

Childcare in Spain: Strategies and Socioeconomic Determinants



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With 39.6 % of children under three years of age at nursery school in the school year of 2018-2019, Spain exceeded the 33 % recommended by the European Commission in 2002. Notwithstanding this figure, childcare for this age range from 0 to 3 years is neither free of charge nor universal, and the formal public offer varies considerably across the country. Faced with this limited accessibility, families resort to various strategies based on the available resources in order to manage their childcare needs. However, the existing data on these schemes are meagre and do not represent all the options. Also lacking is information about how families shape their strategies and the factors that influence their adoption of them. In this number of *Perspectives Demogràfiques*, which is published by the Centre d'Estudis Demogràfics (CED) at the Autonomous University of Barcelona (UAB), we draw on the latest data available from the Spanish Fertility Survey (2018) to explore the sociodemographic profiles of mothers with children aged three years and under, and the childcare strategies they adopt.

The results suggest that managing childcare requires a combination of several options, thus making it relevant to speak of care strategies. Although formal care is a fundamental resource, it is not always able to respond fully to family needs. Meanwhile, the strategies adopted vary in accordance with the characteristics of mothers, for example their family situation, relationship with the labour market, and whether or not they are immigrants, all of which demonstrates the importance of adapting approaches to care in keeping with each specific situation.

Levels of formal childcare in Spain

In 2002, the European Commission urged member states to guarantee 33 % of childcare services for children aged from 0 to 3 years. This first appeal underscored the importance of early childhood education services as a crucial investment in child development. Almost twenty years later, access to these services once again came to the fore of the European Commission's policy agenda. Today, the European Child Guarantee situates access to child education and care services at the very core of its strategy for preventing and combatting child poverty and social exclusion.

In keeping with these recommendations, early childhood services in Spain, as part of the educational system, have been among the main policy commitments to support families and contribute to early childhood development. Enrolment rates (Figure 1) illustrate how participation in early childhood services has evolved since 2002 and demonstrate that Spain has surpassed the target recommended by the European Commission. Between 2002 and 2022, the figure for enrolment in nursery schools for one-year-olds increased from 9.9 % to 45.8 %, while that for two-year-olds rose from 21.7 % to 65.3 %. By contrast, the enrolment rate for children of less than a year has risen slowly, from 2.5 % in 2002 to 13.1 % in 2022. Finally, the data show that, despite the pandemic, the figures for children aged one and two years have recovered and even exceed pre-crisis levels.

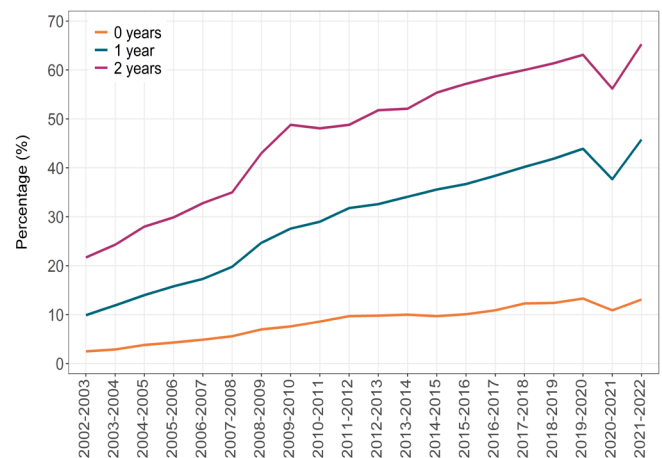


Figure 1. Net enrolment rates in early childhood education by school year: Spain, academic years 2002 –2003 and 2021 – 2022.

Source: Statistical Yearbook of Educational Data in Spain, Ministry of Education and Vocational Training (2024)

While the increase in nursery school enrolment rates for children aged from 0 to 3 years is a positive indicator of expansion of the services, the figures hide a more complex and diverse reality. The offer of early infant education varies considerably among Spain's Autonomous Communities because of inadequate regulation and a mixed public-private management model with a prominent presence of the latter type (León et al., 2022). The economic costs of this first phase also differ among the Autonomous Communities and municipalities (Navarro-Varas, 2022). All these variations give rise to considerable differences in access to and cost of available services.

Childcare strategies

As mentioned above, early childhood education services are a key resource for families. The supply of services influences the strategies adopted by families to satisfy their childcare needs. Moreover, limited possibilities outside the educational system also oblige them to turn to their own resources. In this situation, many families resort to care strategies that involve the use of more than one alternative.

Figure 2 shows some of the care alternatives adopted by mothers with children aged from 0 to 3 years, depending on their age and without taking into account frequency of use (number of days per week). The data are provided by the 2018 Spanish Fertility Survey and have been analysed using the classification of Juni et al (2024). As can be seen,

resort to a single childcare option is rare. Families tend to combine nursery school with other forms of care, such as grandparental care or help from other relatives, which draws attention to the need to turn to different strategies for meeting childcare needs.

Nevertheless, strategies vary in keeping with the characteristics of mothers, among them their employment situation, current partner relationship, and migration status (Spanish or foreign). For example, non-employed Spanish mothers tend more to take on exclusive care while single mothers are more likely to use the nursery school as the absence of a family network may mean that this option makes it easier for them to manage.

As children grow older, strategies change. In general, the use of nonparental types of care increases with the children's age. For children of less than one year, care by grandparents or other family members is the predominant choice for working and cohabiting mothers, while parental care is more frequent among non-employed mothers. For two-year-olds, the nursery school becomes the most common choice for many mothers, irrespective of their employment or family situation. If we consider diversity of the childcare strategies opted for in terms of intensity of use expressed as days per week, four large groups appear: "Parental care", in which no external strategies are used; "Formal care", including recurring use of nursery schools; "Informal care", including help from relatives or babysitters; and "Other", which brings together

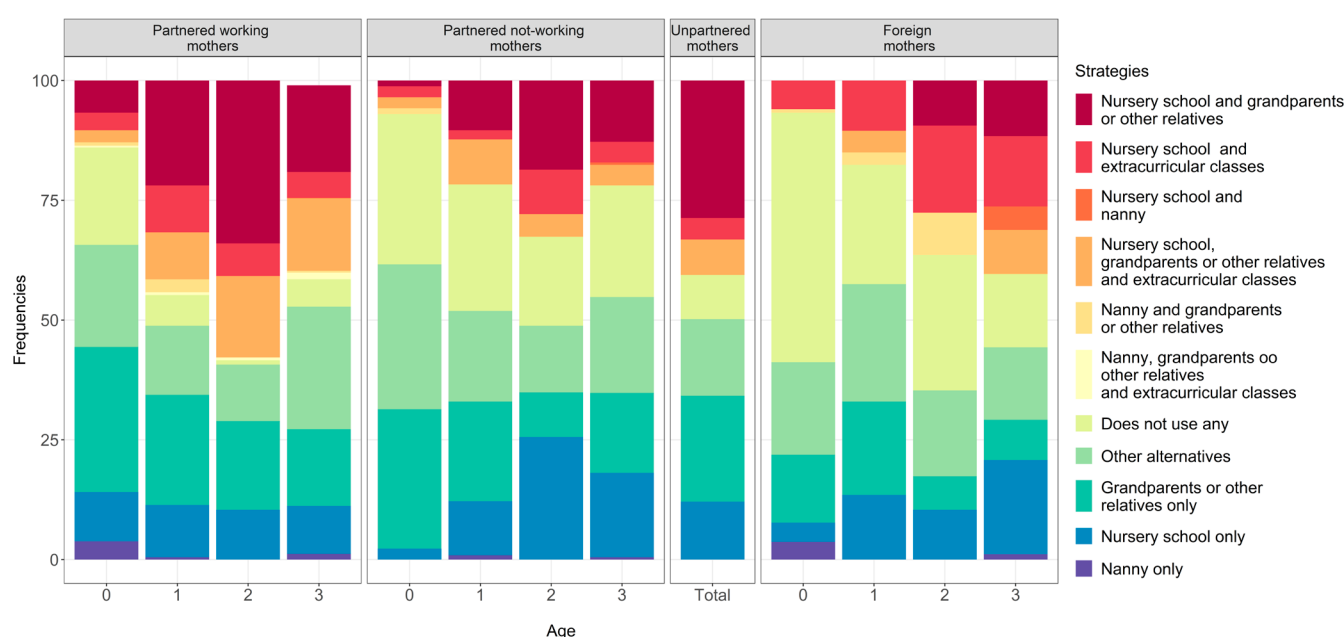


Figure 2. Care alternatives and combinations by age of children and maternal group (%), Spain, 2018.

Source: Author using data from the Spanish Fertility Survey 2018 (INE – National Statistics Institute)

a range of cases with low intensity of use. In more than half the cases (65.1 %), even people who turn to formal options (nursery school or out-of-school classes) as a main strategy combine two or more alternative options to cover their childcare needs. Conversely, most mothers who resort to informal care use only one alternative (71.3 %). This highlights the diversity of childcare decisions made by mothers, who adapt their strategies in keeping with their individual characteristics and specific family circumstances. Differences are also observed in the strategies employed according to the sociodemographic profiles of mothers (Figure 3). Foreign mothers are those most likely to use formal care (55.8 %), followed by single mothers (52.8 %), and employed cohabiting Spanish mothers (52.4 %). In comparison, only 45.2 % of non-employed cohabiting mothers use this resource, which suggests that the first three categories use the nursery school as a key strategy for meeting their needs.

On the other hand, informal care (for example by grandparents) is more frequent among single mothers (23.4 %) and employed cohabiting mothers (27.6 %). By contrast, nearly 15 % of foreign mothers turn to informal care as their most frequent strategy. This suggests that family resources are not always available or a viable alternative for all mothers who need childcare facilities. However, there are probably differences according to nationality and origin, but the available data do not permit in-depth exploration of this aspect of childcare.

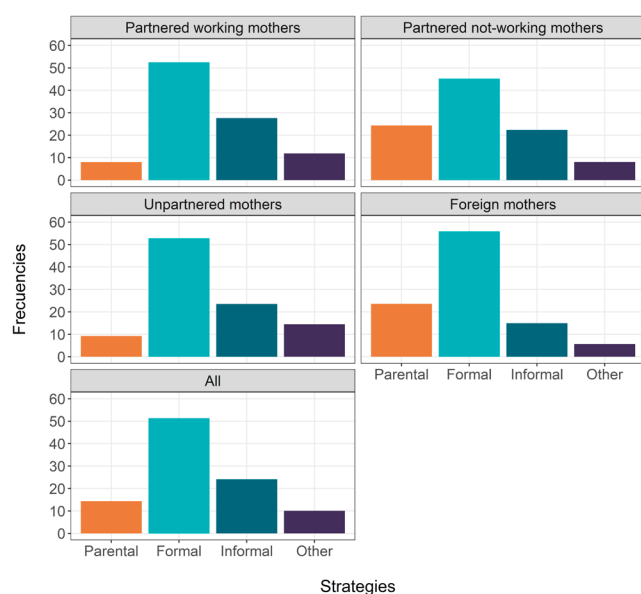


Figure 3. Childcare strategies by mother group, Spain, 2018.
Source: Author using data from the Spanish Fertility Survey 2018 (INE – National Statistics Institute)

Factors influencing strategies chosen by mothers

As noted above, speaking about childcare strategies means recognising that they are tailored to different family circumstances and, therefore, to the available resources. However, there are certain specific considerations involved in childcare decisions.

Figure 4 shows that the number of children in the household and income are determining factors in these decisions. Having two or more children is associated with greater use of formal childcare and less use of informal strategies. Among mothers with one child, the tendency to formal care is more prevalent among employed cohabiting mothers. In the cases of foreign mothers and non-employed cohabiting mothers, the probability of parental care is higher, especially with those who have two or more children.

Higher incomes correlate with less dependence on informal care and greater use of formal services, especially among employed cohabiting mothers. This can be interpreted as indicating how the costs of formal services represent a major barrier for low-income families, thus limiting their access to options within the educational system (Palomera, 2022).

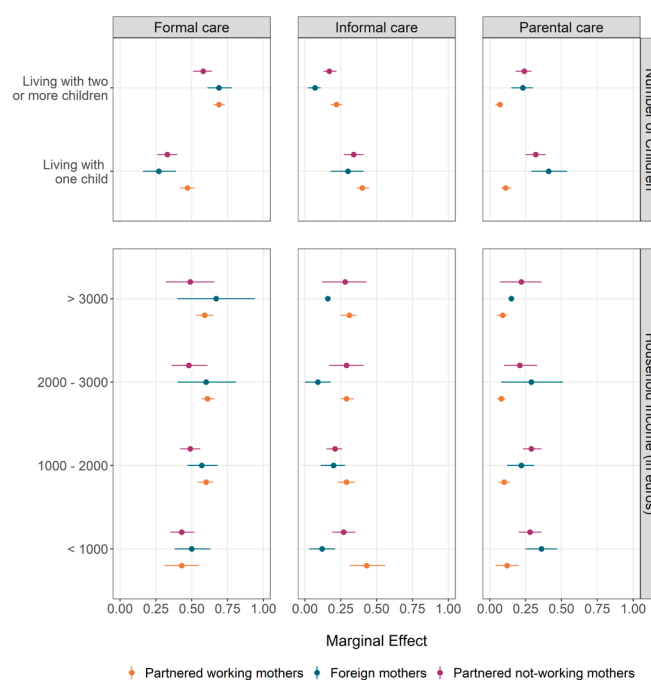


Figure 4. Marginal effects of multinomial logistic regression in the variable of number of children and family income by mother group, Spain, 2018.

Source: Author using data from the Spanish Fertility Survey 2018 (INE – National Statistics Institute)

Conclusions

Thanks to its array of questions on childcare strategies, data from the Spanish Fertility Survey 2018 yield figures which, on examination, show a highly diverse reality. Childcare for infants is far from attaining the degree of homogeneity observed in the case of older children. Childcare strategies are diverse and this variety is the result of unequal combinations of formal care, parental care, grandparental care. This mix of combinations varies in accordance with aspects such as place of birth, cohabitation or non-cohabitation status, employment situation, and socioeconomic profile, all of which constitute notable elements of variation. It is likely that the offer of formal care available in each territory is also one of these key factors but it has not been possible to include this element of information in the present analysis. The economic resources of families, availability of time, and the presence of relatives who are suitable caregivers influence childcare strategies. The data suggest that families organise their strategies according to the resources available to them. Numerous

studies emphasise the importance of education in the early years of life for the cognitive and non-cognitive development of children in later life. Longitudinal studies on the impact of different strategies on the health and performance of children would be necessary to assess whether the diversity demonstrated in the present study would have an impact in the long term. In any case, there is still much to be done if administrations are to ensure better provision of formal childcare.

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