



Denmark

Tackling child poverty and promoting the social inclusion of children

A Study of National Policies

**Steffen Bohni Nielsen, Daniel Schwartz
Bojsen and Rasmus Biering-Sørensen**
Rambøll Management

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1. Introduction

Non-government experts for the European Commission, Dr Steffen Bohni Nielsen, senior consultant, Daniel Schwartz Bojsen and consultant Rasmus Biering-Sørensen of Rambøll Management — have prepared this report for the European Commission.

The report is a continuation of the expert reports for which Rambøll Management was contracted in 2003-05 and 2006. In the prior reports, a number of policies and issues have already been outlined and discussed.

This report deals with poverty and social inclusion among children and youngsters in Denmark. First of all, it would be appropriate to distinguish between poverty and social inclusion. Poverty is defined in this report as limited financial and material resources while social inclusion concerns a more comprehensive range of social problems, related to poverty and social resources in general (Larsen, 2005: 5).

In accordance with the EU definition, children are defined in this report as aged between 0 and 17 years. This is also consistent with the age of majority in Denmark, thereby limiting problems with comparability of data.

If possible and where relevant, the data in this report is subdivided into different subgroups as requested in the report guidelines — e.g. age, regions, gender, other EU Member States. In addition, poverty and social exclusion for ethnic minorities in Denmark will be dealt with throughout the report as it appears to be a substantial problem in Denmark.

1.1. Structure of the report

The content of the report is as follows:

In section 2 we present a summary of the report.

Section 3 explores the extent and nature of child poverty in Denmark on a range of different subjects, e.g. income, health, education and employment status of families. Development of key trends is also tracked and assessed.

The overall framework for coordinating and developing policies is outlined in section 4. This is done with respect to the i) institutional setting, ii) policy framework and iii) objectives and targets of some major initiatives.

In section 5 we present an analysis of the main policies on poverty and social inclusion in Denmark. Specifically, side effects of legislation in other areas are explored as to how they interfere with social area legislation, thereby reducing the effectiveness of the Danish welfare model.

Section 6 covers some important arrangements for monitoring the implementation of social area legislation and initiatives.

Finally, the report presents a bibliography with important Danish sources on the subject of child poverty and wellbeing.

2. Summary

In this report, Rambøll Management provides a summary of the extent and nature of poverty and social exclusion among children and youth, the overall framework dealing with the issues and the arrangements for monitoring their implementation. The report also assesses the extent to which the overall policy framework succeeds in combating poverty and social exclusion among children and youth.

Section 3 deals with the nature and extent of poverty and social exclusion among children and youngsters. The summary finds that very few children can be considered poor in an absolute sense, while a larger number of children consider themselves poor compared to their peers. A special concern is with children from immigrant and refugee families who seem to have a higher degree of poverty and related problems than the rest of the population.

Denmark has extensive policies for vulnerable children and youth. Around 1.1 % of all children are placed in care — both family care and institutions — and around 10 % of all families with children receive special social aid ¹ from the Government. While a large number of children and youth receive special aid, analysis shows that their life chances as adults are still considerably lower than their peer's.

Section 4 describes the overall policy framework for dealing with poverty and social exclusion among children and youth. Denmark has an extensive policy framework for dealing with poverty and social exclusion. The policies consist of a strong universal element — free schooling, healthcare, etc. — and many policies specifically targeted at poor and vulnerable families. The specific policies range from economic support to daycare institutions, etc., to placement of children and families in special institutions.

The Danish Government has launched new policy initiatives both aiming at helping child families in general and at children at risk. Initiatives promoting better health and use of sports activities for children at risk are also being implemented.

Section 5 assesses the extent to which the policy framework effectively deals with combating poverty and social exclusion among children and youth. The general framework is considered solid and adequate. However, three areas of problems are identified. Firstly, immigration and employment policies are seen to have negative side effects by creating more poverty and social exclusion. Secondly, the implementation of social legislation in municipalities is lacking, especially in smaller ones. Thirdly, the policies do not successfully combat social exclusion for the very vulnerable families.

Section 6 covers a range of different arrangements for monitoring the implementation and status of social area legislation. The relevant ministries are responsible for monitoring development in the various policy areas at national level, whereas the municipalities are in charge of the actual implementation. The Parliament has legislative oversight with the different ministries and may require reviews from ministers as part of parliamentary debate. The system is considered strong on the quality and quantity of data, as much data based on individual social security numbers is accessible. However, the extent to which legislation and policies are measured and evaluated systematically, is not considered sufficient. Historically, too little focus has been put on making legislation and policies clearly measurable and outcome oriented, and too little focus in research

¹ These numbers do not include economic support for daycare, etc. The number only accounts for help that people are specially referred to.

has been put on documenting 'what works for whom'. However, recent developments in both research communities and ministries point to an increased focus on these areas in the coming years.

3. Extent and nature of child poverty and wellbeing in Denmark

The purpose of this section is to describe and analyse the extent, nature, trends and causes of child poverty and wellbeing in Denmark on a range of issues, e.g. income, education, health and access to childcare services.

3.1. Income

Poverty is multidimensional in nature and therefore this section will deal with income poverty (both in an absolute and relative sense), the more diffuse concept of deprivation and finally children's own views on poverty.

3.1.1. Income poverty

Using the EU definition of relative poverty (less than 60 % of median income), 7.7 % of Danish children lived in poverty in 2002. This is a slight but insignificant increase from 2001, where the proportion living in poverty was 7.6 %. Using a measure of 50 % of median income, 3.4 % were living in poverty in 2002, which is the same as in 2001 (Hussain, 2004: 13). In real numbers, this amounts to 40 100 children in Denmark living in poverty in 2002.

Table 3-1. Relative poverty among children of Danes, immigrants and descendants of immigrants (50 % median)

Year	Danes	Immigrants	Descendants of immigrants
1984	3.3	17.1	10.0
1985	3.0	21.9	10.7
1986	3.0	23.9	10.8
1987	2.9	19.4	9.5
1988	2.9	19.9	8.2
1989	2.9	19.1	8.5
1990	2.7	18.6	7.8
1991	2.5	19.5	8.0
1992	2.5	19.1	7.1
1993	2.5	17.9	7.6
1994	2.0	15.5	6.0
1995	2.1	29.9	7.3
1996	2.1	19.4	7.1
1997	2.1	16.6	7.3
1998	2.3	17.3	7.2
1999	2.4	16.0	6.9
2000	2.5	17.3	6.7
2001	2.6	18.5	7.2

Source: Hussain, 2004.

As Table 3-1 shows, relative poverty among children of ethnic Danes has decreased since 1984, but has increased somewhat again since 1994. For children of immigrants, the poverty rate has been fluctuating in the period from 1984 to 2001 and is today at a slightly higher rate than in 1984. For children of descendants of immigrants, the rate has fallen from 1984 until 2001 but has not decreased since the early 1990s. As the numbers suggest, the risk of relative poverty is greatly enhanced for immigrants and descendants, even though descendants seem to be doing somewhat better than immigrants.

Poverty in Denmark is quite unevenly distributed among the different age groups: 10 % of infants (aged 0-1) live in poverty — the same is the case for only 5 % of the 16 to 17-year-olds. Geographically, child poverty is very unevenly distributed in Denmark. Hence, children living in the municipalities with the highest poverty rates (14.7 to 15.9 %) have a five times higher risk of living in poverty than children in municipalities with low poverty rates (3.1 to 3.7 %) (Hussain and Sloth, 2004: 6).

Persistence of poverty appears to be a problem in Denmark. The longer a child has been living in poverty, the more likely it is that this child will continue to live in poverty. Children who have been living in poverty for one year have a 45 % risk of living in poverty the year after. A child with a four-year history of poverty has a 70 % risk of living in poverty the year after (Hussain and Sloth, 2004: 6).

As mentioned above, 7.7 % of Danish children were living in poverty in 2002, according to the EU definition. But almost one third of all Danish children have at some point during their childhood experienced poverty. Though poverty may not have been persistent for most of these children, a brief experience with poverty seems to be a widespread phenomenon for many Danish children (Hussain and Sloth, 2004: 6).

The small increase since 1994 in the proportion of children living in relative poverty is not likely to be a sign of increase in absolute poverty in Denmark. This is due to the fact that using relative poverty thresholds, absolute income for all groups in a country may rise but if economic inequality increases at the same time, more people may fall below the relative poverty threshold. A reason for the rising inequality in Denmark may be explained by the rise in housing and share prices, pushing more people below a sharply rising poverty line (Hussain, 2004: 43).

3.1.2. Deprivation — objective indicators of daily life consequences of poverty

Another measure of poverty, as opposed to income poverty, is deprivation, defined here as the enforced lack of a combination of items depicting material living conditions (Guio and Museux, 2006: 19). A deprivation approach to poverty implies measuring indicators of possession of different physical items or social options, e.g. car, television, furniture, certain housing conditions, educational possessions or the ability to participate in certain social activities (Bradshaw et al., 2006). Deprivation approaches thus capture different aspects of poverty than income approaches to poverty ².

² Deprivation approaches to poverty also carry some methodological problems when compared to income poverty approaches. See Hussain (2003: 2) and Guio and Museux (2006: 2) for discussions on the pros and cons of different poverty measures, particularly deprivation and income poverty approaches.

A large survey within the European countries points to Denmark scoring low on the deprivation index used, indicating that deprivation is low in Denmark when compared to other European countries (Hussain, 2003). This study measures deprivation on a number of possessions of physical items, living conditions and social options in children's daily life.

Country	1994	1995	1996	1997	1998
Germany *	3.18	2.67	3.10	*	*
Denmark	2.25	1.91	1.83	1.73	1.72
Netherlands	1.89	1.86	1.90	1.80	1.65
Belgium	2.97	3.00	2.88	2.72	2.63
Luxembourg *	2.34	2.30	2.31	*	*
France	3.78	3.41	3.41	3.25	3.31
United Kingdom *	4.64	4.22	3.87	*	*
Ireland	3.88	3.35	3.45	3.01	2.82
Italy	4.11	4.17	3.96	3.91	3.81
Greece	6.76	6.54	7.62	6.31	5.71
Spain	5.90	5.46	5.24	5.02	4.46
Portugal	8.43	8.26	8.01	7.92	7.56
<i>Average</i>	4.18	3.93	3.97	3.97	3.74

Source: Hussain 2004.
Note: * Figures from these countries are from 1996.

As Table 3-2 shows, Denmark ranked as the country where children were the second least deprived in both 1994 and 1998 among the 12 selected countries, with only the Netherlands scoring slightly lower. It is notable that most countries have improved their score from 1996 to 1998, i.e. scoring lower on the index. A few countries retained their score from 1996 to 1998; none have exacerbated during the four-year period.

The study also suggests that children in all countries and on all dimensions lack the indexed items more frequently than adults. This is probably ascribable to the fact that children — more often than adults — have a situation of deprivation enforced upon them, since children are seldom able to make dramatic changes to their life situations.

Like income poverty, age differences exist in that younger children are more exposed to deprivation than are older children and adults. Persistence of deprivation is, to slightly varying degrees, a problem in the countries in question. Children experiencing deprivation³ in 1994 had a risk of also being deprived in 1998 of between 52.4 and 68.3 %. Children in Denmark had the smallest four-year deprivation persistence (of 52.4 %) of all 12 countries (Hussain, 2002: 15).

A recent 2006 study of deprivation in the enlarged EU points to the fact that deprivation is not really comparable between rich and poor countries. Even the 'poorest' of the 'rich' countries face lower deprivation than the 'richest' of the 'poor' countries (Guio and Museux, 2006: 16).

³ A person is defined as being deprived when among the upper 25 % of the most deprived (Hussain, 2002: 15).

3.1.3. Subjective poverty — children's views about poverty

The case can be made that poverty in an absolute sense does not exist in Denmark (Larsen, 2004). Poverty thus becomes an issue of subjective or felt poverty and relative deprivation. An extensive study on children's view on poverty was carried out in 2004 using a large array of interviews (Sloth, 2004). The results point towards a number of issues concerning poverty among children in Denmark.

Most of the poor children participating in the study feel deprived when compared to their peers — and the study reveals that they do compare themselves to their peers. Children from poor families generally have fewer options for doing the same things as their friends and classmates when it comes to costly activities, e.g. going to the movies or on trips. Also, participation in recreational activities like sports is of limited availability to these children. In addition, some children from poor homes do not like to bring friends home due to lack of space and activities at their homes. All in all, this is likely to be a social restraint for children living in poverty (Sloth, 2004: 3).

It is notable however, that there is a difference between these children on how they experience poverty. Some parents are more able to 'protect' the children from the consequences of poverty, typically through the enactment of prioritising and similar strategies (Sloth, 2004: 56).

3.1.4. Causes of income poverty in Denmark — groups at particular risk

A number of determinants for income poverty exist in the case of Denmark. Table 3-3 shows how poverty is distributed in the population according to provider status, number of children in household, ethnicity, educational background/level and employment status. Besides the 60 % poverty threshold, the 50 % threshold and the percentage receiving unemployment benefit are reported in the table.

The table below highlights some groups in Denmark particular at risk of poverty — the table accordingly indicates some of the structural conditions that contribute to poverty. According to recent studies, two groups in particular seem to be associated with high levels of poverty: female single providers and ethnic minorities (Larsen, 2005: 5).

Table 3-3. Characteristics of children, their parents or family. Separate for income levels (2002)

		Single provider (in %)	Number of children	Ethnic Minority (in %)	Have an education (in %)	Unemployment (in %)
Unemployment Benefit	No	13.4	2.1	5.6	86.2	6.5
	Yes	31.2	2.5	40.8	44.3	25.6
Relative poverty, 50 % median	No	14.7	2.1	9.0	82.3	7.8
	Yes	36.9	2.6	26.9	58.6	15.1
Relative poverty, 60 % median	No	13.4	2.1	8.1	83.6	7.5
	Yes	39.2	2.8	28.3	56.4	17.1

First, and unsurprisingly, unemployed people are more exposed to poverty than people in jobs. A much larger proportion of people without jobs live below the poverty threshold (17.1 % as compared to only 7.5 % of the population as a whole).

Second, single providers are overrepresented among people living in poverty in Denmark. Whereas only 13.4 % of the population are single providers, 31.2 % of people living in poverty are single providers. Thirdly, people without education are almost twice as exposed to poverty as people possessing an education.

Third, as mentioned above in section 3.1.1., ethnic minorities are at much greater risk of poverty than ethnic Danes. Both measured as percentage living in 60 % relative poverty and people receiving unemployment benefit, the numbers are much higher than for the Danish population as a whole — 28.3 and 40.8 % respectively compared to only 8.1 and 5.6 % for ethnic Danes.

Finally, the number of children in families living in poverty is markedly higher than for the rest of the Danish population. Whether this is a cause or a consequence of poverty is debatable, but in any case it adds to the number of children living in poverty.

It should be noted that poverty among the full-time employed in Denmark is virtually nonexistent. This has to do with the fact that the minimum income for unskilled work puts you over the 50 % median. Only single providers with many children will be considered poor (Danish Economic Council, 2006). However, a number of self-employed entrepreneurs live in poverty. This is specially the case for immigrants who are self-employed as they constitute 20 % of all self-employed living in poverty. The Council for Socially Marginalised People estimates that 10 % of people living in poverty are employed (Rådet for socialt udsatte, 2003). These numbers probably include part-time workers and single providers.

3.2. Employment status of families and implications of unemployment

As already mentioned, unemployment is a profound source of poverty in Denmark. Aside from contributing to relative poverty, unemployment has a number of negative side effects on the lives of children living in jobless homes. Living in a family with unemployment thus entails a number of risk factors for children.

Having at least one unemployed parent markedly enhances the risk of poverty and deprivation for a child (Hussain, 2004: 13). Growing up in a household with no employed adults is closely connected with child deprivation — especially if unemployment is persistent (Unicef, 2007: 8). As shown in section 3.1.3., child deprivation is associated with different problems.

For the parents, unemployment is associated with increased risks in relation to mental illnesses, alcohol abuse, etc., in addition to the problems of social exclusion that often accompany unemployment — Danish National Institute of Social Research — SFI, 1997: 45ff; Holstein and Madsen, 2003: 18). Since the wellbeing and resources of the parents influence the wellbeing of children, unemployment has a range of negative consequences for the children of unemployed parents, including increased risks of:

- criminal behaviour;
- health problems;

- low self-esteem and lack of ambition;
- social and learning problems in school.

In addition, unemployment is unevenly distributed among the population, meaning that relatively few children bear almost all the consequences of unemployment. A study gives evidence that most of the children had never experienced their father being unemployed while they were growing up, while 14 % of the children had seen their father jobless for at least 25 % of the time during their childhood (Christoffersen, 2003: 10). This adds to the negative social heritage problems of having unemployed parents.

3.3. Health

This section deals with health among infants, measured by infant mortality rate and birth weight among infants as well as health among children aged 1-17 years measured on a number of different indicators taken from a study of Danish school children. Finally, the relationship between health and socioeconomic background will be dealt with.

3.3.1. Health among infants (aged one and under)

Obviously, the infant mortality rate is an important indicator of the health of infants in a country. Statistics show a slightly decreasing trend in infant mortality rates in Denmark between 1995 and 2003. Infant mortality has dropped from 5.1 to 4.4 deaths per 1 000 infants in that period.

Birth weight is another important measure of health, since a low weight can result from risk-related lifestyles (e.g. smoking) and the mother's health. In addition, low birth weight is associated with later cognitive and physical development problems for the child (Bradshaw et al., 2006: 145). Between 1973 and 2003 the birth weight of children has been steadily increasing until 1994, where the average birth weight reached 3 500 g. Since 1994, the average birth weight of children has been stable at 3 500-3 550 g.

3.3.2. Health among children and youngsters (aged 1-17)

Between 1984 and 2002, an extensive study has been carried out, focusing on the objective and subjective health of Danish children at school age (Due and Holstein, 2003).

The study shows that most children consider themselves to be in good physical shape and also generally rate their wellbeing high. On the other hand, the study also reveals a drop in subjective health and wellbeing in the period between 1984 and 2003 (Due and Holstein, 2003: 10). Subjective wellbeing is generally lower for girls than boys.

A fairly large proportion (22.4 %) of the children in the study report symptoms of physical illness on a regular basis. Again, girls report this problem more frequently than boys. The display of symptoms appears to be stable in the period from 1984 to 2002 though.

Obesity among children appears to be a growing problem among Danish children. According to internationally accepted definitions, 10.5 % of Danish school children were obese in 1998 and this proportion had grown to 13.9 % in 2002. The body mass index (BMI) of Danish children has thus increased by 0.5 in this period.

The study also looks into health-related behaviour among Danish school children. The proportion of smokers has been decreasing since the late 1950s, where more than half of 11 to 15-year-old children smoked on a daily basis. In 2002, 14 % of boys and 16 % of girls smoked at the age of 15. When it comes to alcohol, Danish children are among the most frequent and heavy users in Europe. This may pose a future problem, since studies show that early starters are likely to have a high consumption of alcohol later in life (Due and Holstein, 2003: 31).

3.3.3. Children's health and socioeconomic inequality

Several studies of Danish children show considerable differences in children's health according to socioeconomic status (Due and Holstein, 2003; Holstein and Madsen, 2003). Children from families with low socioeconomic status thus show a higher exposure to obesity, mortality, injuries, lack of physical exercise as well as display a generally higher proportion of symptoms of illnesses. This situation appears to be the case in most countries though.

3.4. Education

An extensive statistical study on the educational attainment of children in Denmark with regard to a number of background factors was carried out in 2002 (Deding and Hussain, 2002). In particular, the intergenerational transmission from parents to children was covered in the study. In general, three characteristics seem to be the case in Denmark:

- Danish children generally attain higher education than their parents.
- Intergenerational transmission of (dis-)advantages still exists.
- A fairly large number of young Danes obtain no further education after primary school, making them vulnerable to unemployment.

First of all, parent's own education is a decisive factor in the educational attainment and choices of children. Children of lesser educated parents on average attain less education than children of higher educated parents. The mother's education appears to be more influential than the education of the father (Deding and Hussain, 2002: 18).

Also, home income is positively related to education: The higher the income of parents, the higher the education of children. In addition and probably related to income, unemployment of parents is negatively associated with children's educational achievement. Also, negative influences from other living conditions like family breaks and family size are found.

Subgroup differences in educational attainment in Denmark are found with respect to gender and ethnicity (Larsen, 2004: 139, Deding and Hussain, 2002: 24). Gender differences exist in that parent's education seem to be influential on boys' educational attainment but not influential on girls' educational attainment. However, living conditions (e.g. home income, family size and parent's unemployment) play a more decisive role in the educational attainment of girls.

The educational level of immigrants and their children is low compared to ethnic Danes. It is notable though, that there are differences between various ethnic groups in Denmark on how the children perform educationally compared to their parents. For instance, children of Turkish origin seem to inherit their parent's educational level, whereas children of Pakistani origin are able to attain a relatively higher educational level than their parents (Deding and Hussain, 2002: 6).

A special problem relates to young people getting no qualifying education. According to the Danish Ministry of Education, 16 % of a cohort of young people do not complete a basic/primary education and 25 % never obtain a qualifying education (Jensen and Jensen, 2005: 9). This is a problem since this group of uneducated people are more vulnerable to unemployment and the accompanying social problems. Besides, the affected group of youngsters often come from socially vulnerable homes, thereby contributing to a negative social heritage.

3.5. Children's rights

The rights of children in Denmark are overseen by the Danish National Council for Children. Denmark has signed the UN Convention on the Rights of the Child and is therefore obliged to implement the principles and spirit of the convention into Danish legislation. However, according to the Danish National Council for Children, this has not yet been done thoroughly and systematically (Danish National Council for Children, 2005). In a report to the UN Committee of the Rights of the Child, the council concludes that 'Seen in an international perspective, Danish children are among the most privileged children in the world — especially as regards material goods, social welfare, education and cultural rights.' (Danish National Council for Children, 2005). They do, however, point to a number of areas where the rights of children are not following the UN convention. These are in particular:

- the lack of formal rights to complain for children in all areas. While the social area and upper secondary education have clear and institutionalised methods for complaining, many other areas do not;
- the lack of knowledge about the UN Convention on the Rights of the Child among children;
- the lack of specific knowledge on the extent of sexual abuse and violence against children;
- not implementing 'the child's best interest' clearly enough in all relevant policies and legislation;
- the lack of a strong overall framework for insuring that the convention is implemented thoroughly in all legislation and policies.

(Danish National Council for Children, 2005)

3.6. Housing

Housing standards are related to poverty and social exclusion in a number of ways. First, rising standards in the housing stock in the period from 1976 to 2000 account for a considerably lower mortality among people affected by poverty and/or social exclusion according to a study by Larsen (2004b). That is, rising housing standards lead to rising health standards in the population. Obviously, the health of children in affected families is also positively affected by rising housing standards.

Second, the smaller the income of a family, the smaller the house they live in (Glavind, 2004). This may not be surprising, but according to several studies, housing size affects children in a number of ways. As shown in the above section, the educational attainment of children is dependent on housing standards and sizes. The smaller the house they live in, the more difficult it becomes for children to do their homework in peace and quiet.

The physical and social surroundings of home also affect children. Specifically, research from other countries suggests that ghettos⁴ reduce children's educational and employment attainments. Not much research on the subject has been carried out in Denmark but the few existing studies suggest that children growing up in ghettos are negatively affected (Heinesen, 1999: 9; Sikandar, 2005: 45). The number of children living in ghettos in Denmark is not known.

3.7. Safe and stable upbringing environment

The environment provided by the parents and closest family is an important aspect of a safe and stable childhood. A stable family life and continuity in the daily care of children can thus be considered important elements in a safe upbringing⁵. Viewed over a three-year period, most children have had a childhood in relatively stable surroundings. In that period, 90 % of children have lived in a stable family, with either both parents (88 %) or a single provider (2 %). Of the remaining 10 %, 8 % have lived in two different families during the three years, while 2 % have lived in three or more different families. This is either because the parents have split up or a single parent has found a new partner in the period.

Another important aspect of family life that influences childhood is the health of the parents. During a three-year period, two thirds of the mothers and three quarters of the fathers have had neither mental nor physical problems. This means that during the three-year period:

- about half of all children have lived in families with no health problems at all;
- one third has had one parent with good health;
- the remaining 12 % have lived in families where both parents have had health problems during the three years. Including single providers with health problems, this amounts to 16 % in total.

These 16 % of children live at high risk of growing up in homes with few resources and therefore less support for the children. This is the case if the physical problems are chronic or long-term or if mental problems are serious, e.g. depression.

⁴ i.e. high concentration in a housing area of people with certain social or ethnic characteristics.

⁵ SFI, <http://www.sfi.dk/sw1355.asp#rammer>

3.8. Access to childcare and other social services

In Denmark, municipalities provide a relatively wide range of basic welfare services, including childcare. This contrasts with many other European countries where daycare is organised and provided, not only by municipalities but also, for instance, by employers and private providers. Since many families have two full-time employed parents, publicly provided daycare for children becomes an important element in the lives of many families.

As is the case with most other public services in Denmark, children's daycare is encompassed by the Danish universal approach to welfare services. This implies that a childcare guarantee exists: all parents are entitled to daycare for their children after a certain period of time (Rostgaard, 2004: 19). In practice though, this guarantee is not always completely fulfilled by municipalities, due to lack of capacity. This is only a problem in some larger cities though (Hestbæk and Christoffersen, 2002: 10).

The universal welfare model also implies that childcare is supposed to be financially accessible to all Danish parents. For this reason, parent's self-payment of daycare is dependent on income. For the lowest income groups, self-payment is non-existent, while self-payment for the highest income groups is 100 % (Hansen, 2006: 1). On average, the self-payment of Danish parents amounts to 27 % of the actual net expenses of daycare (Rostgaard, 2004: 23).

3.8.1. *Different standards and inequality in daycare access*

Recently, the debate in Denmark has focused on the possibility of parents to buy additional services at the public daycare. Customising daycare services to the needs of individual children and parents carry benefits but also drawbacks. More specifically, the idea of buying additional services has triggered a discussion about rising inequality in access to childcare in Denmark. Buying additional services will most likely result in different standards and rising inequality in childcare — which contrasts with the Danish universal welfare model.

3.8.2. *Daycare services as a breaker of negative social heritage?*

Daycare services as breakers of negative social heritage are receiving growing attention in Denmark. The intention is that daycare services can compensate for the lack of parental resources in some children's homes, thereby neutralising the effect of intergenerational transmission of disadvantages (Jensen et al., 2003: 6).

More specifically, daycare services can facilitate the identification and help of children at risk by giving both children and parents extra support. Recent research in the field suggests that pedagogic interventions aimed at children at risk, should have a different focus and content. Currently, about 41 % of daycare services in Denmark have specific efforts/programmes directed at helping children at risk to break the negative social heritage (SFI, 2005: 6).

3.9. Groups at particular risk

This section deals with groups at particular risk and their associated problems as well as measures to combat these problems.

3.9.1. Evidence on children in institutional care and foster care

In Denmark, approximately 14 000 children are placed in care, which is around 1.1 % of all children from 0-18. Approximately 1 200 (9 %) of these placements are done without the consent of parents.

Special assistance at home is given to 15 900 children (e.g. a personal adviser, economic support) while 40 000 families are aided every year. This means that around 1 in 10 families with children receive special social services. The total sum of special aid for children at risk is approximately EUR 1.3 billion.

Children who are placed in care have a much lower chance of getting an education, full-time employment and a high income compared to their peers. In general, the risk of crime and violence during adolescence is significantly higher for children placed in care than for others (Christoffersen, 2003). There is very little evidence to tell us what the outcomes of placement are, compared to support at home.

3.9.2. Extreme situations for children at risk

Violence against children

The exact level of violence against children in Denmark has been at the centre of a 2004 report (Christensen and Pedersen, 2004) by the SFI. In this analysis, social workers estimate that 0.7 children out of every 1 000 are involved in cases with violence. Health visitors, on the other hand, estimate that a greater number of children are subject to physical abuse. They estimate that 1 out of 100 is subject to physical abuse. This leads researchers to estimate the amount of violence against children to be between 0.7 and 10 children out of 1 000, which seems to correlate well with in-depth interviews with social workers.

Another study (Klit et al., 2002) indicates that 0.21 % of children have been victims of violence (including physical, mental and sexual violence). This amounts to 2 000 to 3 000 cases in total, while the figures for physical violence are 600 to 1 000 cases per year. An estimated 1 % of infants are victims of violence.

Sexual abuse

A 2002 study of 6 000 9th graders in Denmark conducted by Karin Helweg-Larsen, the National Institute of Public Health, and Helmer Bøving Larsen, the Department of Psychology at the University of Copenhagen, is the first Danish study of young people's experiences with sexual abuse in childhood. The study shows that 8 % of girls and 2 % of boys have had sexual

experiences with someone who was at least 5 years older than themselves, and that among these, 3 % of girls and 1 % of boys consider the experience to be sexual abuse.

The study also shows that there is a close correlation between early sexual experiences and serious problems relating to wellbeing. Children who have difficulty talking to their parents about problems, who have witnessed violence in their homes or who have grown up with other adults than their biological parents are at greater risk of experiencing sexual abuse.

Regarding younger children who attend daycare institutions and their risk of being sexually abused by persons outside the family, a study conducted by Else Christensen, from the SFI, shows that the problem appears to be limited. The study is based on a longitudinal study carried out by the SFI that follows 6 000 children born in the autumn of 1995. According to Else Christensen, there is still room for improvement when it comes to a uniform response by the daycare institutions to suspected sexual abuse by an employee.

Furthermore, Else Christensen's article indicates that approximately one fourth of the mothers felt that their family did not receive the help they believed they needed in connection with the suspicion of sexual abuse in their child's daycare institution. Else Christensen finds this to be a relatively high figure and believes that there is a need for closer cooperation ⁶.

High level of drug abuse

There are no exact figures concerning the number of drug abusers under 18. For the over 18 age group, 13 316 people were in drug abuse treatment in 2005. Around 85 % of these started using marijuana at an age below 18, 48 % started using ecstasy before reaching 18, while around one third stated using cocaine and heroin before reaching 18 ⁷.

Different analyses have estimated that around 3 000 children and youngsters are drug abusers in Denmark, which amounts to around 2.5 out of every 1 000 children and youngsters (Zeeberg, 2000). The abuse has a negative influence on the children's personal development and often serves as a problem-solving tool and self-medication. The most commonly used drugs are alcohol, marijuana, speed and ecstasy, while cocaine, heroin and medicine are not used as often (Zeeberg, 2000).

Homelessness

Homelessness among children is generally not considered a significant problem in Denmark. A report estimates that around 300 children can be considered homeless (Stax, 2000). The author concludes that the fact that youth homelessness is not a major socio-political concern in Denmark is not in itself a guarantee that the problem does not exist. Some institutions in the major cities deal with children who have run away from home; however the notion of street children is generally not seen as a major social problem (Stax, 2000).

⁶ http://www.sfi.dk/graphics/SFI/Pdf/Rapporter/2006/seksuelle_overgreb_mod_boern.pdf

⁷ http://www.sst.dk/publ/tidsskrifter/nyetal/pdf/2006/13_06.pdf

Crime

Youth crime has risen somewhat in Denmark in the last years. In 1995, 5 455 convictions were given to youngsters between 15 and 17, while the number increased to 6 752 in 2005. The largest increase has been in crimes concerning violence, with an increase around 20 % (Justitsministeriets forskningsenhed, 2007). In relative terms the number of convictions has risen from 29 per 1 000 children in 1995 to 35 per 1 000 children in 2005. Since 2001, a special 'youth sanction' that is a two-year program for youth offenders has been developed as an alternative for children who have committed crimes. From 2001 to 2006, 148 children have been sentenced to a youth sanction.

Abduction and trafficking of children

Generally, abductions and trafficking of children are not seen as a major socio-political problem in Denmark. Some political debate deals with the issue of immigrant parents sending their children back to their home countries for 're-schooling' or marriage against their will. No Danish research to the author's knowledge can substantiate the extent to which this happens in Denmark.

3.10. Social mobility in Denmark and other countries

Negative intergenerational transmission of disadvantages is a problem (an issue) in Denmark, as it is in most other countries. A way of measuring intergenerational transmission of disadvantages is by looking at social mobility, i.e. the extent to which children are able to attain different social positions than their parents. Social mobility can be measured on a variety of different parameters. Most often, social mobility is measured on income mobility and educational mobility. Obviously, these are connected but can be analysed separately.

As is apparent from section 3, negative social heritage and social mobility remain an issue in many areas. Two points of interest are to be made as regards social mobility.

- First, both income mobility and educational mobility in Denmark (and in the other Nordic countries) is greater than in most other countries (Corak, 2006: 30, Munk, 2003: 64, Blanden et al., 2005: 6). The high degree of social mobility in the Nordic countries can be attributed to the well-consolidated welfare states, with extensive redistribution of income and provision of cheap, free and easily accessible quality childcare and education. These factors are likely to promote both income and educational mobility.
- Second, despite the relatively high degree of social mobility in Denmark, numerous studies show that intergenerational transmission of disadvantages remains an issue in Denmark. Especially with regards to culture and education, inequality seems to be a problem, whereas economic mobility and inequality appear to be a smaller problem today (Munk, 2003; SFI, 2005).

A large number of initiatives have been put into action to combat negative social heritage in Denmark. Recently, these initiatives have been evaluated by the Ministry of Social Affairs (Svendsen, 2007) and other studies (SFI, 2005) also point to certain areas of future attention for new initiatives for combating negative social heritage.

- There is a need for directing initiatives even more at groups at particular risk, targeting both parents and children. Ethnic minorities appear in particular to be one risk group.
- Initiatives should aim more at levelling inequalities concerning cultural and educational competencies.
- Initiatives should focus on the different institutional settings where children spend their daily life, e.g. primary daycare and school. Especially kindergartens, as an arena for combating negative social heritage, should be given more attention in the future.
- Given the widespread use of recreational and leisure time activities in Denmark, these activities could usefully serve as a platform for promoting greater social mobility for particular groups at risk (the poor, ethnic minorities, etc.).

The conclusions of this and other reports have led to a number of policy initiatives dealing with combating negative social heritage and social exclusion. These initiatives will be described in the following sections.

4. Overall framework for coordinating and developing policies

This section covers the institutional setup and framework for policies in the area of poverty and social inclusion as well as the targets and objectives of specific policies.

4.1. Institutional setting

The Government has the overall responsibility for all welfare-related policies, i.e. social, family, employment, health, education, integration and culture policies, etc. As of 1 January 2007, the regions are responsible for implementing the main part of the health policy, i.e. the treatment of diseases, while the local authorities are responsible for the prevention of diseases. The local authorities are responsible for the implementation of significant parts of the social, education, integration, culture and employment policies. However, the Government is responsible for implementing youth education programmes.

The Danish Parliament determines the overall political objectives. However, local authorities and regions continue to implement policies locally, and basic general education, daycare facilities for children, the framing of special support for children and young people, sports facilities, health services, etc., may therefore vary somewhat among the 98 local authority areas and the five regions.

Policy measures are normally determined by allocating resources to pursue certain objectives, such as basic general education for all children, or a fixed amount for a particular purpose, e.g. DKK 2 billion for better quality in daycare facilities. Normally, there are no quantitative targets for the outcome which is often more difficult to control than resource input. In this connection, it should be noted that the actual implementation of the policy takes place at local level in the local authority areas. The quality of the public services and whether the outcome is satisfactory is subject to ongoing debate, however.

In some contexts, the Government requires local authorities to draw up local policies for an action area. In connection with the reform on children placed in care, all local authorities have been ordered to draw up a children's policy with the purpose of ensuring the connection between the general and preventive measures and the measures targeted at children and young people with special needs.

It is also the responsibility of local authorities to create the framework for cultural and recreational activities. As a principal rule, the local authorities make sports facilities available to the citizens. But typically, sports associations operated by volunteers will run sports clubs and provide sports facilities for children and young people. The same applies to sports facilities for disadvantaged children and young people.

4.2. Policy framework

The Danish welfare system is organised with a view to ensuring reasonable living conditions for all social groups. Combating child poverty forms part of this overall strategy. The policy is based on two pillars: income-compensating benefits and services.

There are various income-compensating benefits for persons who, due to old age, disability, unemployment, sickness, maternity, education, etc., are unable to earn an income from work. Some of these benefits will have increased rates for persons with an obligation to maintain children. In addition, special cash allowances are granted to families with dependent children as described below. Furthermore, the housing benefit scheme is designed to support low or modest-income families with dependent children.

The services include a number of general benefits available to all children independently of the parent's income and conditions, such as hospital and medical treatment, dental care and schooling. Other general offers include daycare facilities for children aged six and under and school-based daycare facilities for children of school age, but here parents have to cover 25 % of the operating expenses. The amount payable by the parents is income-related, making the scheme free for low-income families. Furthermore, there are social offers for children with particular problems, e.g. disabilities or behavioural problems, or children from families with severe social problems such as abuse, violence, etc., and there are special social offers children who have lost one or both of their parents.

Other policy areas are also intended to provide good opportunities for all, including children from low-income families. The housing policy is organised with a view to ensuring the availability of good and healthy housing, including a large social housing sector that accounts for almost 20 % of the housing. The cultural and sports policies also aim at providing opportunities for all children.

Some elaboration on individual policy areas

Social assistance cash benefits for providers are approximately one third higher than the benefits for non-providers aged over 25. Furthermore, families with heavy family responsibilities are eligible for special support. For newly arrived persons, the support is provided as an initial help with a lower maintenance rate for adults than the ordinary cash benefits, but includes an extra allowance for each child (maximum 2 children).

Child benefits are granted to all families with children. In 2006, child benefit amounted to DKK 13 640 per child aged 0-2 years, DKK 12 324 per child aged 3-6 years and DKK 9 696 per child aged 7-17 per year. In addition, a special child allowance is granted if one parent is dead or if paternity has not been established. In 2006, the special child allowance amounted to DKK 12 456. With a view to providing single parents with a financial basis in relation to the child, they are eligible for a separate allowance. The allowance consists of an ordinary child allowance per child and an extra child allowance per family. In 2006, the ordinary child allowance amounted to DKK 4 324 and the extra child allowance to DKK 4 400.

Daycare facilities for children constitute a central part of the welfare policy capable of making a positive difference, also in relation to disadvantaged children. Most children spend many hours in daycare facilities. That is why the activities to create equal opportunities for all children start in the daycare facilities where the focus is on an inclusive strategy with regards to the work concerning disadvantaged children.

With its family policy report published in 2005, the Danish Government presented an overall family policy. This family policy report puts the family first, particularly the children and as part of the report, a number of initiatives have therefore been launched to support and provide for robust children able to fully exploit their resources.

The Government's aim is to create the best possible conditions allowing all children and young people to have the same opportunities for personal development and health while growing up, regardless of their individual difficulties. The Government currently pursues the following strategies with a view to improving conditions for children, particularly the most disadvantaged children and young people, offering:

- equal opportunities for all children and young people;
- better conditions for families with children;
- renewal of the primary and lower-secondary school;
- youth education for all children and young people.

4.3. Objectives and targets

In this section, the above-mentioned strategies for improving conditions for children will be examined.

4.3.1. *Equal opportunities for all children and young people*

This strategy comprises initiatives aimed at combating negative intergenerational transmission and improving the opportunities of disadvantaged children and young people. The objective of the strategy is to provide children in need with the right help at the right time.

- Tools should be developed to enable early identification of children and young people who need help.
- An overview of the initiatives that work best in relation to individual children should be created to make the overall effort as effective as possible.
- The comprehensive interdisciplinary and cross-sectoral initiatives against negative intergenerational transmission should be strengthened to enable intervention when and where problems occur.

The strategy is supported by specific measures in the form of quality development in daycare facilities, schooling improvements, including for disadvantaged children and young people, better integration of bilingual children and young people, initiatives with a view to strengthening parent responsibility, and initiatives to integrate disadvantaged children and young people in ordinary communities.

4.3.2. *Better opportunities for families with children*

As part of the effort to create better financial circumstances for families, the maximum amount payable by the parents for daycare facilities for children under the age of six has been lowered from 33 to 25 %. The reduction was fully implemented on 1 January 2007. The Government also contemplated increasing the child benefit by DKK 2 000 on 1 January 2008.

Funds have been allocated — DKK 2 billion over four years — for improved quality in the daycare facilities, particularly as regards supporting disadvantaged children in those facilities. The intention is to create further focus on disadvantaged children and their learning through project development in the local authority areas.

The projects highlight children's health and life style and give increased attention to physical activity as the disadvantaged groups show tendencies to risky behaviour in relation to these issues. The projects also focus on taking particularly targeted, qualified and systematic action in relation to disadvantaged children to make a positive difference for the children's continued course of life. In addition, they highlight good management, which is essential for systematic and stimulating educational work in the daycare facilities.

This is also achieved through the work concerning the educational learning plans introduced in the daycare facilities in 2004. The educational learning plans comprise six different themes: personal development, social competencies, language, physical activity, nature and culture.

Learning plans are tools to ensure that all children, regardless of their social backgrounds, have the same opportunities to learn and get an education and a job later in life.

Furthermore, the Government has proposed an amendment to the custody rules so that, in the future, parents will normally share custody of the children after a divorce.

4.3.3. Reform on children placed in care

On 1 January 2006, the Government, backed by a broad parliamentary majority, launched the reform on children placed in care, which aims to support vulnerable children and young people with special needs. The reform prioritises the interests of the child and focuses on:

- early action;
- involvement of family and network in placements in care;
- documentation of measures;
- ensuring children's rights in cases of placement in care.

4.3.4. Health

Besides the general health policy towards children, which keeps them from social exclusion (mentioned above), there have been smaller initiatives to combat the grounds of social exclusion among children. Several strategies exist which enhance the health of children and thereby cause a positive impact on social exclusion. Since 2005, there has been specific focus on the strengthening of child psychiatry. Furthermore, there has been focus on the municipal contribution to combat overweight among children.

4.3.5. Sports

In the sports area, the strategy is to do something to increase the after-school physical activity of the group of children who are not getting enough exercise. This group could be called 'sports-unconfident'. It may include disadvantaged children. Pools of funds have been allocated for sports projects for disadvantaged children. The aim is to develop new methods to get these children to do more exercise, integrate them in the life of sports and provide them with social competencies.

5. Analysis of main policies

As demonstrated in the previous sections, Denmark has a comprehensive policy setup for dealing with children at risk and a relatively small number of children who experience severe poverty and other risk factors.

The main policies for dealing with underprivileged children and youth has the strength of both having a strong element of universality (free schools, free healthcare, etc.) and strong individual services targeted specifically at the relevant problems in particular families.

However, three main areas of problems can be identified.

Firstly, other policy areas seem to affect the social area negatively, in the sense that these policies have side effects that increase poverty and social exclusion. This is especially true in relation to immigrants and refugees.

Secondly, while the general policy framework is considered comprehensive and adequate the implementation of policies in municipalities is in many respects considered to be deficient.

Thirdly, the policies do not seem to create social mobility to a sufficient extent for very socially vulnerable people.

These three points will be elaborated in the following sections.

5.1. Side effects of legislation in other areas

The present Danish Government has launched several policy initiatives aiming at improving both integration and employment of refugees and at combating unemployment in the Danish population in general. This is done mainly by reducing public income support thereby strengthening incentives to find a job. The policy initiatives have been criticised heavily though, for having side effects contributing to poverty and deprivation in Denmark (Rådet for socialt udsatte, 2003). In the following, two areas affected by the policies are described: integration and employment policies.

5.1.1. Integration policies

The general integration legislation has been tightened severely during the last six years. One of the consequences is that fewer people are granted citizenships and an increasing number of people are to stay in asylums for an extensive period of time. While this is one of the main aims of the present Government, the effects on child refugees have been a major political point of discussion in parliament. Articles and television documentaries have shown that many children stayed in asylums for extensive periods of time without getting proper education or the chance to participate in social or cultural activities. These have led the Government to target specific policies to mend the problems.

Also, as of 1 July 2002, the Government introduced a special allowance for refugees in Denmark which refugees are to receive for the first seven years in Denmark. The aim of this initial help is to provide inducements for refugees to more quickly find a job. The background for this initiative is

that employment rates among refugees are much lower than it is for ethnic Danes (46.6 % as compared to 77.2 %).

While a recent study indicates a positive employment effect of the initial help for refugees (Rockwool Foundation, 2007), the initiative has been criticised heavily for depriving an already marginalised minority even more (see for instance Blauenfeldt et al., 2006). By 1 January 2006, the initial help as compared to 'normal' unemployment benefit ⁸ was as follows.

- A person on normal unemployment benefit receives DKK 8 749 per month, while a person receiving initial help receives DKK 5 638 per month.
- A family with two parents and three children receives DKK 23 250 per month on normal unemployment benefit, while the same family receiving initial help gets DKK 11 698 per month.

As is apparent, the reduction is especially severe for families with children, since they receive only half of the normal employment benefit. This dramatically enhances the risk of poverty and deprivation.

5.1.2. Employment policies

Danish employment policies are to a large extent interrelated to integration policies, as a large part of the unemployed are immigrants and refugees. One of the present Government's political aims is to integrate more immigrants and refugees in the labour force. Part of the new initiatives is called the 300-hour rule. This new legislation states that a family of two adults without work needs to work at least 300 hours a year — otherwise one of the family's social benefits will be taken away ⁹. This policy aims to push more people into the labour force; however a potentially negative side effect of this could be that socially vulnerable families with children will lose a great part of their income, which in turn will damage their children's life situation. As this initiative has been in effect since 1 April 2007 only, the actual consequences are yet to be seen.

Another policy measure to motivate jobless people to find employment is the so-called 'social benefit ceiling' (*kontanthjælpsloftet*). This initiative effectively reduces the typical unemployment benefit by putting an upper limit on the benefit. Often, this happens by reducing home support for people on unemployment benefit. A problem with this policy measure is that it falls notably hard on child families. A study thus shows that 85 % of those affected by the 'benefit ceiling' have children — and the reduction is particularly large for families with many children. An estimated 30 000 children were affected by the 'benefit ceiling' in 2004 (Baadsgaard, 2006).

⁸ 'Normal' unemployment benefit is called 'kontanthjælp' in Danish.

⁹ Arbejdsdirektoratet: http://147.29.40.90/_GETDOC_/ACCN/B2006007605-REGL

5.2. The lack of proper implementation at the municipal level

Numerous evaluations have criticised municipal implementation of social legislation. Many reports have found that municipalities often do not implement social legislation as intended.

An analysis of municipal organisation of policies aimed at vulnerable children and youth showed that social workers did not always perform an initial investigation of the children and did not always talk to the children in the process (Olsen, 2002). Both elements are clearly mandatory in the social legislation.

A major evaluation of citizen involvement in their social cases showed that citizens in many cases are not heard and do not receive the proper information about their cases (Rambøll Management, 2004).

An analysis of the criteria for placing children in care using case examples showed major differences between municipalities concerning (Egelund and Thomsen, 2002):

- how serious a given problem was considered to be;
- which arguments that was given weight in the decisions;
- whether the case called for a placement or support at home;
- whether a placement with or without consent was most appropriate;
- what type of placement was seen as most relevant.

These types of arguments go to the core of how the Danish social welfare model is structured. Policies are formulated by parliament at national level but implemented at municipal level. The Danish political system offers a great deal of autonomy for local governments. This means that municipalities are free to distribute funds between different areas as they have a high income from municipal taxes and state funding often is given as block grants.

As a consequence, the real level of poverty and social exclusion cannot be deciphered simply by analysing national legislation. As in many cases there is a significant implementation gap implying that children and youth might not always get the rights and protection that the law intended. The case has been made that smaller municipalities (under 10 000 inhabitants) have had a higher implementation gap due to lack of professional expertise (Olsen, 2002). One of the consequences of the reform of the municipal structure in 2007 — creating larger municipalities — might therefore be that social legislation will be implemented to a higher extent.

5.3. Insufficient social mobility for children from socially vulnerable families

While general social mobility might be considered comparatively high in Denmark, a specific problem exists in relation to socially vulnerable families. Children from high-risk families have a significantly higher chance of risk behaviour as adults. In the following section some of the Danish evidence to this point is outlined.

Christoffersen (1999) showed — in a study based on register data — that children living in families with mentally ill parents have a much higher risk of unemployment, crime, violence and suicide as adults compared to their peers.

The study also showed that violence in families between parents and against children increased the likelihood of the children committing violent crimes and becoming a violent parent themselves. Violence in the family also increases the likelihood of the child becoming a drug addict and attempting suicide (Christoffersen, 1999). Christoffersen also showed a significant correlation between criminal parents and the chances of children becoming drug addicts.

Parents with an abusive behaviour have been shown to be a significant risk factor for children. Studies show that children with parents with alcohol abuse have a higher risk of becoming criminals and children from abusive families have a higher risk of becoming abusers themselves (Uldall, 1997, Christoffersen, 1999).

A study of all children placed in care from the year 1985 showed that 40 % of the children placed in care have parents who themselves were placed in care as children. In 7 % of the cases, both parents had been placed in care (Egelund, Hestbæk and Andersen, 2004).

In a study of children aged seven, Else Christensen (2006) points to four groups at particular risk, namely:

- children with many conflicts with other children;
- children in broken families;
- deprived children where the mother is mentally ill;
- children lacking Danish speaking skills.

A study of how individuals, who have received special care as children, are doing as adults (based on register data) showed that they were significantly lower educated, more unemployed and more frequently receiving social benefits (Glavin, 2004).

A study of 100 years of social work in Denmark concluded that the percentage of children placed in care has been relatively steady around 1 % for the entire period (Bryderup, 2006).

The evidence suggests that the Danish welfare model has not succeeded in improving the life chances for the most vulnerable families to a significant extent. The evidence does not suggest that Denmark is necessarily better or worse than other countries, merely that the social system does not have a very good track record when it comes to the very vulnerable families.

6. Arrangements for monitoring the implementation

The Danish Parliament critically monitors the spheres of the various ministries and may require reviews from the respective ministers by asking them to answer questions in parliament and in parliamentary review debates. Moreover, the parliamentary standing committee monitors general developments in the particular spheres of the ministries in addition to its work on preparing legislation.

The relevant ministries are responsible for monitoring the development of the various policy areas at a national level. The Ministry of Finance, the Ministry of Social Affairs, the Ministry of Employment, the Ministry of Family and Consumer Affairs, the Ministry of Education, the Ministry of the Interior and Health, the Ministry of Culture and the Ministry of Refugee, Immigration and Integration Affairs are the principal ministries.

The ministries publish evaluation reports, etc. on an ongoing basis to illustrate various issues concerning the situation of children and how to ensure good conditions for all children. For example, the Ministry of Finance periodically publishes analyses of the distribution of income in Denmark, including the share of persons in the low-income (at-risk-of-poverty) group. The analyses also include children in the low-income group.

Several ministries have agencies with specific responsibility for parts of the administration in the sphere of the ministry. The following are of particular relevance:

Agencies with responsibility for monitoring implementation

The National Board of Health monitors lifestyle, health and the impact of these factors on social exclusion of children and young people in Denmark. It operates at national level and is part of the Ministry of the Interior and Health.

The National Social Appeals Board under the Ministry of Social Affairs is the supreme board of appeal in the social field. In addition, it provides guidelines for the local authorities in connection with the implementation of legislation, and it also prepares analyses and statistics in the social field. This board is responsible for the statistics on placement of children in care that form part of the monitoring of the implementation of the reform on children placed in care.

The National Board of Social Services under the Ministry of Social Affairs provides counselling for the local authorities on the implementation of the 'Social service act' and performs evaluations. Most official statistics on income, family conditions, children's wellbeing, etc., are collected and published by Statistics Denmark. Statistics Denmark has collected data from different administrative registers for many years, and it is therefore possible to obtain a wealth of statistical information about children and children's wellbeing.

In some areas, research institutions have a separate obligation to conduct research into particular fields.

The SFI is in charge of conducting research in the social field. The institute has conducted extensive research into children and children's wellbeing. For example, SFI is conducting a cohort children's study where it monitors a cohort of approximately 5 000 children born in 1995. The children's parents were interviewed in 1996, 1999 and 2003. They will be interviewed again in

2007. Similarly, a cohort of children born in 1995 and placed in care is monitored and interviews are conducted with the mothers, the placement facilities and the case workers. Interviews were conducted in 2003, and the second batch of data was retrieved in 2007.

The National Institute of Public Health (SIF) is monitoring the health and lifestyle of the entire population (the SUSY-studies). Within their work, their specific agenda concentrates on monitoring the health of children and young people. The institution is an independent research institute within the Ministry of Interior and Health. The institution delivers data to the Organization for Economic Cooperation and Development (OECD) and other organisations.

AKF — research for the municipalities and regions — conducts research into conditions in the local authority areas and regions. The research programme comprises many themes related to the situation of children and young people, e.g. in the educational and cultural fields. Among other studies, AKF has conducted studies of cultural habits.

The Danish Evaluation Institute occasionally carries out comprehensive studies or research programmes concerning selected welfare-policy themes. From 1999 to 2005, a research programme on negative intergenerational transmission was implemented in a joint effort with the SFI, the AKF, the Danish University of Education (DPU) and the SIF. The aim was to obtain knowledge about the factors influencing individual resources and behaviours and to conduct analyses of the effect of those factors on the wellbeing of individuals, social integration, health, forming of a family, education and maintenance.

6.1. Assessment of the monitoring system

Denmark has a very comprehensive system for gathering information and statistics on every individual. Using the social security number as an identifier, it is possible to provide very specific information on the development of poverty and social exclusion. Using register data is therefore very well developed in Denmark and give research a strong vantage point for doing analysis. The different institutions provide many reports of interest as the list of national sources in the appendix of this report testifies.

However, despite this comprehensive system, too little weight is given to analysing the extent to which policies actually achieve their desired outcomes. As of yet, most Danish policies have not been designed to have clear measurable outcome goals and have not been systematically monitored and evaluated. While evaluations are often used, it is often the case that baseline data is not created beforehand and legislation lack clearly stated outcome goals. Research, on the other hand, have been criticised for not giving enough weight to analysing 'what works for whom' from a policy perspective. Danish research have been criticised for documenting the social sector while not giving clear policy-relevant solutions and not describing the extent to which different policy initiatives have documented effect in solving social problems. The Danish SFI has in the last few years turned its focus more clearly on documenting effect and opened the Nordic Campbell Centre that focuses on doing systematic research reviews.

Recently the Danish ministries have moved towards a stronger orientation to measuring the outcomes of initiatives. The Ministry of Social Affairs have made an internal 'strategy for measuring outcomes' which means that all new policies and legislation need to have clear measurable goals that can be evaluated. The strategy also calls for more evidence-based

research and more evidence-based legislation. The Ministry of Social Affairs have also started to further invest in the implementation of legislation. The reform of children placed in care has an extensive education program for social workers attached to it.

To this date, Denmark does not have a strong overarching institution that seeks to ensure that legislation is build on evidence and is evaluated systematically. It is the role of each ministry to ensure that this happens. The result of this is that there is no systematic monitoring and evaluation of policies through a consistent framework, crosscutting ministries.

ANNEX: NATIONAL SOURCES ON THE SUBJECT

Andersen, Dines (1995): *Skolebørns fritid – De 7-15-åriges levekår og fritidsanvendelse i 1993 sammenlignet med 1987* [Schoolchildren's leisure time – wellbeing and use of leisure time among 7-15 year old children]. Socialforskningsinstituttet rapport 95:2, København.

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