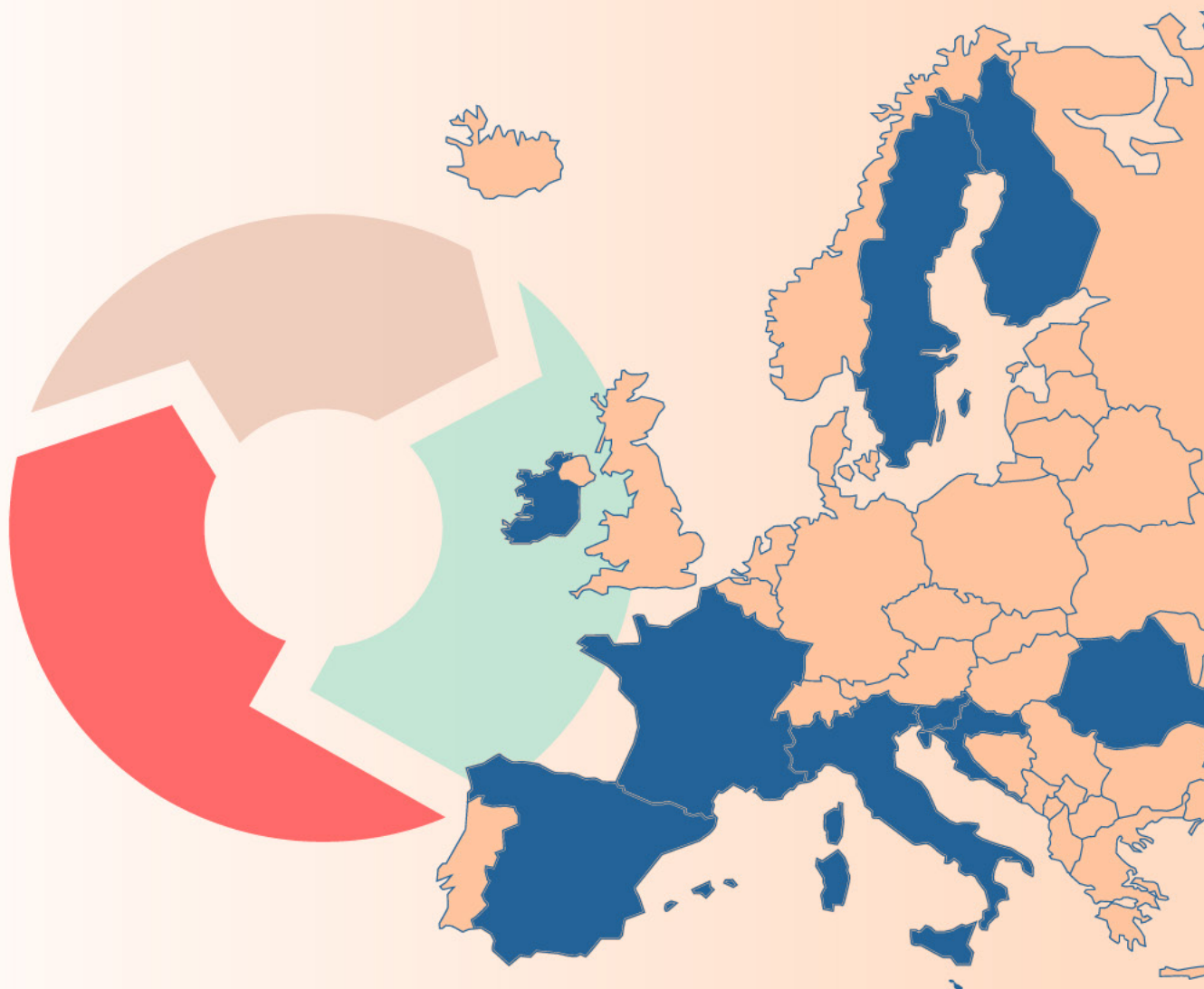


ESN Social Services Index 2023

Cross-country Analysis



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A map of Europe with several countries highlighted in a light orange color. The highlighted countries are Croatia, Finland, France, Ireland, Italy, Malta, Romania, Slovenia, Spain, and Sweden. The rest of the European continent is shown in a light gray color.

Abbreviations of Countries Covered:

Croatia - HR

Finland - FI

France - FR

Ireland - IE

Italy - IT

Malta - MT

Romania - RO

Slovenia - SI

Spain - ES

Sweden - SE

Table of contents

Introduction	6
Key Insights.....	7
Understanding Social Services Terminology	8
Social Services Policy and Legal Framework	10
Social Services Investment	13
Snapshot of Social Services Financing.....	14
Social Services Coverage	15
Long-Term Care.....	16
Support Services for People with Disabilities.....	19
Child Protection Services.....	20
Services for Female Victims of Violence.....	21
Minimum Income Schemes.....	22
Services for Homeless People.....	23
Country-specific Recommendations	25

About us

The European Social Network (ESN)

The European Social Network (ESN) represents the voice of public social services as employers, managers, funders, planners, providers, and inspectors of social services in Europe. ESN inspires Social Services Leaders to Improve the Lives of People in the Community through the development and exchange of knowledge to improve policy and practice in public social services, including all support and community-based services fighting poverty, promoting social inclusion and autonomy, child protection, protection of people with disabilities, care and support for older people, homeless people, and people and families in disadvantaged socio-economic situations.

About this report

This document is the cross-country analysis of the themes identified in the national info-sheets developed from the answers provided by ESN members to the Social Services Index questionnaire. The cross-country analysis includes a summary of cross-country findings, social services terminology, legislation, investment, and coverage along the structure of the national info-sheets.

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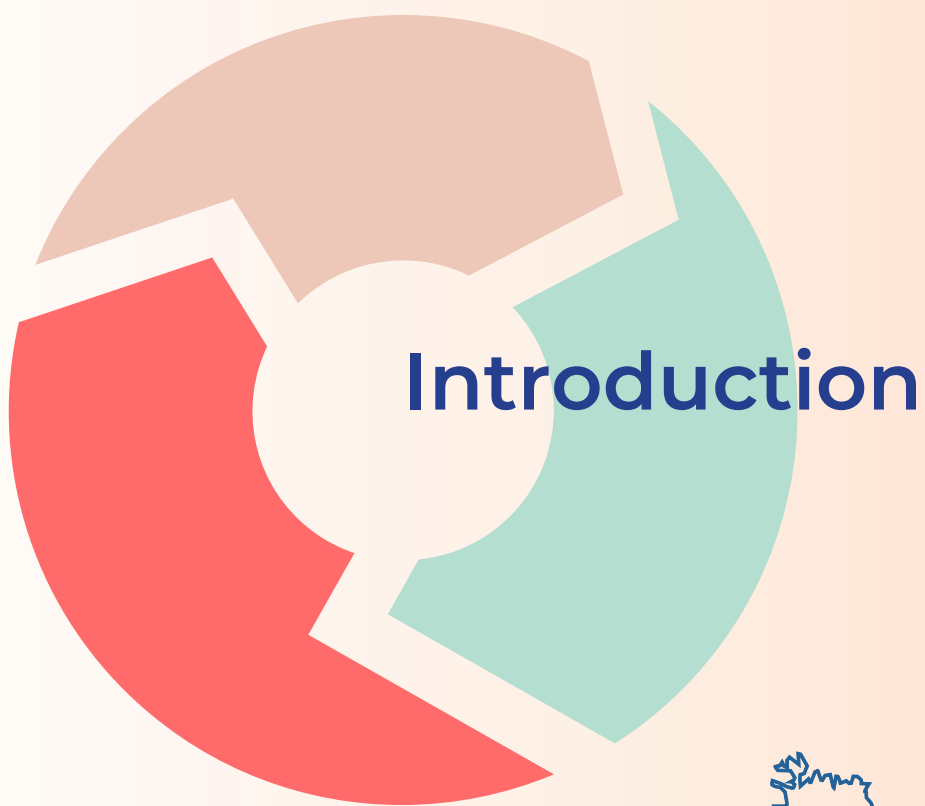
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Key Insights

Social Services Index to understand better social progress

The European Social Network (ESN) has been supporting the European Semester cycle of policy coordination between the European Commission and national governments for the past 10 years. Previous reports have covered progress in countries implementing children's services, long-term care services or support services for homeless people in line with implementation of the European Pillar of Social Rights principles.

However, we felt we needed to ensure the challenges we've identified in social services were better communicated to the European Commission so EU officers can use the information we provide when they draft reports and recommendations for national governments. The **European Social Services Index** fills a current gap since there was currently no such tool at European level and in many cases at national level, to answer enquiries about legislation, investment and coverage - three key pillars to understand better the situation of social services in EU countries.

We knew there were issues with different social services concepts and definitions within countries; this is why we have insisted in the importance of focusing social services on what they do and promote in relation to social justice, social inclusion and people's autonomy. We also identified how this translated into lack of information, different sets of information coming from multiple local, regional

and national sources, as well as information collected on different years. This means the work of putting together a European Index is complex and drawing comparisons across countries is even more challenging. But this process is necessary as it has helped us identify social services issues, which otherwise would go unnoticed.

For instance, we have identified an increase in the numbers of children in public care in several countries and wondered if this was due to improved reporting or an insufficient focus on prevention. In relation to supporting people in homelessness situations, there is a lack of investment in overarching prevention and social inclusion programmes, which leads to disjointed solutions with an over-reliance on shelters and expensive hotel accommodation at a very late stage. As for adult social care, we have seen a focus on moving towards a more person-centred, community and home-based approach over the past couple of years. However, the reality is that people's choice is still significantly constrained due to a lack of home care and telecare opportunities that would allow people to remain in their homes for longer. Likewise, there is a need to explore further professional roles like personal assistants and adult safeguarding within a stronger local ecosystem of care that includes a wide range of community supports.

All in all, having a **European Social Services Index** is essential for improving awareness, transparency, accountability, and efficiency in relation to social services both at European level and within countries. This tool will provide key information to help governments better support people, make informed decisions about resource allocation and policy development, and understand better social progress made in each country.



Alfonso Lara Montero
Chief Executive Officer
European Social Network

A full version of this article is available [here](#).



Understanding Social Services Terminology



There is no one common definition of **social services** across all EU countries, so it is useful instead to focus on their mission and objectives. In this vein, [the 2010 Council Conclusions on Social Services of General Interest 'At the heart of the European Social Model'](#) highlighted that social services differ from other services of general interest as they are "person-oriented, designed to respond to human vital needs, generally driven by the principle of solidarity, they contribute to safeguarding fundamental rights and human dignity, non-discrimination and to ensuring the creation of equal opportunities for all, enabling individuals to play a significant part in the economic and social life of the society." This section aims to establish a common definition and provide clarifications on specific terms used in the countries covered in this analysis.

ESN employs the term '**Social Services**' to refer to two main types. The first type consists of services that are put in place for groups, supporting the development of the person or their autonomy, and promoting conciliation of work and family life for relatives. The second type of social services consists of personalised support to safeguard the beneficiaries' fundamental rights and facilitate their social inclusion. Therefore, [social services](#) may include social welfare, social protection, social assistance, social care, social work, and personal social services.

Upon reviewing the responses to the Social Services Index questionnaire, ESN concludes that there are common objectives in relation

to the role of social services, for instance a shared focus on enhancing people's wellbeing and overall quality of life (FI, IT, RO, HR, MT).

More specifically, in **Italy**, social services are presented as a subsystem of social policies designed to provide resources to individuals in need, with a focus on improving their wellbeing and ensuring their fulfilment of citizenship rights.

Social Services in **Malta** encompass a wide range of services supporting individuals across life stages through various forms of assistance, including benefits and in-kind services.

In **Croatia**, the terms 'social assistance' and 'social benefits' are used to refer to cash benefits. Social services include activities, measures, and programmes aimed at preventing, identifying, and addressing the challenges faced by individuals and families, with the goal of enhancing their quality of life within the community.

Romania's social services comprise a range of measures and actions designed to address the social needs of individuals, families, or population groups. They aim to prevent and overcome situations of hardship, vulnerability, or dependence while preserving individual autonomy and protecting against social exclusion. Their overarching goal is to promote social inclusion and enhance the overall quality of life of the persons they support.

Lastly, in **Finland**, the term 'social services' has a more specific focus, primarily referring to social welfare services with the core emphasis on promoting wellbeing, ensuring social protection, and fulfilling legal obligations. Key components include home care, housing services, residential services, and support services designed for individuals with disabilities.



Social Services Policy and Legal Framework



This section examines the legal framework presented by the national respondents, for example if there is a specific social services law, and whether access to social services is acknowledged as a right in legislation. Respondents were also asked whether legislation is accompanied by a service portfolio and a strategic plan.

In several countries, there is a specific Social Services Act (MT, HR, SE, FI, SI, FR).

In **Romania**, [Law No. 292/2011](#) establishes the comprehensive framework for organising and financing the national social assistance system.

In **Spain**, the adoption of the first national social services law is pending.

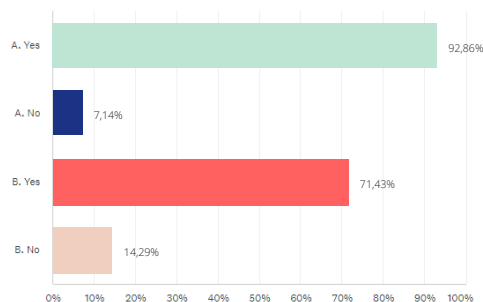
In **France**, 2015 legislation mandates the prefect and the president of the county council to collaboratively develop a plan aimed at enhancing public service accessibility, including social services. This stands as a guiding principle for both local and national public administrations, although it is not enforceable as a legal right.

National constitutions also play a pivotal role in shaping national social services (IT, IE). In **Italy**, the [Constitution](#) plays a key role in defining the essential levels of social services, which are applied at national, regional and local levels so that all citizens across different regions and municipalities have access to an essential level of services and support.

In **Ireland**, the [Constitution](#) includes a series of principles based on which various Acts have been enacted to promote equality and address the needs of disadvantaged people.

Based on the answers to the questionnaire, 90% of the countries surveyed have legislation that recognises access to social services as a right, whilst 70% have legislation that acknowledges the obligation to outline social services in a portfolio, catalogue or strategic plan. Of these, 78% have published a social services catalogue or portfolio. In **Spain**, the Ministry of Social Rights established a Social Services Catalogue in cooperation with the regions that are responsible for regulating social services. This catalogue outlines the available benefits and services in Spain in one single document, including common quality principles. In **Italy**, the '2021-2023 National Plan of Interventions and Social Services', which was developed by the Social Protection and Inclusion Network includes a National Social Plan and outlines the social services aimed at addressing poverty and support for people with dependency needs.

Does your country have a legislation that:
A. recognises access to social services as a right?
B. recognises the obligation to outline these services in a portfolio, a catalogue or a strategic plan?



Graph 1: Percentage of respondents whose country recognises access to social services or recognises the obligation to outline these services.

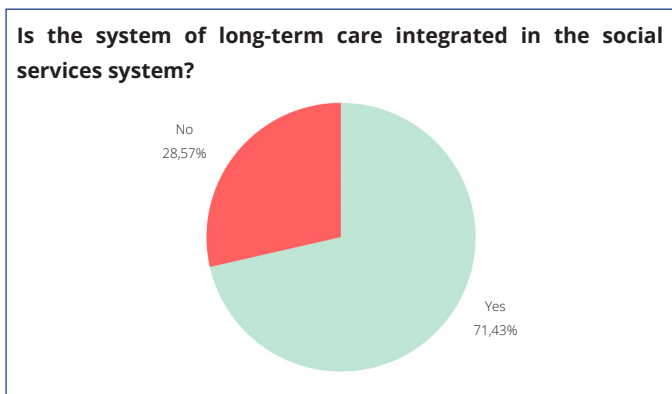
In other countries these plans are linked to specific social services. For example, in **Romania**, [Decision No. 1492/2022](#) led to the approval of a National Strategy on long-term care and active ageing for the period 2023–2030.

In **Sweden**, instead, municipalities have the autonomy to formulate their own service provision guidelines while adhering to legal requirements set out by the national government. Therefore, municipalities may refer to various guidelines, primarily issued by the National Board of Health and Social Welfare -a national agency that supports the national government in putting forward legislation and local authorities to implement legislation.



In **France**, six-year county council plans enhance service provision in underserved and inaccessible areas, outlining the involvement, operations, distribution, and targets of social and medical-social services. The professionals responsible for assessing the needs required are integrated within social services departments.

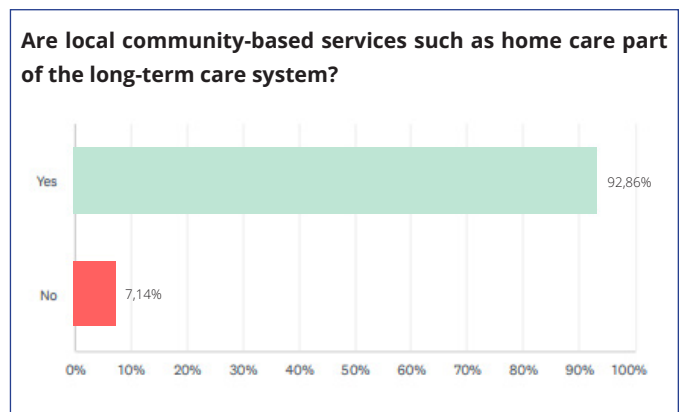
ESN asked respondents whether long-term care was integrated into their social services framework, and whilst for most of them this was the case, there is fragmentation within the way long-term care services are distributed across sectors.



Graph 2: Percentage of respondents whose country has integrated long-term care into their social services framework.

For instance, in **Slovenia** aspects related to long-term care are still spread across various acts in the health and social care sectors, so they are in the process of enacting specific legislation. In **Croatia**, the government is developing a national operational plan for the development of long-term care to define key priorities in this area.

Finally, ESN also asked whether local community-based services, such as home care, were integrated into the long-term care system. Except for Croatia, all countries confirmed this was the case.



Graph 3: Percentage of respondents whose country has integrated community-based services into their social services framework.



Social Services Investment



Snapshot of Social Services Financing

This section examines the budget allocated to social services per inhabitant, along with figures and percentages of expenditure on social services in relation to GDP.

Social Services are primarily funded by state budgets, and sometimes supplemented by regional and municipal budgets.

Data provided came from different sources and covered different years, so it was difficult to draw comparisons, but considerable discrepancies in social welfare spending between countries were identified, and within countries themselves as in Italy and Spain's regions.

Some countries, like Malta and Italy, provided data on expenditure per inhabitant, though different terminology connotations and different years of reference do not allow for direct comparison. In 2022, total spending in **Malta** on social services reached €564 million, equivalent to €1,083 per inhabitant. In 2019, expenditure in **Italy** on social protection totalled €525 billion, averaging €8,697 per inhabitant.

However, adequate funding remains a pressing concern, impacting both service coverage and quality. In 2022, funding for social services varied widely, ranging from 0.57% of GDP in **Croatia** to a significant 23.7% in **Sweden**.

There are differences in budget allocation and focus, with some emphasising social protection (IT, SI, IE, RO) while others prioritise social welfare services (SE, ES, HR, FI).











Ireland 	In 2024, the Department of Social Protection will allocate €2.3 billion to social protection from a €14 billion budget (16.4%).
Spain 	In Spain, social services are partly financed by the state and the regions. According to the Ministry for Social Rights, in 2021 €98,910,000 were budgeted for the development of community-based social services programmes in municipalities within Spanish regions. Regional and municipal budgets supplement this based on their respective obligations and local needs.
Croatia 	In 2022, spending on social services reached €166.5 million, equivalent to 2.12% of the Ministry of Labour's budget.
Malta 	In 2022, total consolidated public spending on social services amounted to €564,327,741, or €1,083 per inhabitant.
Sweden 	In 2022, Sweden allocated €24.1 billion to social welfare services, primarily directed into four key areas: individual and family services; services for older persons; services for persons with disabilities; financial assistance.
France 	In 2021, the expenditure on social and medical-social services in county councils amounted to €40.4 billion, marking a 3.1% increase compared to 2019.
Slovenia 	In 2021, Slovenia directed the highest share of government spending to social protection €9,335 million (or 17.9% of GDP), followed by health representing 8.1% of GDP (or €4,250 million).
Romania 	In 2021, Romania allocated 13.3% of GDP to social protection.
Finland 	In 2020, Finland invested €22.1 billion in healthcare and social welfare, with €9.3 billion (approximately 42%), specifically designated for social welfare services.
Italy 	In 2019, spending on social protection amounted to €525 billion, averaging €8,697 per person.

Table 1: Social services financing data per country. Source: Own creation.



Social Services Coverage



Social services coverage refers to the extent to which a population or community has access to and benefits from a range of social services designed to address their social needs and improve their individual and overall wellbeing.

This section analyses which social services provisions are in place in the following social services related areas:

- ratio of social workers in social services centres per inhabitant
- long-term care
- support services for persons with disabilities
- telecare
- child protection
- support services for women victims of domestic violence
- minimum income schemes
- services for homeless people.

In a number of instances there was a lack of information, or when information was provided it referred to different years, which makes it difficult to make direct comparisons; hence, the information provided below illustrates the coverage situation in relation to the countries for which national info-sheets were drafted.

Regarding the ratio of social workers in social services centers per inhabitant, **France** is the only country that provided data from 2021.

The data indicates that within French local authorities responsible for social and medical-social services, there were 121,500 employees. This workforce included 38,100 administrative and technical staff, 36,200 family assistants, and 31,900 social and educational workers.

Long-term Care

ESN analysed the number of persons who had been assessed as eligible for long-term care support and were receiving residential care, home care or telecare, as well as the number of persons who have not yet accessed support. For example, in **Spain** 1,739,020 persons were assessed as needing long-term care with an Individual Care Programme (PIA in Spanish) in 2018. Among them, 28.5% (496,400) require continuous support due to severe dependency needs, while 39% (681,668) need assistance multiple times a day for basic daily activities.

Respondents were also asked about the number of publicly financed places in residential care facilities and their percentage in relation to the total number of individuals assessed as eligible for long-term care support. Respondents were also asked about the number of older persons receiving home care and the number of hours per month (intensity) compared to the total number of persons assessed, and the number of publicly financed places at day centres in relation to the total number of persons aged 65 plus.

Insight into Residential Facilities

8 out of 10 countries (HR, IT, IE, MT, SE, FI, RO, FR) responded to the question about residential care facilities.

In **Ireland**, in 2023, over 460 registered nursing homes accommodated more than 25,000 residents, boasting occupancy rates at or above 90%. Projections indicate that an estimated 45,000 additional nursing home beds are expected to be required by 2031 to fulfil the current projected demand, based on population changes alone.



Malta, Sweden and Finland provided data relating to 2022. In **Malta**, 2,025 long-term care applications underwent assessment in 2022, and currently there are 3,564 publicly financed places in residential care facilities, all fully occupied.

In **Sweden**, 82,000 older people were in residential care in 2022, but the National Board of Health and Welfare does not centrally track long-term care assessments, or the number of ineligible applications. Each municipality handles the data separately.

For example, **Stockholm** reviewed 3,011 residential care applications, finding 399, or 13%, ineligible. Of those, 102 appealed, and 30, or 29%, were approved by courts. One of the most informative indicators is the comparison between the number of individuals assessed as eligible for residential or home care and the number of those who have not accessed care within three months. Municipalities are obliged to provide services promptly after a decision is made, and not exceeding a three-month period. Despite legal obligations, 4,474 individuals lacked residential care access within this period.

The inspection authority (IVO) tracks individuals waiting over three months for placements.

In **Finland**, similarly, there is no nationally tracked data regarding the percentage of persons who have been assessed as having the right to access care but have not yet accessed it. In 2022, 35,142 individuals aged 75+ lived in sheltered housing while 1,606 individuals aged 75+ were in institutional care. Sheltered housing options, with daytime or 24-hour assistance, have largely replaced institutional care. The primary difference is the contractual arrangement—sheltered housing involves rental or ownership agreements.

In **Italy**, the population of older people requiring long-term care has been rising, totalling 2.9 million. Among them, 1.5 million receive allowances or multiple services; 287,328 live in residential facilities, while 294,063 receive support in semi-residential settings.

In **Croatia**, there are 29,414 publicly financed places in residential care facilities, accounting for 3.68% of persons aged 65+, far lower than the 5% EU average.

Insight into Day Centres

Some respondents provided data on the number of places available, others on the number of persons assessed in need of a place at a day centre, others on those regularly attending day centres.

For example, in **Slovenia** in 2023, there were 753 available places in day centres for older people. In 2022, **Romania** provided 166 publicly financed places in day centres.

In **Sweden**, data from 2022 revealed that a small percentage of 0.5% of the 65+ population or 10,015 people attended publicly financed active ageing centres, tailored to their specific needs. Moreover, 16,375 individuals were assessed as requiring a place in day centres, accounting for less than 1% of the age group.

Similarly in **Malta**, in 2022, of a total population of 100,821 persons aged 65+, 1,713 individuals (or 1.7% of this age group) attended publicly financed active ageing centres; while in **Croatia** in 2021, 1,320 adults used day centres regularly.

Finally, in **France**, there were 19,842 day care places, constituting approximately 2.7% of the overall number of long-term care places available in facilities for older people in 2019.

Insight into Home Care

The number of hours of home care varies significantly between countries and the level of dependency. Data show significant differences between countries that may also account for home care hours either per week or per month. For instance, in **Italy** on average each person receives 1.33 hours per month of home care, compared to 19 hours per month in **Finland**. In **Ireland**, people receiving home care typically get around 8 hours per week, whilst the amount increases to 34 hours per week in **Sweden**.

In **Slovenia**, each eligible person could receive up to 20 hours of weekly home care in 2023; while in **Spain**, 324,581 older people (approximately 18.66% of the 65+ population) receive home care, with varying weekly hours: 16.3 hours for moderate dependency, 38 hours for considerable dependency, and 58.8 hours for severe dependency needs.

In **Malta**, home care data is categorised by support type, totalling 1,133,841 interventions in 2022. Identifying exact beneficiaries is challenging due to multiple support types.

Meanwhile, in **Sweden**, 148,000 older persons received an average of 34.2 hours of weekly home care in 2022. However, 292 people faced a three-month delay in accessing this support.

In **Ireland**, at the end of 2022, over 5,000 older people awaited home care assistants, marking a 10% increase since the beginning of the year. Currently, those receiving home care typically get around 8 hours of care per week.

In **Croatia**, according to 2021 data, on average 18 hours of home care per month are covered by the state.

In **Italy**, according to 2020 data, 911,102 older people, or 32% of the population of older people, benefit from home care. On average, each person receives 16 hours of home care per year, translating to approximately 1.33 hours per month.

In **France**, the number of hours of support specified in the plans increases according to the level of dependency. For the least dependent beneficiaries, it stands at 0.7 hours per day, while for the most dependent, it increases to 2.1 hours per day.

Lastly in **Finland**, on average, home care beneficiaries receive about 19 hours per month.



A key aspect of being cared for at home is care implemented remotely through **technology**. Only 5 countries answered this question, which shows it is still an emerging service.

In **Sweden**, a total of 278,965 older persons benefited from telecare services, while in **Malta**, 6,190 persons registered for telecare services in 2023.

Similarly in **Spain**, 359,475 persons were being provided with telecare services in 2023. This figure amounts to 20.7% of the total number of persons who had been assessed as being in need of long-term care.

In **Ireland**, as of 2021, 1 in 5 persons had experienced telecare.

In **France**, there are currently more than 500,000 older people (or 10 % of the older population) who subscribe to a tele-care service. These support systems help them to stay in their own homes.

Support Services for People with Disabilities

In our analysis of support services for people with disabilities, we looked at the number of beneficiaries receiving long-term care support in comparison to the total number of people with disabilities. We also assessed the capacity of residential facilities for people with disabilities in relation to the overall population of people with disabilities. Furthermore, we examined the number of home care hours among people with disabilities and the availability of publicly financed places at day centres.

Not all countries have a register of people with disabilities, but they all have data concerning decisions made in relation to services for people with disabilities. For example, **Sweden** and **Finland** do not have a register, but in Sweden, the current estimated number of people with disabilities receiving support is approximately 59,267 (including 1,173 people under 18).

Furthermore, in **Sweden**, a total of 29,469 people with disabilities receive support services in their own homes, including 106 children, helping them to be more active and take part in social activities. A total of 15,061 people with disabilities receive home care, including 123 children.

In **Finland**, data from 2021 reveal 182,897 disability service decisions made, encompassing various services, but this figure may be bigger since according to Finland's living conditions statistics, about 12.9% (approximately 580,000 people) aged 16 and above experience severe activity limitations.

In **Ireland**, there are currently circa 8,400 persons with disabilities living in 1,300 disability centres registered with the Health Information and Quality Authority, which is the independent authority that safeguards health and social care standards.

In **Spain**, a 2020 Survey by the National Statistics Institute revealed that 4.38 million people living at home reported a disability, of whom 505,400 received home care services. Also in 2020, in **Italy**, there were 12,630 residential facilities for people with disabilities, collectively providing 411,992 available beds.

In **Romania**, 72% of people with disabilities in need of care live in residential facilities, 87% of which cater for people with disabilities. Additionally, 3,140 individuals reside in 29 neuropsychiatric rehabilitation centres, accounting for 19.13% of the total available facilities.

In **Malta** in 2023, 26,194 people with disabilities are registered by the Commission for the Rights of Persons with Disabilities. The Support Agency for People with Disabilities (Aġenzija Support) offers support through the operation of 11 residential homes/apartments and 11-day centres, in addition to other services available in different locations across Malta.

Finally, there is no data available in **Croatia** or **Slovenia** regarding the number of people with disabilities in residential care.

Child Protection Services

ESN examined both the number and the percentage of family foster care placements in relation to the total number of children placed in alternative care.

In **Slovenia**, in 2023, 547 children with emotional and behavioural disorders were in alternative residential care, while 769 children were in foster care with 550 foster parents.

In 2022, **Malta** recorded 589 child placements in alternative care, with 51% in family foster care involving 207 foster carers. Meanwhile, **Romania** reported 42,029 children in the child protection system, 11,629 in residential services, and 30,400 in foster care. **Ireland** had 5,836 children in public care: 89% in foster care, 7.4% in residential care, and 3.2% in other placements. Among those in foster care, 61.9% were in general foster care by Tusla (the child and family agency), 28.8% in relative foster care, and 9.3% in non-statutory fostering agencies.



In 2021, **Finland** had 17,582 children aged 0-17 in public care, with 42% placed in family foster care and 58% in residential care. There is concern about the increasing number of children, particularly teenagers, entering alternative care for the past three decades. This trend indicates that preventive services and other community-based support for children and families have not been effective enough, and there has been insufficient investment in these crucial services.

Sweden recorded 26,200 children under public care, with 18,700 in foster care, constituting 71% of the total. Meanwhile, **Croatia** had 2,671 children under state care, with 1,980 placed in foster families, comprising 74% of those in care.

Spain observed a decrease in the number of children in the public child protection system from 50,272 in 2019 to 49,171 in 2020 but the respondent did not provide information about the percentage of them in residential and family foster care.

In **Italy**, in 2019, 27,608 children aged 0-17 were in public care. Among them, 13,555 were in foster care, while 14,053 lived in different residential facilities.

Finally in **France**, 40% of children under public care live with foster families.

Services for Female Victims of Violence

The assessment of services for female victims of violence requested information about:

- The number of places available at centres for female victims of domestic violence compared to the total number of women.
- The number of women receiving support from domestic violence services compared to the total number of women.

This analysis provides insight into the capacity and use of services aimed at helping women affected by domestic violence albeit

with differences in focus; for instance, some countries focused only on women, others on women and children.

In 2023, **France** aimed at having 11,000 accommodation places for female victims of violence. Combating violence against women is one of the first pillars of the Interministerial Plan for Equality between Women and Men 2023-2027. This plan provides for the creation of 460 social worker posts in the police and to support women victims of violence.

In 2022, there were 144 refuge places for women and children in **Ireland**. 39 frontline services managed over 50,000 helpline calls annually. Moreover, 11,000 women and 3,500 children received direct support, while 1,500 women and 3,000 children found temporary safe accommodation. In 2021, there were five specific centres with 41 places supporting women victims of domestic violence, ranging from 3 to 14 places each.

Finland's 'family places' for female victims of domestic violence accommodated 2,573 women in 2020, with 230 spaces. This represents a small fraction compared to the total female population of 2,810,493.

In **Italy**, there were 350 centres focused on supporting women facing domestic violence and abuse. Also, in 2020, 54,609 women reached out to these centres, and 30,360 initiated a request for support.

Romania, in 2020, recorded 784 accommodation places for women affected by domestic violence. Of these, 711 were in licensed centres exclusively designed for domestic violence victims, while 73 were in maternity centres, supporting mothers and children.

In 2019, **Sweden** had 282 centres providing sheltered accommodation for women affected by violence. These centres offered a total of 1,653 spaces for women and 2,385 spaces for children.

Lastly, in **Croatia**, 25 shelters accommodate up to 357 women. Since 2019, there have



been one-year projects involving counselling centres specific for victims of violence and sexual violence.

Minimum Income Schemes

In the analysis of Minimum Income Schemes, the following measures were examined:

- The percentage of beneficiaries among the total number of individuals living in poverty.
- The average amount received per beneficiary and the percentage this amount represents in relation to the average household income.

Nine out of ten countries (HR, ES, IE, FI, IT, RO, SE, SI, FR) responded to this question and emphasised the importance of providing social assistance to persons in need of income support.

In 2023, in **Italy**, the introduction of the new minimum income scheme led to a substan-

tial reduction in the number of eligible recipients. The change involves categorising individuals in need in two distinct groups: those who are employable and those who are not. As a result, approximately 400,000 families, accounting for 39% of the existing beneficiaries, will no longer meet the criteria for this benefit. This adjustment will impact roughly 615,000 individuals, equivalent to one in four current recipients.

ESN received 2022 data from four countries: Slovenia, Romania, Sweden, and Ireland. In **Slovenia**, 42% of the 251,000 people living below the poverty line received social assistance and income support, equalling 105,179 beneficiaries. They received an average of €355 monthly for social assistance, constituting 38.7% of the average household income. Income support granted an average of €165 per beneficiary monthly, making up 18% of the average income per household member.

In **Sweden**, the average monthly benefit paid to households amounted to 8,995 SEK (about €752). About 43% of households, including

both adults and children, received support for over ten months on average. In **Ireland**, the Basic Supplementary Welfare Allowance offers a primary weekly allowance for those lacking sufficient income to cover theirs and their families' needs, with a maximum personal rate of €218 per week.

In **Finland**, the social assistance framework consists of three main categories: primary social assistance, supplementary social assistance, and preventive social assistance. The average benefit amount is approximately €1,021, which represents 30% of the average household income of €2,968 per month; the average benefit amount equates to 29.7%, which is approximately €1,021.

Meanwhile, in **Spain**, in 202, 645,317 persons received minimum income benefits. The average basic amount stood at €490.81.

In **Croatia**, the number of social assistance beneficiaries is 51,454, or 1.2% of the population and the guaranteed minimum income benefit for households cannot surpass 150% of the gross minimum wage amount. The guaranteed minimum benefit is €132.72 per month. The exact figure varies depending on diverse family characteristics and the individual circumstances of each family member.

Finally, in **France**, 4.09 million people (6% of the population) are covered by the minimum income scheme (RSA in French) The average amount for beneficiary is €860 per month.

Services for Homeless People

ESN examined key data related to the number of accommodation places for homeless people per 100,000 inhabitants and the availability of separate housing support allowances in the countries.

Sweden and Slovenia are the only countries reporting on the number of accommodation places for homeless people per 100,000 inhabitants, whereas housing support allowances appear to be available in several countries.



In **Ireland** in 2023, 8,369 adults used local authority-managed emergency accommodation. Ireland also provides a social housing support benefit administered by all Local Authorities.

In 2022, **Finland** recorded 3,686 homeless persons, which was 262 fewer than in 2021. 70% were temporarily staying with friends or relatives, 17% were residing in dormitories, hostels, or similar facilities, and 13% were living outdoors or in overnight shelters. **Sweden** had 17,500 persons in long-term housing arrangements organised by Social Services, estimating around 143 persons per 100,000 inhabitants in this situation. Housing allowance (bostadsbidrag) and housing supplement (bostadstillägg) are financial supports designed to assist with the payment of the monthly rent or housing fees.

In **Slovenia**, in 2022, there were 352 accommodation places for homeless persons, equivalent to 16.7 per 100,000 inhabitants. **Spain** recorded a homeless rate of 8.6%,



revealing significant regional disparities. Support centres for homeless persons increased by 51%, rising from 675 in 2010 to 1,019 by 2022. Out of these centres, 16.4% cater exclusively to homeless immigrants, and 7% specialise in aiding women affected by gender-based violence.

Based on data from 2021, **Italy** recorded 463,294 homeless persons. Homeless persons are entitled to seek assistance through the minimum income support scheme (Reddito di Cittadinanza). However, many people living below the poverty line and experiencing homelessness struggle to access it due to challenges in the application process or proving having been a resident for 10 years.

In **Malta**, various housing support allowances include provisions for Affordable Housing, Social Housing, Protected Leases, Private Residential Leases Unit, and Repairs and Adaptations. Presently, there are six shelters offering 110 beds for the entire population.

Finally, in **Croatia**, there are 13 shelters for homeless people, accommodating up to 349 persons. Yet, it's believed that the true number of homeless individuals is considerably higher. In **France**, there are 145,000 emergency accommodation places.



Country-specific Recommendations



Country-specific Recommendations

Croatia



Improve social services quality

- social services legal, policy and practice framework;
- a common methodology for calculating the prices of social services;
- a common information system for the recording, monitoring, analysis and exchange of data on users and social services;
- strengthen the human potential of social services providers.

Finland



Effectively preventing the risks of poverty and social exclusion necessitates a substantial **increase in basic benefits** for vulnerable persons and **linking them with social services and social work** to effectively prevent the risk of poverty and social exclusion. By aligning these vital components, a more comprehensive safety net and holistic approach can be offered to those in need, ultimately promoting their social inclusion and well-being.

France



Build an inclusive care model rooted in people centric with integrated services

This model embodies addressing diverse needs by surpassing institutional barriers and prioritising collaboration. By transcending these silos and emphasising collaboration, it holds the potential to cultivate more efficient, equitable, and compassionate systems, designed to authentically meet society's multifaceted needs. However, its successful implementation demands a joint commitment from policymakers, service providers, and communities, requiring fundamental restructuring and a collaborative culture for ongoing responsiveness to evolving needs.

Ireland



Develop specialist mental health support within community care

Designated mental health inpatient beds and specialised community teams for areas such as ADHD, autism, eating disorders, and pregnant and postnatal women need to be established nationally. This issue is particularly acute for young adults transferring from extensive children and adolescents' mental health services to adult services.

Italy



Amend legislation to ensure all persons in situation of poverty access income support

Legislation to combat poverty should be guided by the principle that everyone and every household, regardless of composition, in a situation of poverty, can request it. Therefore, Decree n. 48/2023, introduced in May 2023, should be amended so that the 'allowance for inclusion' is available for all types of households in possession of the required subjective economic requirements, instead of categorising people as employable or not. Looking at poverty only from an employment point of view does not contribute to supporting someone holistically to be fully included in society.

Malta



Promote Foster Care as the Primary Placement Option for Children in Alternative Care

Put in place a national collaboration effort across all agencies working on child protection to increase the number of children under care orders who live in family-friendly placements, with foster care as the primary option.

Romania



Establish counselling and support centres

Together with housing support, put in place counselling and support centres to effectively address the multifaceted needs of persons impacted by domestic violence.

Slovenia



Improving the situation of foster parents and promoting foster care is vital for the well-being of children in need of stable and loving homes.

Spain



The **future Social Services Law** should include a common minimum catalogue of social services, a national ethics social services committee, consider proposing ratios of professionals per inhabitant and acknowledging the role of community-based social workers. The legislation should be accompanied by the right type of funding distributed in a similar percentage of 33% across the 3 levels in line with previous commitments in the 1980s.

Sweden



Introduce new social services legislation for improved child welfare

It is imperative that the proposed new social services legislation is introduced as soon as possible. There is a need for reform in legislation to clearly support the shift **in focus to early intervention, preventive measures, and the provision of services** without extensive childcare investigations when deemed applicable. The transition needs **to receive adequate financial funding**. There is also a need to ensure that legislation covering secrecy and confidentiality allows relevant collaboration between social services, the police, and schools in the best interests of the child.

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