Parent fees cover @ 76% of costs.	Largely demand, also supply.

Source: Kamerman, S.B., "An Overview of ECEC Developments in the OECD Countries", Tables 3 and 4, in Kamerman, S.B. Ed. (2001) *Early Childhood Education and Care: International Perspectives*. New York: Columbia University Institute for Child and Family Policy.

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