



Disparities in access to essential services

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DISPARITIES IN ACCESS TO ESSENTIAL SERVICES

RESEARCH NOTE 8/2012

Terry Ward and Erhan Ozdemir
Applica sprl

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Abstract

Access to essential services is essential if people are to have the ability to participate fully in society. Access to four different kinds of service is examined here, in each case on the basis of data included in the EU-SILC and defining access in terms of affordability as well as the convenience of the location from which services are provided:

- healthcare, which is investigated in terms of the relative number of people reporting an unmet need as well as the number of visits made to a doctor;
- public transport, which is assessed in terms of the proportion of people reporting difficulties of access for whatever reason and which can be especially important for older people who may not have a car;
- banking and postal services, which are assessed in the same way and which, for the former, might be affected, as regards access, by credit-worthiness as well as the aspects which apply to the other services;
- childcare, for which, from the data available, access cannot be examined directly because the EU-SILC does not include the questions necessary to throw light on this, but for which access is assessed indirectly on the basis of the people using childcare services on which data are provided.

What emerges from the analysis is that for each type of service there are marked variations in access – or apparent access – between Member States as well as between social groups within countries, with access being a particular problem in the lower income countries.

1. Introduction

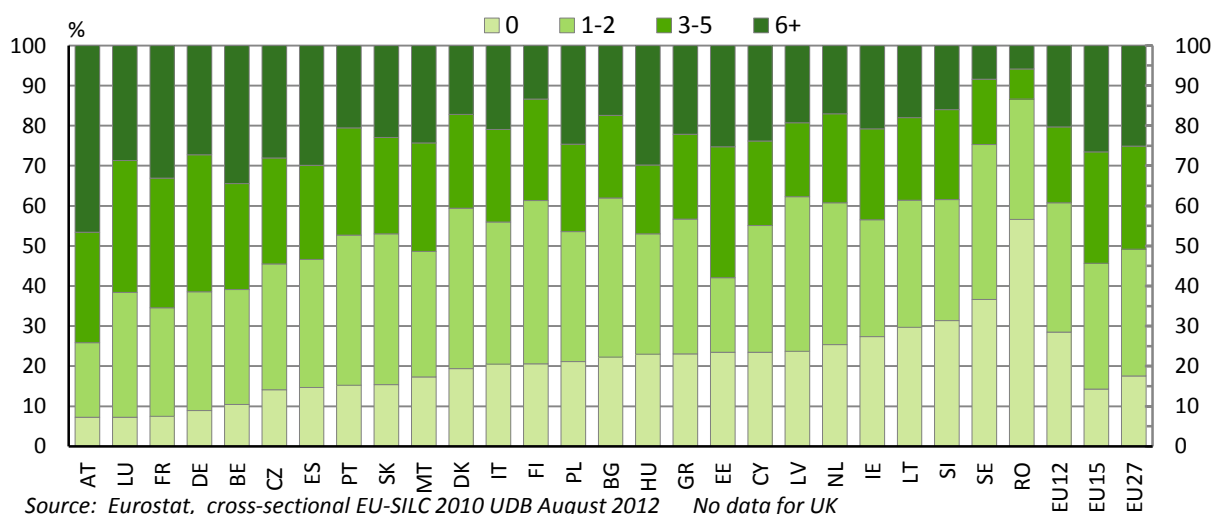
The ability to access essential services is a critical aspect of social inclusion across the EU and an important determinant of well-being not only directly but also because it can have a decisive effect on the income that households can earn. This is particularly the case with regard to child care, where the availability of suitable facilities at an affordable price is crucial for parents of young children to be able to take up paid employment and pursue a working career, which is often vital to them being able to obtain an adequate level of income. It is no less important, however, in respect of access to medical care, which can affect whether people are capable of working or not as well as their well-being, or access to public transport which can significantly affect their ease of travel to work as well as their ease of access to other services. In addition, in a modern economy, it is essential to be able to access banking services. The concern here to examine the extent to which access to various essential services varies across social groups, particularly between those with differing levels of income, and how far lack of access reinforces disparities in income levels and is a factor underlying social exclusion. In particular, it considers, in turn, access to medical care, access to public transport, access to banking as well as postal services and, not least importantly, access to childcare. It should be noted that access here refer to both the physical availability of such services within a reasonable distance – or in the case of banking services, remotely through the Internet – and their affordability, which is no less important.

2. Access to medical care

Visits to doctor

People in the EU12 countries are in general less likely to visit a doctor than those in the EU15 (28% made no visits during 2009 in the former as against 14% in the latter) (Figure 1). There are, however, exceptions in the latter, for those in Sweden, Ireland, the Netherlands and Greece, in particular.

Figure 1 People aged 16 and over by number of visits to general practitioners and specialists, 2009 (%)



The proportion not visiting a doctor at least once during the year is especially large in Romania (57%) and elsewhere is over 30% only in Sweden (38%) and Slovenia (31%). Moreover, those that do visit a doctor are likely on average to go fewer times in the EU12 than in the EU15. This difference holds for men and women and all broad

age groups, though it is less evident for older people aged 65 and over, the proportion of whom that visited doctors 6 times or more in 2009 in the EU12 was on average almost the same as in the EU15.

In all countries, women are much more likely than men to visit doctors and to do so more often (Table 1). Similarly, in all countries, as would be expected, older people are much more likely to visit doctors than those under 65, though much less so in the three Nordic countries than elsewhere.

Table 1 Men and women and those aged 65 and over by visits to the doctor, 2009 (%)

	No visits			6 or more visits			6+ visits
	Total	Men	Women	Total	Men	Women	Aged 65+
BE	10.5	14.1	7.1	34.4	27.9	40.6	62.2
BG	22.2	28.6	16.4	17.4	13.3	21.2	43.7
CZ	14.1	19.0	9.6	28.1	22.3	33.4	60.8
DK	19.4	25.3	13.9	17.2	13.6	20.5	22.6
DE	8.9	12.7	5.3	27.3	22.9	31.4	43.6
EE	23.4	30.3	17.8	25.3	18.8	30.5	39.6
IE	27.4	35.3	19.5	20.8	15.7	25.8	39.6
EL	23.1	26.3	20.0	22.2	22.1	22.2	48.2
ES	14.7	19.7	9.9	29.9	23.4	36.1	60.2
FR	7.5	10.9	4.5	33.1	25.7	39.7	58.5
IT	20.5	25.1	16.3	21.0	16.1	25.5	44.6
CY	23.5	27.7	19.4	23.8	20.3	27.2	55.4
LV	23.7	32.7	16.4	19.3	14.0	23.7	40.7
LT	29.7	39.4	22.2	18.0	13.1	21.8	44.6
LU	7.2	10.2	4.3	28.7	23.2	33.9	45.3
HU	23.0	29.3	17.6	29.8	23.1	35.7	66.0
MT	17.3	20.1	14.6	24.3	21.0	27.5	46.6
NL	25.4	30.8	20.4	17.0	13.1	20.6	25.3
AT	7.2	11.3	3.5	46.5	36.6	55.8	70.2
PL	21.2	28.7	14.7	24.6	19.1	29.4	54.9
PT	15.2	20.6	10.3	20.5	15.2	25.4	40.8
RO	56.6	62.5	51.2	5.9	4.5	7.2	15.7
SI	31.4	36.6	26.5	16.0	13.3	18.6	31.2
SK	15.4	20.9	10.4	22.9	17.4	27.9	58.5
FI	20.6	24.6	16.9	13.4	11.1	15.5	15.3
SE	36.6	41.9	31.4	8.4	6.8	10.0	10.4
EU12	28.5	35.2	22.6	20.3	15.7	24.5	46.0
EU15	14.3	18.5	10.3	26.5	21.2	31.5	47.5
EU27	17.6	22.3	13.2	25.1	20.0	29.8	47.2

Note: No data for the UK

Source: Own calculations based on, Eurostat, EU-SILC 2010 UDB August 2012

There is little difference in the frequency with which people visit doctors between those living in rural areas and those living elsewhere (Table 2). (The aggregate proportion of those living in rural areas in the EU15 visiting a doctor 6 times a week or more is much larger than for the overall population but this is due to the distribution of the rural population between Member States being different from the distribution of the total population.)

Table 2 Proportion of those aged 16 and over visiting the doctor 6 times or more per year, total, living in rural areas, at risk of poverty and materially deprived

	Total	Rural areas	At-risk-of poverty	Materially deprived
BE	34.4	36.5	41.9	43.1
BG	17.4	16.4	23.0	20.9
CZ	28.1	28.5	29.8	34.9
DK	17.2	14.8	18.9	31.0
DE	27.3	26.3	29.8	30.6
EE	25.3	27.5	26.5	24.6
IE	20.8	20.0	25.7	27.9
EL	22.2	22.9	20.3	22.2
ES	29.9	32.0	35.4	33.0
FR	33.1	31.6	34.5	36.6
IT	21.0	22.6	23.7	24.6
CY	23.8	29.1	41.8	30.9
LV	19.3	20.1	24.8	22.3
LT	18.0	19.0	23.5	27.0
LU	28.7	27.7	31.2	26.6
HU	29.8	30.0	25.7	33.0
MT	24.3		27.5	32.5
NL	17.0		22.0	36.3
AT	46.5	45.8	52.1	53.8
PL	24.6	23.1	24.2	28.2
PT	20.5	21.0	23.0	25.1
RO	5.9	5.0	4.3	6.5
SI	16.0		25.3	24.4
SK	22.9	24.6	24.1	27.8
FI	13.4	12.3	14.8	22.1
SE	8.4	8.2	9.0	19.1
EU12	20.3	18.8	19.3	21.4
EU15	26.5	26.0	29.3	30.6
EU27	25.1	23.0	26.8	26.4

Note: Materially deprived are those identified as being deprived in terms of three of 9 items covered by the EU-SILC and included in the conventional indicator used in the EU. No data for the UK

Source: Own calculations based on, Eurostat, EU-SILC 2010 UDB August 2012

They are also less likely, on average, to visit doctors if they have income below the at-risk-of-poverty threshold (60% of median income) than if their income is above the threshold and this holds for both the EU12 and the EU15. At the same time, those with income below the poverty threshold are also more likely than others to visit a doctor frequently. though this is more the case in the EU15 than in the EU12 (Greece is the only EU15 country in which the proportion of people at risk of poverty visiting a doctor 6 times or more a year was less than for the population as a whole)..

Much the same pattern holds for material deprivation (as measured by the conventional indicator – those deprived of 3 of 9 items included in the EU-SILC). Those materially deprived are on average less likely to visit a doctor than those who are not deprived but they are also more likely to visit a doctor 6 times a year or more.

The number of visits that different social groups make to doctors, however, does not generally reflect their need for treatment or examination – i.e. it cannot be concluded

that those with low incomes or materially deprived are healthier than other members of society. Indeed, research suggests that the reverse is the case, that health and material well-being tend to go together. Accordingly, the differences between social groups may reflect more variations in access than in need. This is explored in the next section.

Unmet need for healthcare

Only a small number of people across the EU seem to have an unmet need for health care, though the number tends to be larger in the EU12 (11% on average in 2010) than in the EU15 (6% on average). The proportion that had experienced an unmet need during the 12 months leading up to the survey in 2010 averaged 11% in the EU12, twice the average in the EU15, with the figure amounting to 21% in Latvia and 13-15% in Bulgaria, Poland and Romania (Table 3).

Table 3 Proportion of those aged 16 or over having unmet need for medical examination or treatment in last 12 months by selected background characteristics, 2010 (%)

	Total	Age			Sex		At risk of poverty	Materially deprived	Type of area	
		16-24	25-64	65+	Men	Women			Urban	Rural
BE	0.7	0.5	0.8	0.4	0.7	0.6	1.6	2.5	0.6	1.2
BG	14.5	8.2	15.0	16.4	14.2	14.7	25.4	18.3	14.0	15.0
CZ	3.5	1.8	3.7	3.6	3.7	3.3	5.4	6.8	3.5	3.5
DK	4.0	3.9	4.5	2.2	4.0	4.0	7.2	14.7	4.2	3.4
DE	6.5	3.3	7.2	6.2	6.3	6.7	12.2	18.0	6.5	6.6
EE	5.9	2.2	6.6	6.3	5.4	6.2	7.8	8.6	6.3	5.5
IE	2.7	1.1	3.4	1.3	2.2	3.2	3.5	6.0	3.0	2.2
EL	7.7	3.0	6.8	12.5	6.4	8.8	11.2	12.7	9.1	6.0
ES	6.8	3.4	8.4	3.2	7.7	5.9	6.7	10.8	6.9	6.7
FR	4.8	4.4	5.7	2.0	5.0	4.5	9.1	14.4	4.8	4.4
IT	7.2	3.6	7.4	8.3	6.2	8.1	11.1	20.0	7.2	7.1
CY	6.6	2.2	8.0	4.8	5.9	7.1	8.1	13.3	7.1	5.2
LV	21.2	8.7	22.9	25.1	19.9	22.2	32.7	31.5	23.1	19.2
LT	3.2	0.3	3.0	6.1	2.6	3.6	3.8	4.8	4.3	2.3
LU	3.4	3.2	3.9	1.8	3.8	3.1	3.8	8.5	3.4	3.4
HU	7.8	3.1	8.8	7.6	8.2	7.4	12.4	12.1	6.6	9.0
MT	5.7	2.0	6.4	5.6	5.2	6.2	6.5	13.1	5.7	0.0
NL	1.1	1.1	1.1	1.2	1.2	1.1	1.9	3.3	0.0	0.0
AT	2.5	2.9	2.6	1.8	2.7	2.3	4.1	7.7	3.1	1.5
PL	14.3	5.4	14.8	19.4	13.5	15.0	18.5	22.0	14.7	13.9
PT	2.6	1.0	2.8	2.7	2.1	3.0	4.8	6.6	2.7	2.4
RO	13.4	2.9	11.0	30.5	11.2	15.4	16.7	19.6	11.9	14.3
SI	0.3	0.2	0.4	0.2	0.3	0.4	1.0	0.9	0.0	0.0
SK	5.4	2.2	5.7	7.7	5.2	5.6	7.1	8.3	6.0	4.6
FI	5.5	3.3	5.4	7.0	4.1	6.8	7.5	13.3	6.6	4.8
SE	11.4	14.1	12.5	6.8	10.1	12.6	14.3	27.7	11.8	11.1
UK	3.6	2.7	4.1	2.3	3.2	3.9	5.0	8.3	3.8	2.6
EU12	11.3	4.1	11.2	17.2	10.5	12.0	16.5	17.9	11.2	11.9
EU15	5.5	3.5	6.1	4.7	5.3	5.6	8.6	13.8	5.7	5.7
EU27	6.7	3.6	7.1	6.9	6.3	7.0	10.3	15.5	6.5	8.0

Source: Own calculations based on, Eurostat, EU-SILC 2010 UDB August 2012

It was also just over 11% in Sweden, the only other country in the EU where the figure was over 8%, though this was largely because of people waiting to see if the problem got better on its own. In Belgium, Ireland, Luxembourg, the Netherlands, Portugal and Slovenia, it was less than 3%.

As might be expected given their generally limited need for health care, the proportion of young people aged 16-24 reporting an unmet need was smaller than for older age groups in nearly all countries. Perhaps surprisingly, however, given their much greater need, the proportion of those of 65 and older reporting such an unmet need was on average smaller in the EU15 than for those aged 25-64. This was by no means the case in the EU12, where the proportion was 50% larger, the figure reaching over 30% in Romania, 25% in Latvia and close to 20% in Poland. By contrast, in Belgium, Ireland, the Netherlands and Slovenia, the proportion was only around 1% or below.

The proportion of women reporting an unmet need for health care was larger among women than among men in both the EU12 and the EU15, though more in the former than the latter. The difference was particularly wide in Romania (4 percentage points) as well as in Sweden in the EU15 (2.5 percentage points).

In all Member States, more of those with low income – specifically with less than 60% of the median – reported an unmet need than those with higher income levels, though the extent of the differences varied. It was wider in the EU12 than the EU15, and especially wide in Bulgaria and Latvia (around 14 percentage points) and in Germany in the EU15 (almost 7 percentage points). On the other hand, in Spain, Ireland, Luxembourg, the Netherlands, Lithuania and Slovenia, the difference was very small (less than 1 percentage point).

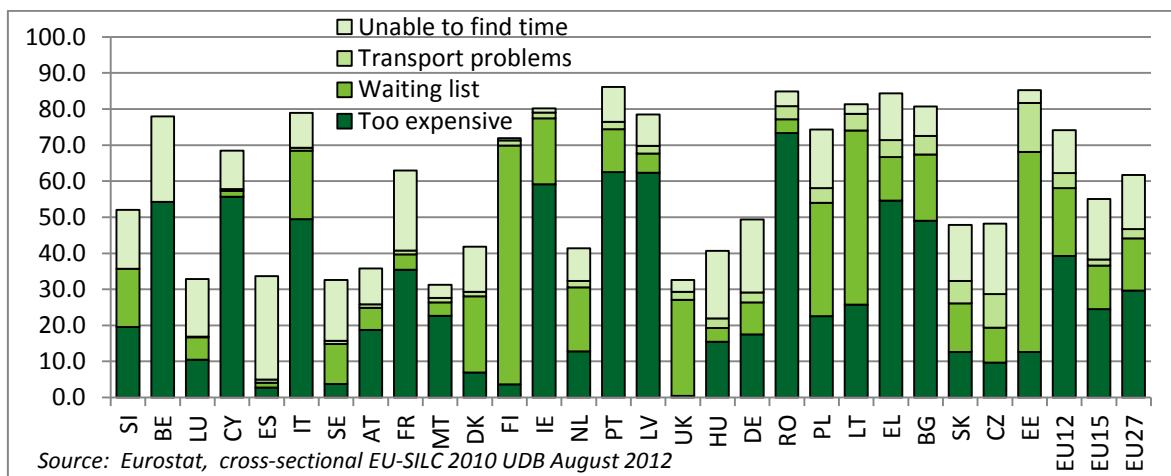
There is a more pronounced difference between those who are materially deprived and those who are not, the proportion reporting an unmet need being over 10 percentage points more for the former than the latter in both the EU12 and EU15 on average. The difference was again particularly wide in Latvia (19 percentage points) and Germany (13 percentage points), though also in the EU15 in Sweden (18 percentage points) and Italy (15 percentage points). Accordingly, the survey indicates that in the countries especially, having an unmet need goes with being materially deprived, which suggests that the materially better-off have more access to health care, should they need it, than those who are worst off.

On the other hand, there is no general tendency for those living in rural areas to be either less able or more able to access healthcare than those living in urban areas.

Unmet need for healthcare by reason

The reasons for the unmet need for healthcare reported vary across the EU. In the EU27, on average, 30% of those reporting an unmet need for medical treatment or examination referred to the cost of the examination or treatment as the reason for this. Around 15% reported that the unmet need was due to the length of waiting lists and a similar proportion that they could not take time off work or that they needed to care for children (Figure 2, in which countries are ordered in terms of the proportion of people reporting an unmet need for healthcare). Only a small proportion referred to travel difficulties, while 40% reported other reasons (such as a belief that the problem would go away).

Figure 2 Unmet need for medical examination or treatment by reason, 2010 (%)



Significantly more people in the EU12 cited costs as the reason (40%) than in the EU15 (25%). In almost half of Member States (13 out of 27), the cost of treatment was the most important single reason for unmet need and in 9 of them (Belgium, Greece, Italy, Portugal, Ireland, Bulgaria, Cyprus, Latvia and Romania) around half or more referred to this as the main reason. In Romania almost three-quarters of those with an unmet need cited the treatment being too costly.

The length of waiting lists was also a more important reason for an unmet need for treatment in in the EU12 (19%) than in the EU15 (12%). By contrast, more people in the EU15 (17%) – most especially in Germany, France, Belgium and Spain – referred to an inability to take time off work or the need to care for children as the main reason than in the EU12 (12%).

The cost of treatment was the most important single reason for an unmet need for healthcare for those with low income (i.e. with income below the at-risk-of-poverty threshold) in 19 Member States and for those identified as being materially deprived in 20 Member States. In nearly all countries, moreover, the proportion so reporting was larger than for the population as a whole. On average in the EU12, 56-57% of those with an unmet need and either with income below the at-risk-of-poverty threshold or materially deprived reported that they could not afford the cost of treatment (Table 4). This is around 8-9 percentage points higher than in the EU15 and around 19 percentage points more than for the population as a whole. In Belgium, Greece, Portugal, Bulgaria, Cyprus, and Latvia, over 70% of those with an unmet need for care and at risk of poverty cited the cost of care as the main reason for this and over 80% in Romania, in each case, significantly more than for the population as a whole.

Table 4 Proportion of those aged 16 and over reporting an unmet need for health treatment by reason

	Total				At risk of poverty				Materially deprived			
	Too expensive	Waiting list	Travel problems	Unable to find time	Too expensive	Waiting list	Travel problems	Unable to find time	Too expensive	Waiting list	Travel problems	Unable to find time
BE	54.2	0.0	0.0	23.7	77.1	0.0	0.0	15.2	93.6	0.0	0.0	3.2
BG	49.0	18.3	5.2	8.1	72.1	9.5	7.2	2.1	60.0	15.4	6.3	3.5
CZ	9.7	9.7	9.3	19.6	19.9	5.3	11.9	6.7	24.5	7.0	14.8	12.0
DK	6.9	21.1	1.3	12.5	9.2	22.4	3.5	9.0	16.8	36.6	4.2	12.9
DE	17.5	8.9	2.7	20.3	26.5	5.4	3.3	8.8	37.1	5.2	4.6	15.7
EE	12.6	55.5	13.6	3.5	29.8	39.6	18.1	2.6	24.4	44.3	19.6	2.3
IE	59.1	18.3	1.6	1.1	41.8	31.1	3.1	0.0	68.3	13.8	1.4	0.0
EL	54.6	12.1	4.7	13.0	70.8	6.0	5.4	5.2	72.7	7.8	4.0	5.4
ES	2.7	1.4	0.8	28.7	3.9	1.7	1.0	27.4	4.7	3.6	1.3	28.2
FR	35.4	4.3	1.1	22.2	62.5	1.9	2.3	9.6	67.1	1.6	1.8	10.6
IT	49.4	19.0	0.8	9.6	65.4	15.1	0.9	6.0	71.5	13.9	0.7	4.1
CY	55.7	1.6	0.5	10.7	76.8	2.5	1.4	1.8	75.1	2.0	0.7	3.5
LV	62.3	5.3	2.2	8.6	79.3	1.3	3.2	2.0	75.3	3.2	2.4	3.8
LT	25.8	48.3	4.6	2.7	50.1	22.1	3.6	0.0	33.6	43.2	6.1	0.7
LU	10.5	6.2	0.2	15.9	69.5	0.2	1.3	4.6	38.9	9.7	0.0	5.2
HU	15.5	3.8	2.6	18.8	31.4	2.7	1.8	9.8	21.5	4.3	3.2	13.9
MT	22.6	3.8	1.2	3.6	29.2	4.4	0.0	0.0	46.0	1.0	1.8	1.0
NL	12.8	17.8	1.7	9.1								
AT	18.8	6.1	1.0	10.0	54.7	0.0	0.0	11.0	43.7	1.5	1.7	16.9
PL	22.6	31.4	4.2	16.2	39.6	23.6	6.1	7.2	36.8	26.8	5.7	9.4
PT	62.5	11.9	2.1	9.6	71.8	13.4	2.2	6.1	74.9	8.7	3.5	5.7
RO	73.4	3.8	3.7	4.1	82.4	2.4	5.1	0.6	81.6	2.9	3.4	2.0
SI	19.5	16.2	0.0	16.3								
SK	12.7	13.5	6.2	15.5	44.4	12.0	2.1	7.6	27.5	13.1	9.1	11.6
FI	3.6	66.3	1.3	0.6	5.8	59.7	0.0	1.1	7.7	62.6	0.0	1.6
SE	3.7	11.2	0.9	16.8	8.2	11.4	2.9	13.6	20.2	19.5	0.0	9.3
UK	0.5	26.6	2.2	3.3	0.6	33.3	2.8	1.2	0.0	21.6	1.4	3.0
EU12	39.2	18.9	4.2	11.9	57.7	13.0	5.6	4.4	55.5	14.0	4.9	6.1
EU15	24.5	12.1	1.7	16.8	37.7	10.3	2.3	9.7	48.9	9.5	2.2	10.5
EU27	29.6	14.5	2.5	15.1	44.4	11.2	3.4	7.9	52.2	11.7	3.5	8.3

Note: Empty cells indicate insufficient observations for data to be reliable; bold indicates data uncertain due to the small number of observations

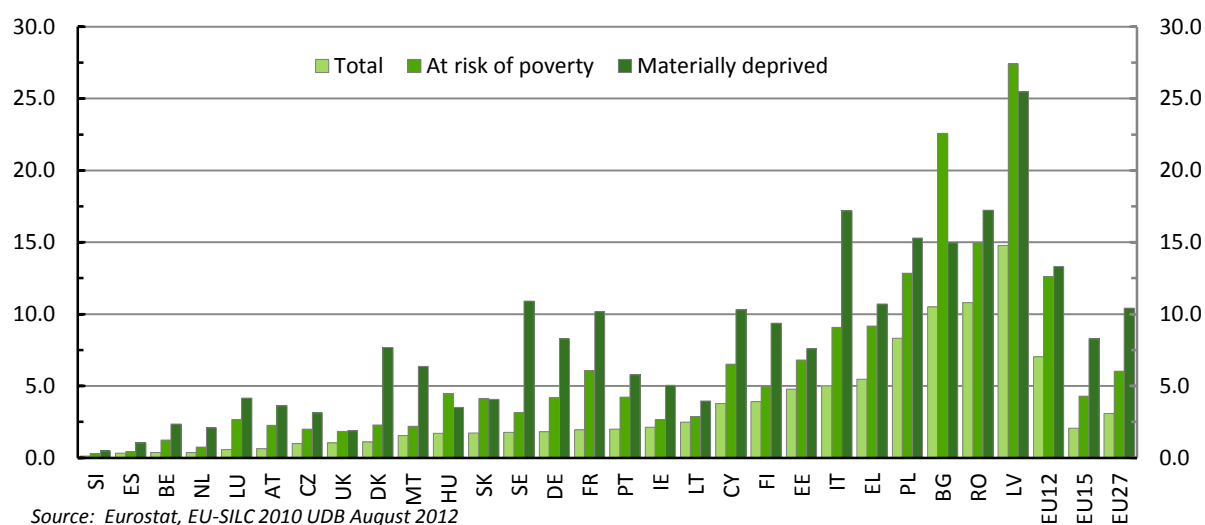
Source: Own calculations based on Eurostat, I EU-SILC 2010 UDB August 2012

In all of these countries, together with Italy, the proportion referring to costs as the main reason was also relatively large (in most cases over 70%) for the materially deprived. By contrast, in Denmark, Sweden, Finland, the UK and Spain, for the most part countries with a national health system, less than 10% of those with an unmet need and at risk of poverty gave this as the main reason (below 1% in the UK). In the first four of these countries, the length of waiting lists was a much more important reason, while in Spain, as well as in Sweden, the difficulty of taking time off work or caring responsibilities was significant.

Unmet need for healthcare due to cost of treatment or deficiencies in service

The reasons reported for having an unmet need for healthcare which relate to the costs of treatment or to deficiencies in the service provided can be distinguished from the other reasons reported and examined in relation to total population rather than only those reporting an unmet need. Specifically, those reporting an unmet need for care because the costs are too high, waiting lists too long or the service is not conveniently located can be separately identified among the total population aged 16 and over in each country. Overall, only around 2% of people in the EU15 reported an unmet need because of this set of reasons (Figure 3). The figure, however, reached 5% in Greece and Italy, though everywhere else it was below 3% except in Finland (4%).

Figure 3 Unmet need for medical examination or treatment because of the cost of treatment, waiting lists or travel problems, 2010 (% of each group)



In the EU12, the proportion was larger, averaging 7% but exceeding 10% in both Bulgaria and Romania and reaching 15% in Latvia. On the other hand, the proportion was less than 3% in half the countries as in most EU15 Member States.

The proportion of those at risk of poverty or materially deprived reporting an unmet need for healthcare because of the cost of treatment or deficiencies in the service was larger than for the population as a whole in all EU countries. In most cases, the proportion was larger for the materially deprived than for those at risk of poverty (i.e. with income below 60% of the median), suggesting that there is a closer link between health service problems and deprivation than between such problems and relative poverty. This is especially so in the EU15, where on average the proportion with an unmet need for any of the three reasons distinguished was twice as large for the materially deprived as for those with income below 60% of the median (though the numbers involved were generally much smaller because many fewer people tend to be identified as materially deprived than have income below the at-risk-of-poverty level). In the EU12, the two proportions were relatively similar.

3. Access to public transport

There is at most a weak relationship in most EU15 countries between access to public transport and household income, the main exceptions being Greece, Italy and Portugal. How far lack of such access is a significant problem for those with high income levels in EU15 countries, however, is a moot point given their likely access to private means of transport. There is a much stronger relationship in EU12 Member States, where in all of the countries – though only slightly so in Malta – the proportion reporting difficulties of access declines as income rises, in many of them significantly (Table 5).

Table 5 People reporting difficulty accessing public transport by income quintile (%), 2009

	First	Second	Third	Fourth	Fifth	Total
BE	17.9	17.1	13.7	16.7	16.0	16.3
BG	34.4	24.3	22.0	18.5	15.8	22.9
CZ	17.2	16.4	14.7	13.0	10.5	14.4
DK	7.3	6.9	5.7	6.2	4.6	6.2
DE	16.8	19.5	17.4	15.3	15.3	16.9
EE	26.7	22.8	16.6	13.0	10.0	17.8
IE	28.7	23.6	24.2	23.5	16.9	23.4
EL	25.8	19.2	17.1	15.4	12.1	17.9
ES	7.2	7.6	7.7	5.2	6.7	6.9
FR	5.7	4.0	3.3	5.1	5.8	4.8
IT	30.6	28.6	26.8	22.3	21.8	26.0
CY	11.2	8.1	4.1	4.1	1.3	5.7
LV	23.5	19.7	16.6	16.1	10.3	17.2
LT	41.8	34.4	26.8	18.3	15.4	27.3
LU	8.6	10.9	13.8	17.0	15.3	13.1
HU	28.1	27.4	25.1	21.9	17.7	24.0
MT	28.9	26.4	27.6	27.3	24.9	27.0
NL	16.7	15.7	14.4	15.3	14.0	15.2
AT	20.1	21.0	20.1	25.6	19.7	21.3
PL	31.8	27.6	19.1	16.8	12.9	21.6
PT	17.3	13.4	10.1	8.9	6.5	11.2
RO	22.6	23.7	20.2	15.8	11.5	18.8
SI	30.4	27.5	28.7	23.8	20.1	26.1
SK	24.7	24.1	21.3	17.4	17.5	21.0
FI	35.4	40.4	37.8	36.9	31.4	36.4
SE	16.5	17.8	19.3	19.8	17.9	18.3
UK	6.6	8.2	7.2	7.6	7.3	7.4
EU12	27.8	25.0	20.1	16.9	13.4	20.6
EU15	15.1	15.1	13.7	12.8	12.4	13.8
EU27	17.7	17.1	15.1	13.7	12.6	15.2

Source: Own calculations based on, Eurostat, EU-SILC 2009 UDB August 2011

There is more of a relationship for older people aged 65 and above. Again the relationship is much stronger in EU12 countries than in the EU15, though in the latter, there are more countries where it is marked than for the population as a whole (Ireland, Austria and Finland as well as Greece, Italy and Portugal) (Table 6).

Table 6 Population reporting difficulty accessing public transport by broad age group (%), 2009

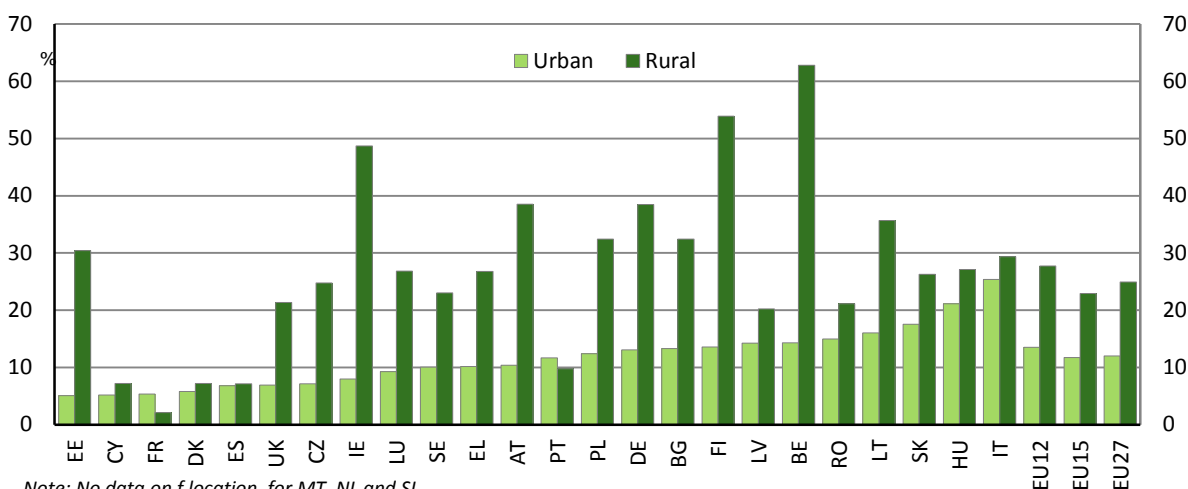
	<18	18-24	25-64	65+
BE	16.4	16.7	15.4	18.9
BG	25.2	22.2	21.7	25.0
CZ	13.1	14.4	13.9	17.6
DK	6.9	7.6	5.5	6.5
DE	21.1	16.6	16.4	14.7
EE	17.3	17.9	16.1	24.0
IE	22.2	18.6	22.8	33.3
EL	15.8	16.4	16.2	25.7
ES	6.4	7.0	6.5	8.8
FR	5.7	6.6	4.7	3.1
IT	26.7	28.7	25.4	26.3
CY	5.1	4.6	4.9	11.2
LV	16.8	18.7	15.8	21.4
LT	25.1	26.5	25.6	36.3
LU	13.3	14.3	12.9	13.3
HU	23.7	21.5	22.5	31.3
MT	29.6	28.7	26.7	23.5
NL	16.1	14.5	14.4	17.4
AT	20.9	23.1	20.3	24.0
PL	22.1	23.9	20.5	23.9
PT	11.7	13.7	10.1	13.3
RO	20.9	17.4	17.1	23.8
SI	26.6	27.8	25.5	26.9
SK	20.7	18.3	19.7	29.3
FI	41.1	25.7	35.8	37.7
SE	20.9	15.3	18.6	16.0
UK	7.7	7.3	6.5	10.1
EU12	21.2	20.8	19.4	24.7
EU15	14.4	14.0	13.3	14.8
EU27	15.8	15.6	14.6	16.5

Source: Own calculations based on Eurostat, EU-SILC 2009 UDB August 2011.

In nearly all countries, though more in the EU12 than in the EU15, those living in rural areas are more likely to report difficulties of accessing public transport than those living in urban areas, in many cases, much more so.

Within both types of area, there is again an inverse relationship in EU12 countries between the proportion reporting difficulties of access and income levels. This is not the case in the EU15, where, except in the three Southern countries noted above (and in Italy less so in rural areas), there is little relationship between the two. In the UK especially, though also in Germany, Ireland, Luxembourg, Finland and Sweden, the proportion reporting difficulties in rural areas increases as income rises rather than declines.

Figure 4 Population reporting difficulty accessing public transport by type of location, 2009 (%)



Note: No data on location for MT, NL and SI

Source: Eurostat, al EU-SILC 2009 UDB August 2011

For older people aged 65 and over, there is much the same difference between urban and rural areas in those reporting difficulties of access to public transport as for the population as a whole. Within each type of area, however, there is again more sign of an inverse relationship in the EU15 between difficulties of access and income than for the total population.

4. Access to banking and postal services

Questions on the difficulty of accessing banking and postal services were included in both the 2007 and 2008 EU-SILC surveys as part of special *ad hoc* modules, though in the latter year, the question combined the two, while in the 2007 survey, they were included as a separate question. The 2008 special module also included questions on the possession of a bank current account (as distinct from a savings account).

Accessibility of the services in question is intended to relate to both the physical and technical ease or difficulty of access. It, therefore, in principle, covers problems of accessing banking services because of, for example, the restrictions imposed by banks, such as credit-worthiness or having a regular source of income of a sufficient amount as well as because of distance from the nearest bank branch or post office. It also covers problems arising from restricted or inconvenient opening hours, but it is intended to exclude problems relating to quality, price and other aspects which are considered to be subjective rather than objective. How far, however, the responses conform with these intentions is a matter of conjecture¹.

Combining the responses to the questions on difficulties of access to a bank and to postal services (i.e. taking those reporting difficulty of access to either service) enables these to be compared with the responses to the question in the 2009 module. This shows some differences between the two in most countries. Indeed, in only 10 of the 26 countries for which data are available was the difference in the proportion reporting difficulties of access less than 4 percentage points (Table 7). The difference between the two surveys in this respect is particularly large in Romania, where the proportion reporting difficulties of access was 36 percentage points smaller in 2009

¹ Although access is intended to be interpreted objectively, it may well be difficult in practice to distinguish between someone who does not have access to banking services because they have been refused when trying to open an account and someone who does not have access because they believe they would be refused if they tried to open one.

than in 2007, and in Finland, where it was 27 percentage points larger. In both cases, a difference of this size between years so close to each other can arise only from data issues, such as in particular a different interpretation of access difficulties. In Bulgaria, Greece and Slovakia, the difference is over 10 percentage points, and in Germany, Spain, Estonia and Hungary, 8 percentage points or over, in all 7 countries, the proportion reporting difficulties being smaller in 2009 than in 2007. Although it is likely that access to banking services will tend to increase over time, especially in low income countries, such a large change over a two-year period seems implausible.

Table 7 Proportion of population having difficulty in accessing banking or postal services by type of location (%), 2007-2009

	Total		Urban		Rural	
	2007	2009	2007	2009	2007	2009
BE	29.9	25.6	28.4	24.2	66.1	57.9
BG	28.2	17.5	21.0	14.1	35.1	20.9
CZ	27.7	26.0	20.9	17.1	37.2	38.7
DK	23.4	15.7	23.5	14.9	23.0	18.0
DE	30.0	21.0	28.8	18.7	36.7	34.4
EE	27.8	19.8	16.5	7.2	38.5	32.2
IE	22.5	18.0	16.8	7.9	32.2	34.8
EL	33.4	21.7	21.5	13.7	47.3	30.8
ES	21.8	13.2	20.5	11.8	25.2	17.1
FR	23.5	22.6	22.7	21.8	27.3	25.9
IT	34.9	33.9	34.2	33.1	38.6	37.7
CY	14.1	7.5	14.0	7.3	14.5	8.0
LV	31.7	32.4	23.3	25.4	38.4	39.4
LT	25.1	26.1	19.3	14.7	29.2	34.6
LU	18.0	15.0	15.2	12.1	27.9	25.0
HU	33.2	25.1	29.5	26.4	37.2	23.7
MT		32.8				
NL	12.9	12.9				
AT	27.1	27.9	20.7	22.0	36.8	37.3
PL	29.4	26.6	21.7	17.6	38.2	37.0
PT	13.3	8.2	12.8	8.6	14.6	6.8
RO	60.6	24.4	34.0	16.4	77.6	29.3
SI	22.3	22.3				
SK	39.9	29.2	35.5	27.7	46.5	31.3
FI	12.1	38.8	13.0	35.9	11.4	40.9
SE	17.1	21.6	15.6	20.6	17.8	22.2
UK	14.2	6.2	14.3	6.0	12.8	12.3
EU12	36.3	25.2	25.1	18.6	48.0	32.1
EU15	24.5	19.7	23.9	18.3	29.7	27.9
EU27	27.0	20.9	24.1	18.4	37.3	29.6

Note: Data on type of location not available for MT, NL and SI

Source: Own calculations based on Eurostat, EU-SILC 2007 UDB August 2011 and EU-SILC 2009 UDB August 2011.

Overall, the proportion of people reporting difficulties of access to banking or postal services was, on average, some 11 percentage points smaller in the EU12 in 2009 than in 2007 and 5 percentage points less in the EU15, though how far this represents a genuine improvement in the accessibility of the two services is open to question.

In nearly all countries, more of those with income below the risk of poverty threshold report difficulties of access than those with income above this level, but in many cases the difference is relatively small. It tends to be bigger in the EU12 than the EU15. In 2009, therefore, the proportion of those at risk of poverty reporting access difficulties in the EU12 was, on average, around 9 percentage points larger than for the total

population (34% as against 25%). In the EU15, however, the difference was less than 2 percentage points (21.5% as against just under 20%) (Table 8).

Table 8 Those at risk of poverty reporting difficulty accessing banking or postal services by type of location (%), 2007-2009

	Total		Urban		Rural	
	2007	2009	2007	2009	2007	2009
BE	32.0	29.5	30.6	28.6	59.3	54.1
BG	34.6	25.7	27.1	19.2	38.9	28.4
CZ	24.9	28.0	17.4	20.6	35.2	38.9
DK	23.4	20.2	22.3	17.9	26.4	27.0
DE	31.1	22.2	29.7	19.8	37.5	32.5
EE	38.5	30.9	22.0	10.2	49.7	44.9
IE	29.5	20.6	21.9	8.0	40.1	35.3
EL	43.7	32.1	21.9	17.0	56.4	42.4
ES	21.8	14.9	20.2	13.7	24.4	17.2
FR	20.8	16.9	20.2	14.5	23.0	27.2
IT	45.1	40.8	44.8	40.6	46.5	41.8
CY	24.2	11.5	23.3	12.2	25.8	10.2
LV	41.0	40.6	28.7	29.4	45.6	47.6
LT	36.8	41.5	25.8	17.9	39.1	48.2
LU	14.7	8.4	10.6	5.8	30.6	19.3
HU	40.2	26.8	35.5	24.1	42.5	28.2
MT		36.5				
NL	14.5	15.4				
AT	31.1	29.3	22.8	17.7	45.3	50.9
PL	39.5	38.6	26.6	22.7	47.6	48.6
PT	15.4	9.0	14.8	9.4	16.7	7.9
RO	80.4	32.9	49.8	22.5	84.7	33.9
SI	34.9	33.3				
SK	43.5	30.9	34.9	26.3	51.3	34.9
FI	17.9	37.2	16.6	31.7	18.6	40.7
SE	20.3	23.1	20.2	18.9	20.4	25.0
UK	17.6	7.5	17.1	7.4	26.8	14.7
EU12	50.1	34.0	29.4	22.3	59.6	39.1
EU15	27.9	21.5	26.8	19.5	33.7	29.6
EU27	32.9	24.2	27.0	19.8	45.9	34.1

Note: No type of location information for MT, NL and SI

Source: Own calculations based on Eurostat, EU-SILC 2007 and EU-SILC 2009, UDB August 2011.

The difference was much bigger in Greece than in other EU15 countries, at over 10 percentage points, and was also relatively large in Italy, at 7 percentage points, whereas in all other EU15 countries, it was less than 5 percentage points. In France, Luxembourg and Finland, the proportion of those at risk of poverty was smaller than for the population as a whole, and significantly so in the first two (around 6-7 percentage points smaller). In the EU12, the proportion of those at risk of poverty reporting difficulties accessing banking or postal services was larger than for the total population in all countries, especially in Estonia, Lithuania, Poland and Slovenia (over 10 percentage points larger in each case) and only slightly less so in Bulgaria, Romania and Latvia (over 8 percentage points).

Those living in rural areas are more likely to report difficulties of access the services concerned than those living in urban areas. This is true in both the EU12 and EU15, but more so in the former than the latter. In the EU12, on average, the proportion of those living in rural areas reporting difficulties was 13.5 percentage points larger than those living in urban ones, around 20 percentage points or more larger in the Czech Republic, Lithuania and Poland and 25 percentage points larger in Estonia. In the

EU15, the proportion reporting access difficulties was 9.5 percentage points larger on average, over 15 percentage points larger in Greece, Germany and Austria and over 25 percentage points larger in Ireland and even more in Belgium (though here the population classified as living in rural areas is very small). Only in Portugal in the EU15 and Hungary in the EU12 was the relative number of people living in rural areas reporting difficulties of access smaller than the number in urban areas and then only marginally so.

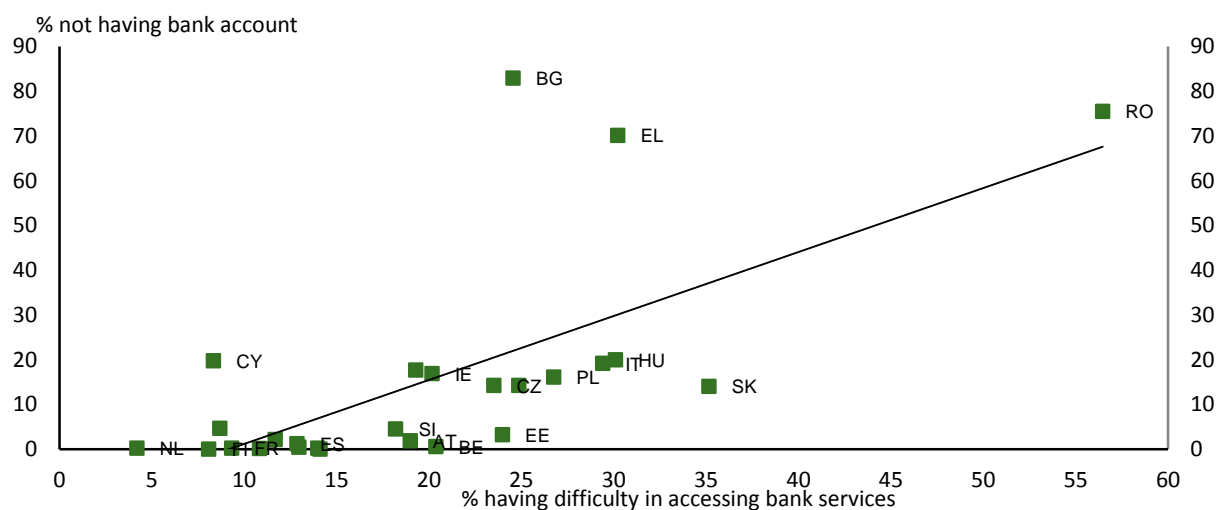
Those living in rural areas with low income are, therefore, doubly disadvantaged in terms of access to banking or postal services. Indeed, the difference in the proportion reporting accessibility difficulties between those living in rural areas and those living in urban ones is slightly larger for those with income below the risk of poverty threshold than for the population as a whole. Again the extent of the difference is bigger in the EU12 than the EU15. The proportion of those with income below the risk of poverty threshold living in rural areas reporting difficulties of access was, therefore, almost 17 percentage points larger in the EU12, on average, than for those with income similarly low living in urban areas (just over 3 percentage points more than for the total population). In the EU15, the difference was just over 10 percentage points (only around half a percentage point more than for the total population). As for the population as a whole, those living in rural areas in Portugal were slightly less likely to report access difficulties than those in urban areas, while the same is true for Cyprus in the EU12.

Access to banking services and possession of a bank account

Although there are problems in comparing data on the proportion of the population with bank current accounts across countries², it is nevertheless of interest to relate the data concerned with the proportion reporting difficulties of access to banking services. There is some relationship across countries between the latter proportion and the proportion that do not have a bank current account, in the sense that in countries where a relatively large number of people did not have a current account in 2008, the proportion reporting difficulties of access to banking services in 2007 was also relatively large (the correlation coefficient between the two is 0.67) (Figure 5). However, there are a number of countries which depart from the average relationship. In Italy, for example, the proportion without a current account was much smaller than in Bulgaria but a larger proportion reported difficulties of accessing banking services. Similarly, in Cyprus, a relatively large number of people reported not having a current account but a relatively small proportion (smaller than in all but the Netherlands and Finland) reported difficulties of access.

² 'Financial exclusion in the EU', Social Situation Observatory, Research Note 3/2010, pp.4-5: http://www.socialsituation.eu/research-notes/RN03_%202010_Financial_%20exclusion.pdf.

Figure 5 Relationship between having difficulty in accessing bank services (2007) and not having a bank account (2008)



Source, Eurostat EU-SILC 2007 and 2008, UDB August 2011

Most of those without a current account reported that this is the case because they prefer not to have one rather than there being difficulties of access. On average, only just over 4% of people in the EU12 reported not having an account because of accessibility problems (any one of high bank charges, being refused an account or thinking that they would be refused or no convenient branch within reach) and except in Bulgaria (9%) and Romania (just over 11%), the proportion was less than 4% in all countries. In the EU15, the proportion was only 0.5% and except in Greece (9.5%), less than 2% in all countries apart from Ireland (where it was precisely 2%). In most countries, the proportion is negligible and bears little relationship to the proportion reporting accessibility problems.

The proportion of people reporting not having a current account both in total and because of accessibility problems was larger in rural areas than in urban ones, but only marginally so. Just over 5% of those living in rural areas reported not having a bank account because of accessibility problems in the EU12 as compare with 3% of those living in urban areas, while in the EU15, the figures were 1% and 0.5%, respectively. The difference was relatively large in Romania (just over 13% as against just over 8%) but small in other countries. Again there is little relationship across countries between the proportion without an account for accessibility reasons and those reporting difficulties of access to banking services.

The proportion without a bank current account was also larger for those with income below the risk of poverty threshold than for the population as a whole and this was equally the case for those reporting accessibility problems as a reason. Nevertheless, only 8% of people with income below this level in the EU12 were without an account because of such problems, though around 15% in Bulgaria and Romania and 14% in the Czech Republic. In the EU15, the figure was only just over 1% in the EU15, though over 15% in Greece. Apart from the latter, the proportion was 3% or less in all countries.

As for the population as a whole, the proportion of people at risk of poverty without a current account because of accessibility problems was larger in rural areas than in urban ones but only slightly so in the EU15 especially (2% as opposed to 1%, while in the EU12, the figures were just under 9% and 6.5%, respectively). Again the difference was relatively large in Romania (5.5 percentage points), though in Bulgaria,

it was marginal and in Poland as well as Hungary and Cyprus, the proportion was larger for those in urban areas than for those in rural ones.

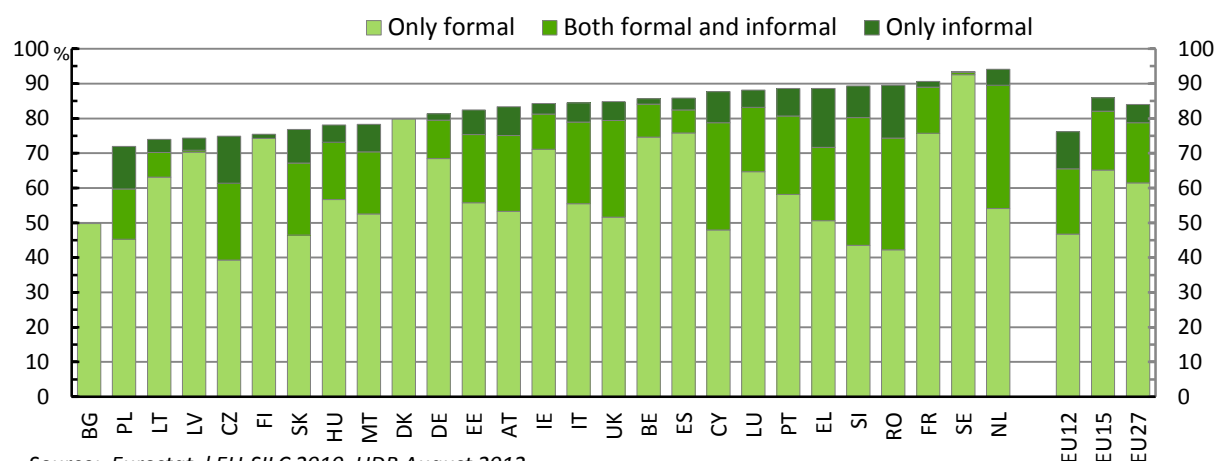
Once more, there is no evident relationship between the proportion without a bank current account for accessibility reasons and the proportion reporting problems of access to banking (or postal) services.

5. Childcare

There is little information in the EU-SILC which throws light on access to childcare. Although it includes data on the use of childcare for children under 12, it gives no indication of why those with children not using childcare are not doing so, whether it is out of conscious choice, on the one hand, or because childcare is too expensive, not conveniently available or of poor quality, on the other. The analysis here, therefore, simply examines the data on the use of childcare as reported, which may give some hint as to the access of various social groups to the services concerned. Use of childcare can be classified into three categories: institutional (school, preschool, childcare services after the school hours, childcare at day-care centre), professional (childcare by a professional child minder) and informal (child care by grand-parents, other relatives, friends or neighbours). The concern here is with both those using such services and those not and those using institutional or professional childcare services as opposed to those using informal care. Since the focus is on the provision of services which make it possible for parents to work, school as well as preschool is treated as a form of childcare.

The EU-SILC data indicate that 16% of children aged 11 or below in the EU did not receive any form of childcare (institutional, professional or informal) in 2010 (Figure 6). The proportion was significantly larger in the EU12 (24%) than in the EU15 (14%). Moreover, children in the EU12 were more likely, on average, to be cared for informally (by relatives, friends or neighbours) than in the EU15 (11% of children received only informal care in the former, 4% in the latter). The largest proportion cared for only informally, however, was in Greece (17%)

Figure 6 Proportion of children under 12 receiving childcare by broad type, 2010



Source: Eurostat, I EU-SILC 2010, UDB August 2012

More children received care of some form in the EU15 than in the EU12 in each broad age group (under 3, 3-5 and 6-11) (Table 9). The difference was especially wide for children of pre-school age (3-5) – 93% in the EU15, 75% in the EU12 – and wider still in respect of formal childcare (91% as against 61%). It was only slightly less wide, however, for those aged under 3 (53% as against 37%), reflecting the underdeveloped nature of formal care facilities for children of this age in the EU12 (only 9% of children on average were in receipt of formal care as against 39% in the

EU15), together with the prevalent tendency for mothers to stay at home to care for very young children in many of the countries concerned.

Nevertheless, there are significant differences between EU15 countries in the extent of formal care services used by for children under 3, the proportion in receipt of such care ranging from over 70% in Denmark and Sweden to only around 11-13% in Greece and Austria.

The large majority of pre-school age children of 3-5 were in receipt of formal care (including attendance at pre-school) in EU15 countries, the only (slightly surprising exception) being Denmark, where only just over half were reported to receive formal care. In the EU12, on the other hand, less than half were in receipt of formal care in Poland and Malta and only just over half in Bulgaria. Moreover, the proportion was around 70% or less in Romania, Lithuania, Latvia, the Czech Republic and Slovakia, whereas in the EU15, this was reported to be the case only in Greece and Finland in addition to Denmark.

Table 9 Receipt of childcare of different broad types by age of children, 2010 (% of each age group)

	0-2			3-5			6-11			
	Formal care	Informal care	No care	Formal care	Informal care	No care	Formal care	Informal care	After-school care	No care
BE	39.2	13.7	54.9	98.7	26.4	1.3	100.0	1.4	32.9	0.0
BG	7.5	0.0	92.5	54.8	0.0	45.2	71.3	0.0	8.8	28.7
CZ	4.0	38.6	59.2	71.7	42.5	14.9	88.1	29.7	0.5	11.6
DK	77.2	0.0	22.8	52.7	0.0	47.3	95.2	0.0	64.9	4.8
DE	27.3	9.3	66.4	92.0	13.7	6.8	96.0	14.0	19.9	3.8
EE	22.8	33.4	55.1	90.7	33.5	6.6	99.5	18.3	17.4	0.4
IE	29.8	15.4	59.8	83.9	17.0	13.0	99.4	10.2	4.1	0.3
EL	11.3	57.4	35.0	70.1	44.4	12.9	99.4	26.3	14.3	0.2
ES	40.5	17.0	45.4	95.0	10.3	4.5	98.1	5.8	9.3	1.9
FR	55.8	17.5	37.3	95.6	17.9	3.6	99.7	12.4	17.2	0.3
IT	23.3	27.2	57.3	87.7	35.5	8.7	100.0	26.4	12.8	0.0
CY	30.6	41.2	38.8	86.9	39.1	9.2	99.9	39.3	11.8	0.1
LV	17.3	7.8	74.8	71.6	6.2	22.4	98.5	0.9	1.2	1.4
LT	18.6	7.1	74.6	69.6	13.8	24.5	94.4	11.4	2.9	4.0
LU	45.8	25.7	37.7	92.1	31.4	5.8	100.0	18.1	31.1	0.0
HU	9.5	21.8	71.7	84.2	22.8	14.4	98.5	20.7	67.6	1.5
MT	42.2	27.6	44.5	46.4	29.6	37.6	99.8	22.4	38.6	0.2
NL	60.7	49.1	20.8	94.8	45.7	3.9	100.0	33.5	17.4	0.0
AT	13.4	33.7	58.5	84.6	37.2	9.5	99.5	25.1	22.2	0.3
PL	6.9	31.2	63.6	44.3	29.2	39.0	95.5	23.0	14.0	3.7
PT	44.6	36.6	34.3	81.2	36.2	8.5	96.5	24.8	31.6	2.7
RO	9.7	50.4	41.5	65.8	56.2	11.1	91.6	42.8	0.1	3.7
SI	38.9	48.5	34.1	91.4	56.5	3.4	99.2	38.8	54.1	0.4
SK	3.0	29.8	67.9	72.4	35.5	19.1	90.6	28.3	26.7	7.0
FI	28.6	2.7	68.7	70.1	2.2	27.7	98.8	0.0	12.9	1.2
SE	70.2	0.9	27.7	97.8	0.7	1.8	99.7	1.0	56.0	0.3
UK	40.4	29.6	43.8	92.3	35.9	5.7	94.5	33.7	4.4	4.0
EU12	9.1	30.0	63.2	61.2	34.2	25.0	92.6	26.9	14.5	5.8
EU15	39.2	22.2	47.4	90.9	24.1	6.9	97.9	18.4	16.5	1.8
EU27	33.4	23.7	50.4	85.0	26.1	10.5	96.8	20.1	16.1	2.6

Source: Own calculations based on Eurostat, I EU-SILC 2010 UDB August 2012

For children of primary school age of 6-11, the proportion attending school would be expected to be close to 100% in all countries³, In Bulgaria, however, 29% of children of this age are reported not to attend school or to receive any form of formal childcare, while in the Czech Republic, the figure was 12%, which raises a question-mark over the reliability of the data in these two cases. For children of this age, the more interesting question concerns not so much the proportion of children receiving any form of care but those receiving care after school hours since this is likely to make it possible for both parents to work full-time. The proportion concerned was similar in the EU15 and EU12 (15-17%) but varied markedly between countries in both – from around two-thirds in both Denmark and Hungary and around 55% in Slovenia and Sweden to virtually zero in the Czech Republic and Romania (and just 4% in Ireland and the UK).

Children at risk of poverty (i.e. those whose family income is less than 60% of the median) are less likely to receive childcare than those with higher incomes. Indeed, the fact that this is the case is in itself a reason for their low income in that it makes it difficult for both parents to be employed. In the EU15, on average, 39% of children under 6 at risk of poverty were not in receipt of care in 2010 as against 27% of all children (Table 10). Equally, 56% received some form of formal care as opposed to 66% of all children of this age. A difference was common to all countries but was particularly wide in Greece, France, the Netherlands and Portugal. In the EU12, the difference between the two groups was smaller but still significant (the proportion of children receiving no care being 10 percentage points higher for those at risk of poverty than for all children). In this case, however, the proportion receiving no care was smaller for those at risk of poverty in Lithuania than for all children and in Romania, the proportion was much the same.

The proportion of children aged under 6 living in households which were materially deprived who received no form of outside childcare also tended to be larger than for all children in both the EU15 and EU12, but the difference was smaller in most cases.

³ Compulsory education starts at age 6 or before in 23 of the 27 Member States. The exceptions are Estonia, Lithuania, Finland and Sweden, where it starts at 7.
(http://eacea.ec.europa.eu/education/eurydice/documents/compulsory_education/106_compulsory_education_EN.pdf)

Table 10 Children under 12 receiving childcare of different types, total, at risk of poverty and materially deprived, 2010 (% of each group)

	Total				At risk of poverty				Materially deprived			
	No care	Only formal	Formal+ informal	Only informal	No care	Only formal	Formal+ informal	Only informal	No care	Only formal	Formal+ informal	Only informal
BE	14.4	74.6	9.5	1.5	24.4	73.0	1.4	1.2	20.5	75.1	3.0	1.4
BG	50.2	49.8	0.0	0.0	56.4	43.6	0.0	0.0	50.8	49.2	0.0	0.0
CZ	25.1	39.3	22.1	13.5	32.5	39.0	18.1	10.4	30.5	35.3	22.5	11.7
DK	20.2	79.8	0.0	0.0	19.5	80.5	0.0	0.0	16.9	83.1	0.0	0.0
DE	18.7	68.4	11.0	1.8	23.4	72.1	4.0	0.5	20.8	72.7	5.8	0.7
EE	17.6	55.8	19.6	7.0	20.2	65.4	12.2	2.2	16.4	55.3	21.9	6.5
IE	15.7	71.2	10.1	3.0	18.3	75.7	3.9	2.2	18.1	73.1	6.8	1.9
EL	11.4	50.6	21.1	16.9	21.7	58.8	9.5	10.0	20.7	53.8	12.6	13.0
ES	14.2	75.8	6.6	3.4	16.8	77.8	3.6	1.8	18.7	72.8	5.6	2.9
FR	9.3	75.7	13.3	1.7	18.0	76.3	4.8	0.9	17.2	74.2	7.3	1.3
IT	15.6	55.5	23.5	5.5	21.3	61.9	13.7	3.1	20.1	60.1	15.7	4.1
CY	12.3	47.9	30.9	8.9	21.4	65.1	8.0	5.4	14.8	53.1	26.6	5.5
LV	25.6	70.3	0.5	3.6	29.9	66.9	0.2	2.9	29.1	67.2	0.5	3.3
LT	26.0	63.1	7.0	3.8	17.8	65.9	13.3	2.9	28.5	60.6	7.0	3.9
LU	11.9	64.7	18.4	5.0	19.9	67.2	6.9	5.9	12.9	62.4	17.3	7.5
HU	21.9	56.7	16.5	4.9	26.6	58.8	10.2	4.4	21.7	60.4	13.5	4.4
MT	21.7	52.5	17.8	8.0	27.2	53.7	15.8	3.3	31.7	54.0	11.8	2.4
NL	5.9	54.1	35.5	4.6	12.4	56.0	26.9	4.8	8.3	64.7	24.0	3.0
AT	16.6	53.2	21.8	8.3	23.3	64.2	8.2	4.3	19.2	60.4	15.1	5.2
PL	28.1	45.3	14.4	12.2	36.9	46.3	6.9	10.0	34.7	42.6	12.0	10.7
PT	11.4	58.1	22.5	7.9	20.0	66.7	12.5	0.8	13.2	62.7	18.6	5.5
RO	10.5	42.3	32.1	15.2	9.5	43.8	29.5	17.2	12.5	42.6	27.5	17.3
SI	10.7	43.5	36.7	9.1	15.7	54.1	24.5	5.7	14.8	49.6	29.6	6.0
SK	23.2	46.4	20.8	9.6	30.8	47.6	13.3	8.4	27.4	47.5	15.2	10.0
FI	24.5	74.2	0.0	1.2	32.5	66.5	0.0	1.0	35.6	63.9	0.0	0.5
SE	6.6	92.5	0.7	0.2	12.0	86.2	1.8	0.0	12.0	88.0	0.0	0.0
UK	15.2	51.6	27.8	5.4	23.9	54.1	16.3	5.7	20.6	43.7	28.3	7.5
EU12	23.8	46.8	18.7	10.7	27.4	47.6	14.7	10.3	25.9	46.6	16.8	10.7
EU15	14.1	65.2	16.9	3.8	20.5	67.7	9.0	2.7	19.0	62.8	14.1	4.0
EU27	16.0	61.5	17.3	5.2	22.1	63.1	10.4	4.4	21.6	56.8	15.1	6.5

Source: Own calculations based on Eurostat, I EU-SILC 2010 UDB August 2012

There are differences between the EU12 and EU15 as regards the use of childcare by children under 6 in urban and rural areas. In the EU15, there is a slightly tendency for a larger proportion of children in rural areas to receive childcare than in urban areas. This applies to the receipt of both formal and informal care (Table 11).

Table 11 Children under 6 by receipt of childcare in urban and rural areas, 2010 (%)

	Urban				Rural			
	No care	Only formal	Formal+ informal	Only informal	No care	Only formal	Formal+ informal	Only informal
BE	28.2	51.9	17.0	2.9	25.2	51.1	20.6	3.2
BG	66.9	33.1	0.0	0.0	72.5	27.5	0.0	0.0
CZ	37.6	24.5	15.3	22.6	34.7	20.3	16.6	28.5
DK	37.9	62.1	0.0	0.0	32.9	67.1	0.0	0.0
DE	36.3	52.3	8.1	3.2	30.2	56.7	7.0	6.1
EE	30.2	35.3	20.9	13.6	33.6	34.0	20.4	12.1
IE	33.3	49.5	11.2	6.0	31.8	53.5	8.3	6.3
EL	24.4	27.9	13.8	33.9	22.3	22.0	19.4	36.4
ES	26.4	60.2	7.7	5.7	24.0	60.3	6.4	9.3
FR	19.0	63.7	13.6	3.7	19.2	61.6	16.9	2.4
IT	31.9	36.8	20.5	10.7	30.9	35.8	20.0	13.3
CY	22.9	33.0	26.2	17.9	27.2	40.6	15.4	16.8
LV	42.7	49.3	0.3	7.6	50.2	43.4	0.1	6.3
LT	55.1	35.3	5.0	4.6	47.5	41.7	2.9	7.9
LU	24.5	50.3	15.1	10.1	15.8	42.7	34.2	7.3
HU	40.5	36.6	12.5	10.4	45.0	33.3	12.0	9.7
AT	34.1	33.7	17.8	14.4	33.0	26.2	20.0	20.8
PL	46.7	23.0	7.9	22.5	58.0	12.0	5.7	24.3
PT	22.1	43.2	19.0	15.7	14.8	40.8	30.3	14.1
RO	23.3	31.1	20.6	24.9	19.8	20.6	24.0	35.6
SK	43.5	22.9	14.3	19.3	39.8	28.5	15.2	16.5
FI	41.8	55.9	0.0	2.3	51.6	45.9	0.0	2.5
SE	14.0	85.7	0.3	0.0	13.4	85.5	0.3	0.7
UK	24.6	42.0	24.4	9.0	21.3	47.0	23.9	7.8
EU12	42.7	27.5	11.0	18.7	44.6	21.4	11.6	22.3
EU15	27.6	50.3	15.1	7.1	25.3	53.0	13.3	8.5
EU27	29.7	47.1	14.5	8.7	32.6	41.0	12.6	13.7

Note: No data on type of location for NL and SI.

Source: Own calculations based on Eurostat, EU-SILC 2010 UDB August 2012

In the EU12, however, the reverse is the case, specifically in respect of formal childcare, which might suggest that there are fewer such facilities available in rural areas than in urban ones. At the same time, in Romania and to a lesser extent in the Czech Republic, more children in rural areas are cared for informally than in urban ones, though the reverse is the case in the other countries.

Since after the age of 6, nearly all children attend school in all countries (or pre-school in a few) and so childcare, at least during school hours is not an issue, the remaining analysis focuses on children under this age. Specifically, it focuses on mothers of young children, who tend to have ultimate responsibility for looking after them, and how far whether or not they are in employment is associated with their use of childcare. In so doing, it distinguishes between those with different education levels since this is a major determinant of women's employment, as well as their ability to afford childcare in countries where this is not provided free or at a subsidised cost.

Use of childcare by education level of mothers

Women with children under 6 are less likely in most countries to use childcare if they have only basic schooling than if they have a higher level of education. This may reflect their more limited ability to earn enough to pay for childcare, or the limited childcare facilities available free or at low cost for them to take up. In the EU12, therefore, just over 29% of mothers with only basic education and with a youngest child of under 6 did not use childcare at all as opposed to just under 25-26% of those with a higher education level (Table 12). The difference is more pronounced in respect of informal care, which is used by 33% of mothers with tertiary education as opposed to only 23% of those with only basic schooling.

Table 12 Proportion of mothers aged 25-54 with a child under 6 using different forms of childcare by education level, 2010

	Low				Medium				High			
	None	Only formal	Form+ inform	Only inform	None	Only formal	Form+ inform	Only inform	None	Only formal	Form+ inform	Only inform
BE	25.3	70.4	2.8	1.5	14.0	72.9	10.7	2.4	14.3	68.6	14.7	2.4
BG	54.4	45.6	0.0	0.0	40.8	59.2	0.0	0.0	38.0	62.0	0.0	0.0
CZ	36.5	30.6	15.3	17.5	25.8	35.8	23.2	15.2	30.8	32.1	18.6	18.6
DK	16.6	83.4	0.0	0.0	22.1	77.9	0.0	0.0	23.7	76.3	0.0	0.0
DE	26.4	70.3	3.3	0.0	19.7	65.8	11.9	2.6	21.3	65.3	11.4	2.0
EE	18.2	54.2	21.1	6.5	20.1	53.5	20.1	6.3	19.8	47.2	22.8	10.1
IE	21.9	67.4	7.2	3.5	22.3	64.8	7.4	5.5	27.8	55.4	11.1	5.6
EL	17.9	58.3	11.5	12.4	13.7	47.9	20.1	18.3	7.1	42.0	19.8	31.2
ES	18.5	73.7	3.9	3.9	16.5	73.2	6.1	4.2	15.0	69.0	9.9	6.1
FR	23.8	66.9	7.5	1.7	19.6	62.5	15.2	2.7	11.8	68.9	16.3	3.0
IT	19.8	59.4	16.1	4.7	17.4	49.8	25.2	7.7	17.2	42.4	29.3	11.1
CY	21.4	60.5	16.7	1.4	11.7	51.3	32.5	4.5	10.4	38.2	33.2	18.3
LV	32.2	64.0	0.0	3.8	26.5	68.5	0.8	4.3	27.7	64.8	0.6	6.9
LT	24.3	69.4	0.5	5.8	23.8	61.5	9.7	5.0	33.2	55.9	6.9	4.0
LU	20.3	66.3	7.7	5.8	14.6	54.6	23.8	7.0	12.9	64.4	17.5	5.2
HU	24.2	63.8	10.5	1.5	21.1	56.5	16.8	5.7	29.4	44.0	18.3	8.3
MT	25.6	56.0	14.3	4.1	21.1	43.7	26.9	8.4	21.1	41.7	22.6	14.6
NL	11.8	58.8	23.7	5.7	7.8	50.7	33.8	7.7	7.7	47.6	38.2	6.5
AT	26.8	53.1	16.3	3.8	19.3	46.8	22.2	11.6	24.0	39.5	24.8	11.6
PL	35.8	51.9	3.8	8.4	32.8	43.9	11.9	11.4	26.2	36.1	17.2	20.5
PT	11.8	63.6	18.1	6.5	9.2	55.9	22.7	12.3	7.7	57.7	24.1	10.4
RO	12.2	34.0	34.5	19.3	10.0	42.5	33.4	14.1	16.5	46.8	23.1	13.6
SI	12.3	64.7	19.8	3.2	10.7	42.3	35.5	11.5	13.7	33.8	39.0	13.5
SK	32.1	47.0	8.1	12.8	21.9	44.5	25.6	8.0	30.4	36.5	17.0	16.0
FI	32.4	63.9	0.0	3.7	29.9	68.4	0.0	1.7	26.3	72.4	0.0	1.3
SE	25.6	73.5	0.9	0.0	15.0	84.2	0.4	0.3	22.6	76.2	0.9	0.3
UK	24.1	50.2	24.6	1.1	15.8	48.2	30.4	5.6	16.2	47.7	29.3	6.7
EU12	29.5	47.5	12.7	10.3	24.8	46.3	18.5	10.4	25.7	41.9	17.5	14.9
EU15	22.1	63.9	11.3	2.7	17.2	59.8	17.9	5.1	16.2	58.3	19.3	6.3
EU27	23.6	60.6	11.6	4.2	18.7	57.1	18.0	6.2	18.1	55.0	19.0	8.0

Source: Own calculations based on Eurostat, EU-SILC 2010 UDB August 2012

In the EU15, the difference in the proportion of mothers not using childcare between those with basic schooling and those with tertiary education is slightly wider (22% as against 16%), but again the difference is bigger in respect of informal childcare (14% as opposed to 25%) than formal care (75% as against 78%).

The same kinds of difference are common to most Member States, especially in the EU15, where only in Denmark and Ireland do fewer mothers with basic education use care services than those with higher education levels. In the EU12, on the other hand,

this is the case for 5 countries, specifically, Estonia, Lithuania, Hungary, Romania and Slovenia.

Employment rates of mothers with children under 6

As would be expected, the employment rates of women with young children tend to be higher if they use care services than if they do not. In both the EU12 and EU15, employment rates of mothers aged 25-54 who did not use childcare services at all in 2010 averaged around 35-36%, some 30 percentage points or more below those of mothers using formal care and around 45-50 percentage points lower than those using informal as well as formal care (Table 13).

Table 13 Employment rates of women aged 25-54 with a child under 6 and proportion working part-time by use of childcare, 2010

	Employment rates (% each group)					Employed part-time (% employed)				
	No care	Only formal	Formal+ informal	Only informal	Total	No care	Only formal	Formal+ informal	Only informal	Total
BE	48.6	74.0	97.7	80.9	72.6	26.0	31.4	23.7	49.5	30.1
BG	59.9	76.6			69.4	3.4	6.7			5.5
CZ	21.7	76.9	84.3	15.8	53.6	4.0	9.7	7.3	3.8	8.0
DK	83.2	81.8			82.1	6.5	9.0			8.4
DE	21.0	69.4	97.6	64.5	61.8	66.9	63.2	62.6	79.0	63.7
EE	12.6	74.9	80.4	32.4	60.3	37.1	8.2	9.5		10.7
IE	34.7	51.0	87.1	77.7	51.5	35.0	50.3	39.8	66.8	47.4
EL	6.9	57.1	83.9	89.1	62.9	23.3	36.5	12.2	29.8	28.3
ES	42.8	63.1	81.4	82.0	61.9	30.2	24.7	24.7	34.6	26.0
FR	35.8	78.8	93.6	87.0	73.8	19.0	23.5	15.6	49.2	22.5
IT	34.4	46.5	79.7	68.0	53.4	26.0	32.5	25.6	27.1	28.9
CY	32.1	68.7	97.1	97.4	75.7	18.3	14.3	11.2	16.1	13.5
LV	25.0	74.8		87.6	61.8	4.1	7.6		10.4	7.5
LT	67.0	82.9	77.1	81.8	77.9	3.9	7.8	3.4		6.2
LU	32.6	72.3	91.2	78.5	69.3	24.4	36.0	39.3	61.4	37.5
HU	7.1	61.6	76.3	8.6	48.0	14.3	5.6	4.5		5.9
MT	26.7	44.5	69.8	74.5	47.0	32.9	34.0	18.5	18.0	27.8
NL	47.2	73.7	89.7	80.2	77.4	53.2	64.9	69.0	82.0	67.1
AT	14.8	67.5	81.3	33.5	55.6	68.4	51.0	45.4	70.0	51.4
PL	38.0	74.6	92.3	83.5	67.0	16.0	8.7	9.1	16.0	11.4
PT	44.7	69.7	92.8	89.6	73.5	10.9	13.8	5.7	5.3	10.6
RO	36.4	61.5	76.3	57.3	62.7	8.4	9.2	10.5	7.1	9.4
SI	66.5	78.9	89.4	84.3	81.7	6.4	6.3	6.4	8.5	6.6
SK	27.9	78.3	84.1	40.9	63.3	5.7	4.8	2.1	2.7	4.0
FI	20.7	82.8		75.3	65.0	15.6	10.0		22.1	10.7
SE	79.9	86.8			85.5	24.3	35.9			34.1
UK	35.5	61.9	81.1	67.4	63.2	51.7	54.7	51.1	50.2	52.8
EU12	34.7	71.4	79.4	55.2	63.2	10.4	8.3	8.4	12.2	9.1
EU15	35.5	65.9	85.3	73.6	64.8	34.5	39.7	37.1	50.0	38.5
EU27	35.3	67.0	84.1	69.9	64.5	29.8	33.0	31.7	44.0	32.7

Note: Empty cells indicate insufficient observations for data to be reliable; bold indicates data uncertain due to the small number of observations

Source: Own calculations based on Eurostat, EU-SILC 2010 UDB August 2012

Interestingly, employment rates in the EU12 are significantly lower if mothers use informal rather than formal care, though they are higher in the EU15. In both cases, the use of both formal and informal care leads to a marked increase in employment rates.

Although this pattern of differences is broadly repeated at national level, there are marked variations in the relative levels of rates across countries. In particular, in Denmark and Sweden, employment rates of mothers are over 80% even for those not

making use of childcare, around twice as high as anywhere else apart from Lithuania and Slovenia and reflecting perhaps the relatively generous maternity leave entitlement which means that mothers can remain formally employed without being at work. This contrasts with the situation in Greece and Hungary, where rates for mothers not making use of care were only around 6-7%.

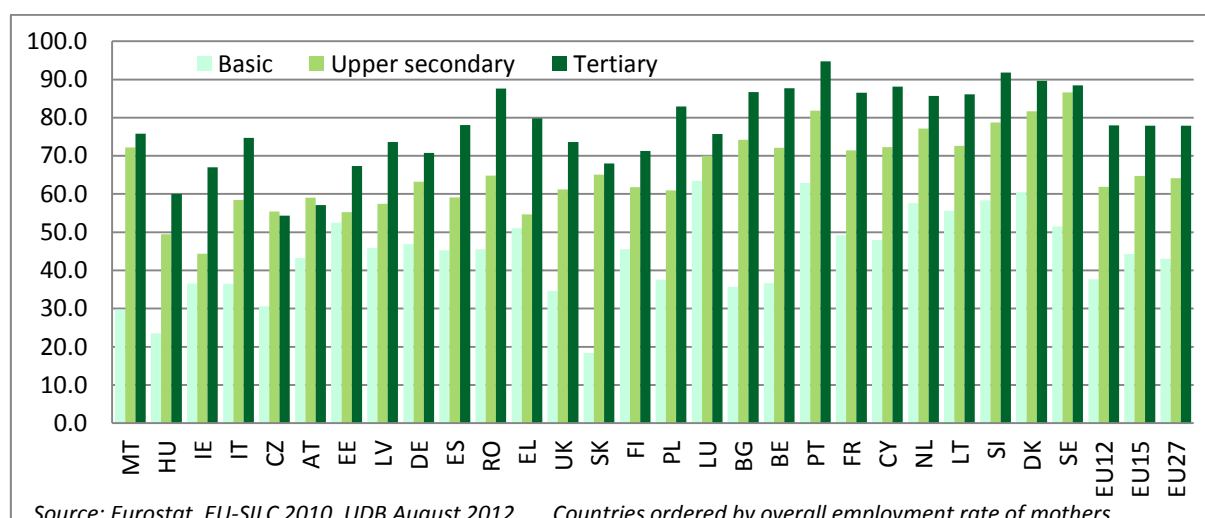
The proportion of mothers working part-time also varies according to whether they use childcare or not and, more especially, the type of childcare they use. This is particularly the case in the EU15 since part-time working is relatively unimportant in the EU12. In the EU15, therefore, on average, half the women in employment who used only informal care arrangements worked part-time as opposed to 40% of those using formal care. In Greece, Italy, Portugal and the UK, however, a smaller proportion of women relying on informal care worked part-time than of those using formal care alone.

Although it might be expected that mothers who make use of both formal and informal care would be most likely to work full-time insofar as it is likely to provide more hours of care, this does not seem to be the case in practice in most countries (exceptions are Belgium, Greece and France).

Employment rates of mothers of young children by education level

In all countries, employment rates of women with children under 6 vary markedly by education level. Those with tertiary qualification have higher employment rates than those with upper secondary education in all countries apart from the Czech Republic and Austria, and the latter have higher rates than those with only basic schooling throughout the EU (Figure 7).

Figure 7 Employment rates of women aged 25-54 with a child under 6 by education level, 2010



Employment rates of those with basic education, in particular, tend to be low in most countries, averaging only 38% in the EU12 and 44% in the EU15, reflecting the more limited use of childcare by the women concerned, as noted above, and their lower earnings potential. The overall level of employment rates, however, varies equally markedly across countries, the average employment rate for mothers of young children with basic schooling ranging from over 60% in Luxembourg and Portugal to less than 20% in Slovakia and average for those with tertiary education from 95% in Portugal and 92% in Slovenia to only 55% in the Czech Republic.

These differences in employment rates across countries are related in some degree to the use of childcare, especially as regards women with only basic schooling and more

in respect of formal childcare than informal (Table 14). It is evident, however, that there are other factors involved which affect the employment of women in addition to the use of childcare, which may be, for example, as indicated above, the parental leave entitlement in force and whether or not women who take up the entitlement are regarded as being employed or not.

Table 14 Correlation coefficients between use of childcare in EU Member States and employment rate of mothers aged 25-54 with a child under 6 by education level

	Education attainment level		
	Basic schooling	Upper secondary	Tertiary
Use of any form of childcare	0.544	0.266	0.433
Use of formal childcare	0.573	0.442	0.495

Source: Own calculations based on Eurostat, EU-SILC 2010 UDB August 2012

More detailed examination shows that within countries, the use of childcare has a major effect on the employment rates of mothers if specific account is taken of their education level, but, at the same time, that rates tend to be higher for those with higher education levels irrespective of whether or not they use childcare and whether it is formal or informal. The employment rate for mothers with only basic schooling, therefore, averaged around 20% in 2010 in both the EU12 and EU15 if they did not use childcare at all and rose to just under 50% in the EU12 if they used any form of care, but to 70% in the EU15 for those using both formal and informal arrangements (Table 15). For those with upper secondary education, the employment rate averaged just over for those not using childcare and 80% or more for those using both formal and informal care. For mothers with tertiary education, the rate was around 50% even for those not using childcare and close to 90% for those using formal and informal arrangements.

This pattern is broadly repeated in most countries. For example, there are only four countries in which the employment rate of mothers with basic schooling not using childcare was over 30% and only 5 countries in which the rate for those with tertiary education not using childcare was much less than 30%.

Table 15 Employment rates of women aged 25-54 with a child under 6 by education level and use of childcare, 2010

	Low				Medium				High			
	None	Only formal	Form+ inform	Only inform	None	Only formal	Form+ inform	Only inform	None	Only formal	Form+ inform	Only inform
BE	14.9	40.8			41.0	75.0	93.9		77.6	87.3	99.4	
BG	23.7	50.1			68.5	78.1			84.0	88.3		
CZ	4.6	48.6			21.7	77.5	85.8	13.9	28.4	83.4	83.5	18.0
DK		66.4			85.5	80.6			90.4	89.4		
DE	19.0	54.8			19.2	70.5	97.7	56.8	27.5	79.8	96.7	
EE	1.1	64.3			8.8	70.0	70.9	28.7	19.0	83.2	90.9	34.5
IE	4.7	39.8			18.7	48.8	77.1		57.9	63.0	93.5	
EL	13.1	54.3	59.4	83.2	3.7	49.4	79.5	79.3	7.1	70.5	97.0	97.8
ES	35.2	45.2	58.7	82.5	26.3	63.4	79.6	82.8	62.1	79.6	89.9	81.4
FR	11.4	58.2	80.6		33.2	77.7	93.5	81.8	61.2	88.3	96.2	92.4
IT	20.7	33.0	63.6	54.4	39.9	50.5	83.7	68.9	51.8	73.3	88.8	78.3
CY	8.1	48.3	93.8		29.4	63.4	97.9		51.2	86.3	97.0	96.7
LV	22.8	57.0			19.1	70.0			33.3	88.3		
LT	50.4	54.5			52.1	81.1	72.3		78.2	90.5	82.5	
LU	20.3	72.5	91.5		40.6	67.4	90.8	80.9	45.7	77.0	91.6	80.2
HU	2.5	28.5	39.7		7.2	61.8	76.6	5.0	9.2	91.2	89.1	10.5
MT	9.6	30.7	54.1		52.1	67.9	87.6		67.1	78.2	78.7	
NL	23.9	55.8	75.6		38.6	74.0	90.4	79.1	71.3	83.0	92.3	84.1
AT	12.1	49.6	69.3		17.4	71.1	82.4	35.1	11.7	77.4	85.9	20.2
PL	20.0	46.8			32.9	68.9	91.2	79.2	53.7	94.0	95.3	90.1
PT	25.2	60.4	89.6	81.6		72.6	93.9	100.0		96.8	98.8	
RO	30.6	43.0	58.3	36.6	29.5	60.3	81.2	64.8	62.0	92.2	100.0	
SI	16.8	60.5	77.9		67.1	76.4	85.2	78.1	77.0	92.0	96.2	93.4
SK		32.9			27.6	76.7	84.4	40.7	34.6	95.5	89.9	45.6
FI	8.2	61.7			21.9	79.1			22.9	88.6		
SE		59.2			83.2	87.1			84.0	89.8		
UK	28.8	33.3	44.6		30.1	56.0	84.4	67.5	46.6	76.7	84.6	68.7
EU12	18.9	45.0	47.9	40.8	31.4	68.9	79.9	54.0	50.0	91.3	87.4	64.4
EU15	21.6	47.2	70.6	47.3	33.0	65.5	86.0	70.9	50.9	80.5	89.3	81.7
EU27	21.1	46.7	66.1	46.0	32.6	66.2	84.8	67.5	50.7	82.6	88.9	78.2

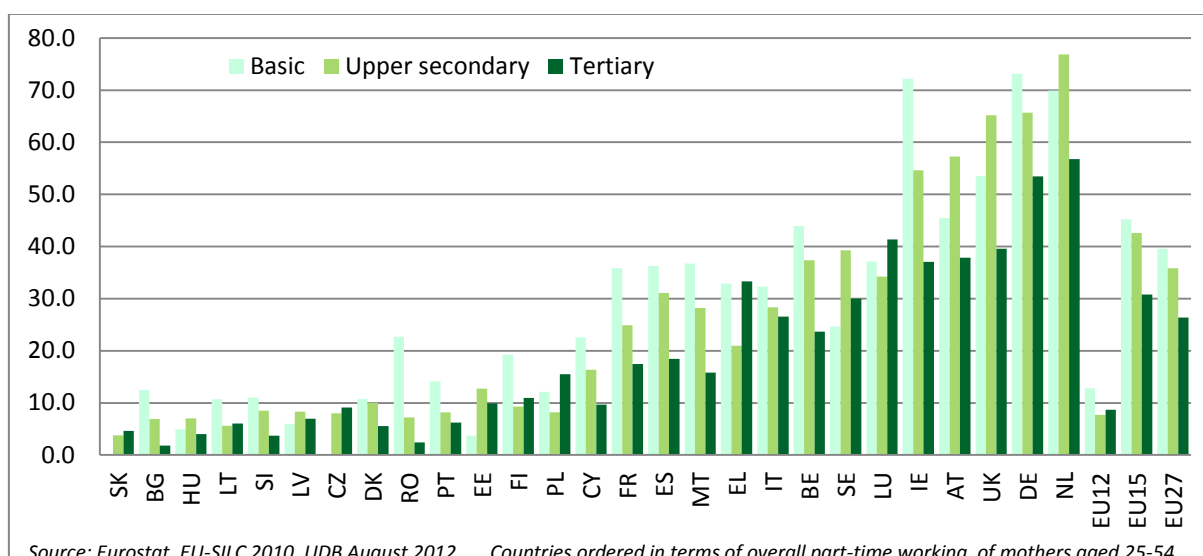
Note: Empty cells indicate insufficient observations for data to be reliable; bold indicates data uncertain due to the small number of observations

Source: Own calculations based on Eurostat, EU-SILC 2010 UDB August 2012

Part-time working by education level

As indicated above, the extent of part-time working among mothers with young children varies considerably across the EU. It is small in all EU12 countries, except Malta, but accounts for a substantial proportion of jobs that mothers do in many EU15 countries. It also varies markedly between women with different levels of education. Whereas, on average, in the EU15 around 45% of mothers with only basic schooling in employment worked part-time in 2010, the figure was only 31% for those with tertiary education (Figure 8 – part-time is defined here and elsewhere as working less than 30 hours a week).

Figure 8 Proportion of women aged 25-54 in employment with a child under 6 working part-time by education level, 2010



Moreover, in all EU15 countries apart from Luxembourg, Greece and Finland, the proportion of mothers with tertiary qualifications employed part-time was smaller than for those with lower education levels. There were, however, a few countries (the Netherlands, Austria and the UK) where a larger proportion of those with upper secondary education worked part-time than those with only basic schooling.

In the EU12 countries, there is less of a difference in the proportion of mothers employed part-time between those with different levels of education mainly because the proportion is in most cases small irrespective if the level of education, Malta apart.

There is, however, little systematic variation in part-time working among women according to the use of childcare, except for some tendency for those relying on informal care to be employed part-time to a greater extent than those using formal care or not making use of care at all (Table 16). There is also a tendency for fewer women in employment with tertiary education to work part-time than those with lower education levels irrespective of the form of childcare used.

Table 16 Proportion of women aged 25-54 in employment with a child under 6 by education level and use of childcare working part-time (less than 30 hours a week), 2010 (%)

	Basic				Upper secondary				Tertiary			
	None	Only formal	Form+inform	Only inform	None	Only formal	Form+inform	Only inform	None	Only formal	Form+inform	Only inform
BE		39.6			44.4	39.6	21.2		15.2	24.7	23.1	
BG	14.3	11.5			2.5	9.5			1.3	2.0		
CZ					3.9	9.6	7.3	6.1	4.3	12.1	8.7	
DK		11.9			7.3	10.9			6.7	5.2		
DE		72.2			71.7	65.1	65.0		54.8	52.8	50.1	
EE		0.0				10.8	13.1			7.0	6.4	
IE		81.8			24.8	57.1	61.7		36.0	33.7	33.2	
EL		40.2	26.0	21.4		28.5	10.4	19.4		42.9	11.6	37.8
ES	36.0	35.5	37.3	43.8	37.6	29.4	33.3		24.6	16.6	19.0	25.8
FR		38.8	10.0		21.3	26.8	17.6		15.4	16.9	14.9	
IT	22.4	36.4	31.9	19.7	24.5	32.5	24.1	30.0	32.5	27.3	23.6	26.8
CY		29.8	2.8			17.4	15.8			6.9	8.2	16.9
LV		7.5			3.1	8.2			6.0	6.9		
LT		6.5			1.8	7.2	3.6		2.8	8.5	3.2	
LU	26.7	32.3	40.8			34.1	37.6	28.3	17.9	41.9	41.2	
HU		6.4				7.0	5.8			2.9	3.0	
MT		43.9	22.6			39.4	11.9			10.9	22.3	
NL		60.5	77.4		64.0	74.9	77.6	91.4	41.2	55.8	58.8	66.9
AT		47.3	34.8		83.9	55.4	52.5	71.9		39.9	32.9	
PL		8.3			12.3	6.9	3.1	13.7	21.6	11.6	16.4	17.2
PT		16.9	6.3	9.5		12.7	4.9	4.3		8.4	5.2	
RO		29.7	26.3			6.2	7.2	9.5		3.0	0.0	
SI		10.4	5.3		6.4	7.5	8.8	12.5	5.1	3.3	3.9	3.1
SK					0.0	5.5	1.8	5.1	14.3	3.5	2.9	
FI		17.0			15.5	8.2			13.6	10.7		
SE		23.8			31.6	40.0			20.1	32.7		
UK		69.7			69.8	67.5	61.3	69.2	40.4	40.6	40.6	23.8
EU12	15.7	11.5	7.3	20.7	8.5	7.6	5.8	11.7	10.5	7.5	8.3	12.3
EU15	40.2	48.1	46.0	54.2	38.2	43.8	42.7	51.4	28.3	31.3	29.8	47.6
EU27	35.8	41.1	40.4	48.3	32.4	36.3	35.7	45.0	24.8	26.1	25.6	41.8

Note: Empty cells indicate observations for data to be reliable; bold indicates data uncertain due to the small number of observations

Source: Own calculations based on, Eurostat, EU-SILC 2010 UDB August 2012

Implications for access to childcare

The above analysis, as emphasised at the outset, says little directly about access to childcare since it is not possible to know from the data collected by the EU-SILC the reasons why children do not receive care or, most relevantly, formal care, and, more specifically, why the parents concerned do not use care facilities. Nevertheless, it does suggest that there are problems of access, whether financial, logistical or simply because the services are not available in a number of Member States and for particular social groups.

First, the use of any form of child care varies markedly between countries and is particularly low in many of the EU12 countries, which does not necessarily imply problems of accessibility since parents, and mothers in particular, may differ in their

willingness to make use of care services, especially perhaps in respect of children under 3; but it is suggestive.

Secondly, the use of informal care relative to formal care varies equally markedly across the EU, which does seem to suggest that the latter is either not available or not accessible for one reason or another or perhaps of insufficient quality in countries where the use is high (such as Greece, Romania and Poland).

Thirdly, children living in households where the level of income is below the at-risk-of-poverty level or which are materially deprived are less likely to receive childcare than others, though in general, the difference is relatively small even if widespread, which suggests that there may be problems of affordability for those with low incomes.

Fourthly the use of childcare in rural areas is similar in the EU15 to that in urban areas whereas in the EU12, fewer children in rural areas tend to receive care, especially formal care, which suggests that the facilities are less extensive or less affordable or both.

Fifthly, more mothers of young children tend to use childcare if they have tertiary education than if they have lower levels; though the difference is relatively small, especially in the EU12 and in both the EU12 and EU15, more in respect of informal than formal care; to the extent that a higher education level is associated with higher earnings potential, this does not suggest major general problems of accessibility for those with lower education levels, though there are significant differences in the use of formal care in a few countries, Bulgaria and Romania, especially.

Sixthly, as might be expected, the use of childcare has a major effect on whether women with young children are employed or not, though less on whether they are employed full-time or part-time. Moreover, they are more likely to be employed if they use formal care than if they rely on informal care alone, which lends weight to a policy of ensuring that every woman has reasonable and affordable access to formal childcare facilities.

Seventhly, employment rates tend to vary significantly with the level of education of women but are markedly higher for those who use childcare than those that do not irrespective of the level of education; they are relatively high for those with tertiary education even if they do not use childcare, whereas few women with only basic schooling are employed unless they are able to make use of childcare. Women with a low level of education are, therefore, particularly disadvantaged if affordable childcare is not available.

Concluding remarks

While there are marked variations in the proportion of people visiting doctors across the EU and the frequency with which they do so, with those in the EU12 tending to do so less than those in the EU15, this does not necessarily signify similar variations in unmet need for medical treatment. However, the proportion reporting such an unmet need also varies between Member States, being larger in the EU12 than the EU15, with a major reason being the cost of care and to a lesser extent, long waiting lists. The proportion reporting an unmet need is equally larger among those with low income and those identified as being materially deprived in both the EU12 and EU15, with again the cost of treatment being an important reason for this. This clearly suggests that there are significant differences in access to healthcare and in the affordability of care in particular, especially in the lower income countries, such as Bulgaria, Romania and Latvia, though also in Greece and Italy.

Access to public transport also varies with income and again more especially in the EU12 countries than the EU15, except Greece, Italy and Portugal. Access seems to be

more problematic in rural than areas and among older people of 65 and older than among those young than this.

Access to banking services equally tends to be less for those with low income (i.e. with income below the at-risk-of-poverty threshold) than others, again especially in the EU12 countries and in Greece and Italy in the EU15.

Access to childcare cannot be assessed directly from the data available (from the EU-SILC specifically) since the reason for parents not using childcare services is not investigated in the survey (and needs to be in order to throw light on the adequacy of services across the EU, given its importance for ensuring that women have equal opportunity to pursue a working career). Nevertheless, there is reasonably clear evidence from the data that in many countries women with young children have less access to childcare, and accordingly to paid employment, if they have low income and/or a low level of education.