

The Principles, Goals and Functions of Early Childcare Services (0 to 6 Years) in the Czech Republic in the Context of European Social Policy¹

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Introduction and Legitimacy of the Topic

The topic of providing and ensuring a network of care for the youngest children in today's society is growing in importance for several reasons that interconnect, but may have different consequences on the structure and organization of the entire system. The need to build and/or provide accessible services of a particular type is primarily motivated by (1) current developments in the labour market and at the same time changes in the lives of families. There is an increase in the general uncertainty of the labour market in terms of specific jobs, but also of employment as such and the insecurity of ensuring adequate income (cf. Sirovátka et al. 2009). Furthermore, there is increasing pressure on the flexibility and adaptability of the workforce, which is forced to adapt relatively quickly to changing market needs, or the needs of employers (e.g. Taylor-Gooby 2004, Bonoli 2006, Esping-Andersen 1999, etc.). These trends go hand in hand with changes in the organization of the traditional division of labour between men and women, where the male was the breadwinner of the family and the woman was responsible for childcare and running the household (ibid). With the massive entry of women into the labour market and pressure to promote the principles of equal opportunity for men and women, the model of the so-called *male breadwinner* begins to recede (even disappear). In order to mitigate the conflict between work and family life (especially of women), there is a growing need to outsource the care of dependent persons (e.g. Bartáková 2008). This externalization of domestic work and childcare can be provided either through government or market mechanisms (Bonoli 2006).

To a certain extent, these processes partially force the welfare state to assume some of the responsibility and to co-operate in providing childcare. It should be emphasized that these arrangements of the welfare state could be implemented in two basic ways, which are possible to combine. It can be done either through the promotion of parental early childcare, or through the support of non-parental (i.e. usually institutional) childcare services. (This issue will be expanded in the next chapter.) Although the pressure to at least partly defamilize childcare services was started in some European countries earlier than in others, the trend is currently evident in all countries, even if it is disproportionately distributed. (This issue will be expanded in the next chapter.)

(2) The second motive leading to the implementation of care for the youngest children is related to the development of post-industrial society as a whole, and again with the development of the labor market in particular. Many experts state that early childcare and particularly education are necessary for the subsequent acquisition of *life-long skills*, which are basic presumptions for effective participation in society, a knowledge-based economy/society and the development of a person's full potential (compare Starting Strong I 2001, Starting Strong II 2006, Haddad, L. 2002, Mahon 2002; Scheiwe, Willekens 2008, etc.).

(3) Another incentive to develop and provide childcare services is child poverty prevention, or at least the reduction or elimination of child poverty. This kind of incentive is connected to both the motive of reconciliation of work and family life (the financial security of the family, the necessity of a dual-earner family) and the motive of early childhood education (equal opportunity for disadvantaged children, increasing demands on the high qualification of

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workers in the labour market, etc.) (see, for example, Childcare Services Sector 2006, Babies and Bosses 2007).

The main goal of this article is to clarify and characterize the principles, goals and functions of the childcare service system for children aged 0-6 in the Czech Republic in the context of the requirements and expectations of contemporary European social policy.

Firstly, different variations of non-parental care of children in the Czech Republic are characterized. In the second chapter, the requirements and targets of European childcare services are described. The third chapter analyses the ideal motives and principles on which the childcare services can be built. These European expectations and ideal motives are used as the main framework for the discussion of the principles, goals and functions of Czech childcare services. In the conclusion the main “neuralgic points” of the childcare service system are summarized.

CHARACTERISTICS OF THE EARLY CHILD CARE SYSTEM IN THE CZECH REPUBLIC

In the Czech Republic at present, early childcare outside of the family is provided through nurseries, kindergartens and various types of private childcare facilities. According to regulation no. 242/1991 Coll., on the constitution of health care facilities provided by district offices and municipalities, the term *nursery* is in a category of *special health service facilities*. Nurseries are meant to provide daycare for children up to about 3 years of age, usually. According to the Czech legal code they should provide *therapeutic-preventative care* and fall under the jurisdiction of the Ministry of Health (MH) of the Czech Republic. However, the MH has not established any regulations on the compulsory technical or practical facility set-up of nurseries, or any legal directives outlining even compulsory staff requirements. What does still have validity are the Methodological Measures of the MH published in MH Report no. 10, section 17-18 from 1968, where the MH issued some methodological instructions for ensuring the individual conditions of providing nursery care. These methodological measures pertain to the staffing and work descriptions of personnel as well as the basic features of operating a nursery. Although these Methodological Measures determine the exact extent of the workload of a doctor in a nursery, there is no mention of the ratio of nurses to children. In any case, most of the measures set out in this report are not feasible by today’s standards (Svobodová, 2007). The personnel of most nurseries are usually paediatric nurses who sometimes have additional educational or psychological training.

In the past, nurseries would be regularly visited by a paediatrician, whose workload would differ based on the capacity of the nursery; however, today doctors have no workload at nurseries. Other professionals include foster parents who have by today’s standards undergone a year-long preparatory course and assist nurses with all their duties; nevertheless, they are not allowed to work without the supervision of a paediatric nurse or a head nurse. Health care provided in nurseries is not covered by public health insurance, but rather by the insurance of the provider of the nursery. Since 1991, the provider in 95% of nurseries has been the municipality and in the remaining 5% it has been a legal or physical individual. Most nurseries are a part of a public allowance organization. The overall financing comes from a “two-source system”: specifically, the operation costs are partly covered from the budget of the provider and partly from a contribution from parents.² The specific objectives, general quality of the services and service fees are all, to a certain extent, determined by the providers

² For example, in Brno, the fee depends on family income and unlike the case of kindergartens, there is no legislatively determined maximum fee that the parents pay for the nursery. Generally, nursery fees are around 2000 CZK per month per child (Klíč k jeslím 2007).

themselves (under the assumption that they are, of course, upholding the law³). As is evident from binding program documents at the government level, the official strategic objective of nursery services is "...to provide care in the multi-faceted development of children up to the age of three, usually. Nursery care builds upon the familial care of children." (Regulation no. 242/1991 paragraph 21, article 1).

Kindergartens are a part of pre-school education and according to school regulations⁴ are the first level of public education, falling into the jurisdiction of the Ministry of Education, Youth and Physical Education (ME); according to ministry regulations, kindergartens are a public service. As such, kindergartens are legally bound to the educational constitution as a type of schooling and are regulated by laws that are similar to those of other types of schooling. This type of pre-school childcare facility is meant for children from three to six year of age, or, exceptionally, seven.⁵ Every child has the legal right to make use of this service at least one year prior to regular school attendance.

After 1989 there was a differentiation among kindergarten providers and the offered services, even though the percentage of private providers is only 1.4% of the total. Kindergartens were transferred to municipal, private or church administration. Furthermore, kindergartens with above standard services came into being, offering advantages such as rehabilitative exercise programs and year-round operation, although for a higher price. In comparison with the fees for nursery school services, kindergartens are less expensive partially because their financing is at least "three-source" – that means the provider (usually the municipality), the ME (through the agency of school administration), which covers the costs of wages and educational aids) and fees paid by parents (which can comprise a maximum of 50% of the total costs; in fact, in the case of socially disadvantaged families, this fee is excused).

A binding and authoritative document for all kindergartens is the *General Educational Program for Pre-school Education (2004)*, which determines the common framework and must be upheld⁶. However, maintaining these common rules is in the jurisdiction of the provider, therefore employees of individual kindergartens can create and implement their own educational program. The employees of kindergartens are teachers who must by law have professional qualifications. The explicit objective of institutionalized pre-school education is to complement family upbringing and to act in close co-operation with the family to help ensure specialized care for children in an environment suitable for stimulating their development and education (Rámcový 2004). Additionally, the White Book (2001: 45) states, "in cases of need here [in kindergartens], there is compensation of inadequacies to satisfy the needs of children and their developmental stimulation. In the case of disadvantaged children, this involves assistance intended to even out differences and improve their life and educational opportunities."

In accord with the Law for Trade and Business (no. 455/1991 Coll. in its valid form), there arose a possibility to provide childcare as a business opportunity. The responsible body is the Ministry of Industry and Trade (MIT), without any ties to other ministries. One of the possibilities is to provide controlled trade licences for "**Day care of a child up to three years of age by non-family individuals**" in private facilities. This activity is of a similar nature to the running of nurseries, except that it is not considered a health facility. Nevertheless, it must

³ Most of the existing laws apply in principle only to health and dietary requirements – e.g. Act No. 258/2000 Coll. on the protection of public health, as amended. Furthermore, there are other related legal conditions: Decree no.135/2004 Coll. on the health requirements for swimming pools, saunas and the sanitary levels of outdoor playing surfaces (as amended), the implemented regulations to Act no. 258/2000 Coll., Special Decree no. 137/2004 on the hygiene requirements for food services, and the principles of personal and operational hygiene of activities of epidemiological importance, and Decree no.195/2005 Coll. on the prevention and spread of infectious diseases and public health requirements for the operation of medical facilities and welfare institutions, in their valid version.

⁴ Law no. 561/2004 Coll. on pre-school, elementary, secondary, college and other education.

⁵ The lower age limit of a child is not firmly set.

⁶ In the case of private kindergartens, such facilities must meet the conditions defined by the Education Act and therefore the requirements of the Framework Educational Program for Pre-school Education (2004).

fulfil similarly stringent food and hygiene standards⁷. The requirements of this professional trade licence are stated in Government Regulation no. 491/2004 Coll. in its amended form in paragraph 1 as “individual educational care of entrusted children up to the age of three in day care or week-long care intended to develop reasoning and speaking skills, motor, working, musical and creative skills, and cultural hygiene habits appropriate to the age of each child. Furthermore, the health and safety of the children is guaranteed, as well as the provision of fresh-air activities, resting time in clean premises, personal hygiene and any necessary first aid.” The fee for the service is determined by the provider. The required education for child daycare to three years, according to this trade regulation (and related directives)⁸, is a university degree in nursing, or a college diploma in paediatric nursing or general nursing with a specialization in paediatrics. Since 2008 the professions have been extended to include those having competence in general nursing, nursing assistance, professional care-provider, childbirth assistance and rescue work (according to Law no. 96/2004 Coll. on non-medical health professions), or those having competence in social work (according to Law no. 108/2006 Coll. on social services). In order to be allowed to provide this trade, however, there is no stipulation on the length of work experience, nor any legal responsibility to pursue life-long learning or continued studies, as is the case for healthcare workers.

According to a proposed law on the Pro-family Package (Ministry of Labour and Social Affairs MLSA, 2008), the standards of qualification of professional trade providers could be relaxed somewhat in the future. To obtain a license for this controlled professional trade, it would be enough to have “a certificate of re-qualification, or another document certifying the professional qualification or specialized competence for the stated activity, issued by the accredited facility according to particular legal regulations of the ME or which ever ministry the activity pertains to.” (MLSA, 2008: 68).

Another option for providing a professional trade in the given sector is through obtaining an unqualified trade in the “*Provision of Services for Families and Households*” (Law no. 455/1991 Coll. on professional trades). This primarily pertains to services involving the running of a household, such as cooking, cleaning, laundry, ironing, gardening, shopping services, as well as the individual care of children over three years of age in families and occasionally the short-term care of children (including those under three years of age), and providing care to individuals requiring extended care. Care of children over three can be provided by someone with an unqualified trade license according to Government Directive no. 140/2000 Coll.; this involves the trade *Extra-curricular Care and Education*, which includes the care of children over three years of age in pre-school facilities, in private schools and facilities serving for specialized education that are outside of the school system, school and pre-school facilities for extra-curricular care and education, tutoring, and educational and care activities at children’s camps.

Currently, there are negotiations about the draft of a law which has so far been approved by the government of the Czech Republic in the form of the Pro-family Package (MLSA 2008), which creates additional options for the care of pre-school children through (1) *Parental Mutual Assistance (PMA)*. “The registered provider of PMA is a physical person registered in the list of Providers of Mutual Assistance authorized by parental-registry places (municipalities); the person has personal and other reasons to ensure proper care of the assigned child (children) and through his/her lifestyle ensures that he/she is able to provide

⁷ A person conducting a business under the trade licence “Day-care for children under three years” is required under paragraph 7 of Act No. 258/2000 Coll. as amended, to meet the requirements of the premises in terms of their sanitary conditions, equipment, operation, lighting, heating, micro-climatic conditions, water supply, cleaning and use of laundry, as prepared by the implemented legislation (Decree no. 410/2005 Coll. on hygiene requirements of the premises and operation of equipment and facilities for education of children and youth). Furthermore, the operation of this trade is also affected by Decree no. 137/2004 on hygiene requirements for food services and principles of personal and operational hygiene in epidemiologically related activities, as amended.

⁸ Government Directive no. 209/2001 Coll. setting the list of professions whose operation the entrepreneur is obliged to provide strictly through physical persons fulfilling the professional competence set by this directive. The content of this profession is set by Government Directive no. 469/2000 Coll.

the care for the benefit of the assigned child "(MLSA 2008: 40). This registered provider is a position that is limited to parents who are taking care of their own child of under 7 years of age; they must have a clean criminal record, the consent of their spouse and a safe and appropriate location. They can take care of a maximum of four children. Other conditions of care are a matter of negotiation between health care providers and parents. The maximum earnings for care providers within the PMA is 15,000 CZK per month (the fee per child may not exceed 5000 CZK per month) and is not subject to taxation on personal income (MLSA, 2008).

Another option being proposed by the government is the concept of (2) ***non-commercial mini-schools***. Minischools could be set up by employers, civic associations, charitable organizations, clerical (church) legal persons, regions or municipalities for a maximum of 4 children aged from 6 months to 7 years of age⁸. Qualification requirements for care-providers should be the same as in private business (and non-medical professions or a certificate of competency – see above) and the costs of setting up and operating such a mini-school would be tax deductible. In creating mini-schools on such a basis, it would then be possible to join with other providers (e.g. co-operation of several companies) (MLSA 2008).

REQUIREMENTS AND EXPECTATIONS OF EUROPEAN (EU) POLICY REGARDING CHILDCARE

Currently, the system of childcare is one of the fastest growing areas in the EU; however, this development is not occurring at the same pace or in the same way in all European countries (Childcare Services Sector 2006). The key factors, especially in EU countries, are the quality of childcare and flexibility for parents; however, there is no model that can be identified as a standard within the EU, especially given the very different historical developments in the area of childcare (ibid). Nevertheless, it can be said that while "the more developed countries tend to share responsibilities of child care between the family and the state" (Starting Strong I 2001: 40), other resources based on information from various international organizations in less developed countries advocate the following: programs should be as inexpensive as possible and should be implemented mainly by mothers and communities; parents and close relatives should be equivalent to the target populations; the establishment of the programs should be based more on *community or home-based care*; there should be support from the private sector to create these programs, etc. (Arango, 1998, Young, 1996 cit by Haddad, L. 2002).

On the other hand, particularly the OECD stresses the somewhat problematic relationship between the quantity and quality of care and the provision of market-based childcare services (Starting Strong I 2001). Similarly, Leitner (2003) warns that if childcare outside the family is provided primarily by the private sector, it may be available only to those parents who are able to pay for the service. It is not therefore possible to rely fully on the market to provide childcare services in sufficient quality and quantity; however, a combination of sources should be considered. The state should always provide at least part of the funds and control conditions for service provision (quality standards, removing information barriers, etc.), thereby helping the efficient functioning of the market (Starting Strong I 2001, Mahon 2002). However, if the state ignored the issue of costs, it could lead to especially low-income families looking for care-givers on the black market without guarantees of their qualifications and expertise, which could have negative consequences for quality of care (Mahon 2002).

Thus, the OECD is proposing a number of recommendations for program developers responsible for *early childhood education and care services* based on ensuring the widest accessibility and improving the quality of care, mainly through increasing public investment and supporting the training of staff in these services. Quality of care should depend on the child's age and should be individually designed; therefore, it should be tailored to the needs of

each child, as well as the needs of parents in reconciling work and family responsibilities. The specific quality of care conditions aimed at reducing the anxiety or fear of the child's separation from parents can be provided through professional care providers, an environment that is familiar to the children and having a group of their peers (Goossens, 1986). The following OECD recommendations will then form a framework for discussion of the Czech model/system of childcare in respect to its principles, objectives and functions (Starting Strong I 2001, Starting Strong II 2006):

- *A systemic and integrated approach to early childhood education and care policy (ECEC)*
- *To create the governance structures necessary for system accountability and quality assurance*
- *A strong and equal partnership with the education system*
- *A universal approach to access, with particular attention to children in need of special support (attend to the social context of early childhood development)*
- *To place well-being, early development and learning at the core of ECEC work, while respecting the child's agency and natural learning strategies*
- *Substantial public investment in services and the infrastructure 1) to achieve quality pedagogical goals; 2) to reduce child poverty and exclusion through upstream fiscal, social and labour policies, and 3) to increase resources within universal programs for children with diverse learning rights*
- *Encourage family and community involvement in early childhood services*
- *A participatory approach to quality improvement and assurance (develop with the stakeholders broad guidelines and curricular standards for all ECEC services)*
- *Appropriate professional education, training and working conditions for all staff in all forms of provision*
- *Provide freedom, funding and support to early childhood services*
- *Systematic attention to data collection and monitoring*
- *A stable framework and long-term agenda for research and evaluation*

IDEOLOGICAL BASES OF BUILDING A SYSTEM OF CHILDCARE

In this section we will firstly introduce the basic principles and themes that may be in the background of the development of a childcare system and then we will discuss and analyze this in connection with the Czech model of childcare.

As is already clear from the introductory part of the text, the basic ideal principles on which European countries usually build child-care systems are as follows (Scheiwe, Willekens 2008):

1. *The idea that even children below the age of obligatory schooling are in need of public education (an idea which presupposes children to be already of an age at which they can be publicly educated)*

2. *The idea promoting the reconciliation of care work and paid work* (this idea may justify public childcare for children of any age)

(1) The principle based on the assumption that the **systematic education of children should be started as early as preschool age** is at the root of most of the first childhood education systems, which involve either variant (a) *child centered* or (b) *state or society centered* (Scheiwe, Willekens 2008). The first option is based on the idea that the desirable development of a child necessitates that the child begin at a certain age to associate with other children and adults outside the family. There is also the idea that even pre-school children can benefit from systematic education similar to that of schools, but is not yet mature enough to attend regular school (Scheiwe, Willekens 2008, compare with Starting Strong II 2006, Haddad 2002). The offer of such oriented services may have its roots in the principle of equal opportunities for children of different social, cultural and linguistic backgrounds. The inevitable inequalities that arise from these differences in the family background of the child should be offset by the general availability of the public education system (Scheiwe, Willekens 2008). Evidently, even from this system, built primarily on the interests of the child, there are many positive consequences for society as a whole. However, systems whose starting point is more concentrated on the interests of society and the state place more emphasis on the need to instill the values of the given political system to all its citizens right from the cradle.

Some examples are the French model, the states of the former socialist block and the United States at the turn of the 19th century, where there was significant migration of people from many different cultures, which supported the argument of educational and developmental values of U.S. citizens from the earliest age (ibid). Pre-schools of either variant did not replace parental/maternal care, but were perceived more as a supplement (e.g. teachers were expected to emulate maternal behaviour). The educational ambitions that formed the foundation of the majority of nursery schools or similar facilities across the Euro-American zone ended up emphasizing, among other things, the principle of universality in that each child should be entitled to some form of pre-school education.

(2) The second motive for developing a system of childcare is **to facilitate the reconciliation of work and family life**. The main objective, compared to the previous reason, is to provide childcare for parents who are both participating in the labor market. In the past, this concerned mainly those parents working in agriculture and industry, especially as they had to ensure an adequate family income and therefore could not take care of their children at the same time. Such policies were targeted only at those who could prove that they were in need, leaving them marginalized. There were other interdependent objectives: women's liberation (from their dependence on men) was allowed through their entry to the labour market, thus eradicating child poverty through the employment of their mothers; the possibility of a female labour market supported economic efficiency. The principle of building a network of childcare services has currently become a central theme of European employment strategy discourse and equal opportunities for men and women, as well as serving as an indicator of different models of the social state, or family policies, particularly on the axis of familialism – defamilialism (cf. Esping-Andersen 1999, Leitner 2003). *“A familialistic system is one which public policy assumes, indeed insists, that households must carry the principal responsibility for their members' welfare. A de-familializing regime is one which seeks to unburden the household and diminish individuals' welfare dependence on kinship.”* (Esping-Andersen 1999: 51). This concept is further refined by Leitner (2003), who primarily focuses on the caring function of family and discerns several variants of familialism and de-familialism, depending on how the different instruments of family policy are combined. This mainly concerns strong or weak support schemes of maternity and parental leave, including related

financial transfers and (b) strong or weak support of formal services for children under three years (explicit⁹, implicit¹⁰ or optional¹¹ forms of familialism and de-familialistic modes¹²).

State support for the care of pre-school children is proving to be essential for the participation of women/mothers in the work process of the formal labour market (cf. Esping-Andersen 2002; Bartáková 2008; Plasová 2008). Leitner (2003) therefore follows the percentage of children under the age of three who are placed in formal childcare facilities. According to some experts, the Czech Republic is classified to be among the countries with an explicit form of familialism, along with countries such as Austria, Germany, Italy and Luxembourg, which are characterized by relatively long schemes of paid parental leave (the Czech Republic has one of the longest); at the same time there is very underdeveloped formal care for children under 3 years of age (e.g. Bartáková 2008).

THE CZECH MODEL OF CARE FOR CHILDREN

The motives, described above, of course do not in themselves constitute social policies. They are ideal types from which particular sets of organisational and institutional principals and arrangements/tools can be derived and from which different kinds of questions and problems follow (Scheiwe, Willekens 2008). Often, some kind of mutual combination occurs, although it is interesting to see which of them is more dominant within particular tools/measures of childcare. We will look at a Czech example of this (see Table 1 below). “The ideal types tie in with dominant notions of gender and class relations and thus make it also easier to see how such notions are incorporated within different social policies (Scheiwe, Willekens 2008: 4). They are ideal types from which particular sets of organizational and institutional arrangements and Principals/tools can be derived and from which different kinds of questions and problems follow (Scheiwe, Willekens 2008).

Table 1 Comparison of selected institutional settings of the educational model, the work-care reconciliation model and the Czech model of public care for children from 0 to 6 years of age

Institutional dimensions	Educational model	Work-care reconciliation model	Kindergartens in CR	Crèches (nurseries) in CR
Access	Universal	Targeted	Universal for children in the age of 3 and older (especially for children who are 1 year before school attendance)	Formally universal/ informally targeted
Entitled person	Children	Parents/child with special needs	1) all children from 3 to 6 years 2) children under 3 years with special needs	Children (especially of working parents)
Pedagogical concept	Educational goals (learning)	Mainly care	1) educational goals 2) children under 3 – equal opportunity (disadvantaged children)	Mainly care (and education)
Group size and organisations	Relatively big groups (similar to school classes)	Smaller groups	Classes - average is 12.8 children per teacher	Smaller groups (usually 3-6 children per qualified person, depending on the age of children)
Professionalization of staff, payment*	Teachers	Lower level of professional education and payment than teachers	Teachers	Professional health personnel (nurses, lower level health personnel)
Fees	No fees for school (possibly for meals, etc.)	Subsidised, but parental fees	Fees (up to 50% of non-investment costs at most; the last class before regular school attendance is free)	Fees (decision of municipality: usually (a) depends on family income, or (b) flat rate)
Financing bodies	As for school (national or regional financing)	Mixed financing with a share of community authorities (less centralized)	Mixed financing - three-fold (parent fees, municipal and state budgets - both national and regional financing)	Mixed financing - two-fold (parent fees and municipal budget - local authorities, less centralized)
Administrative competence	School authorities	Social welfare authorities	School authorities (Ministry of Education)	Local authorities (Ministry of Health)
Time patterns	Opening hours and holidays like schools	Varied	Opening hours and holidays like schools	Opening hours (flexible, parents' needs are usually considered)

Source: The author's own modification and completion of a table presented by Scheiwe and Willekens (2008: 9).
*Valid statistics concerning the wages of teachers of the Ministry of Education and the wages of nurses working in nurseries are not yet available in the CR.

If we examine the set up of the system of public childcare services in light of the above principles, we can say that the settings of kindergartens are based more on the educational model and crèches (nurseries) have more in common with the work-care reconciliation model (Table 1).

The explicit aim of kindergarten is education, development and preparation of children for school attendance, and to be available to the general population of children from 3 to 6 years; this is widely made use of¹³. According to *The Yearbook of Education Development in the CR* (UIV database of information for the school year 2008/2009), the proportion of three-year-olds who attended nursery school make up 76.5% of the entire population. In 2008/09 nursery schools were attended by about 89.4% of all four-year-olds and 92.8% of all five-year-old children (ibid). According to the settings of the nursery school system, we can deduce that a “particular age” is appropriate for collective facilities similar to the type that have been used in the Czech context for 3 years. This confirms a relatively new adaptation of entitlement to parental allowance, which since 2006 has simultaneously allowed parental contributions and partial childcare for children over the age of 3 at kindergartens for up to 4 hours per day (Act no. 117/1995 Coll. on state social support). This adjustment may be relevant to parents in terms of reconciliation of work and family, especially for those who for various reasons seek to at least partially return to the labour market.

On the other hand, it should be noted that nursery schools are attended by a quarter of the population of children under three (in real numbers that means more than 26,300 children – information for the school year 2008/2009); this proportion has been stable for several years (see Annex 1) (UIV 2009; compare Matějková, Palonciová 2004). However, in the case of these children, the defined objective of the services shifts. *The White Paper* (2001: 45) states that “today there is a new need in justifiable cases to allow as an exception the inclusion of a child under three years, as 20% of children, according to research, are born into single-parent families. We can therefore infer that, unlike in the case of older children, for whom the system wants to ensure universal access to kindergarten, for children under 3 years, childcare services are directed (at the level of more general goals) to them only in the case of emergencies where some kind of inadequate parental care is identified. However, in my opinion, there is such a high proportion of the population of children under 3 years in kindergarten due to a combination of several factors and circumstances. The lack of crèches, nurseries or similar facilities for children under 3 years forces parents to create a demand for care for children under 3 years in kindergartens; kindergartens are less financially demanding than nurseries¹⁴; there is an emphasis by parents on education; there is a lack of confidence in nurseries – crèches persist in having a bad reputation from the days of the communist regime; and/or there may be a situation where parents prefer institutional care for their children in their second or third year, but do not want to expose their children to the burden of transition and adaptation from one facility to another and the changes this involves in the rules and teachers/caregivers within a relatively short period (cf. Plasová 2008 Bartáková, Plasová 2007; Klíč k jeslím 2007; Kuchařová, Svobodová and others 2006).

Furthermore, some research indicates (e.g. Plasová, Gelnarová 2005) that the directors of kindergartens admit children under 3 years of age simply in order to fill the capacity and only if the child has almost reached the age of 3 in the necessary time period. This is often explained in such a way that, for example, when a child reaches the age of three in March, forcing the parents to conclude their parental leave and return to work, the child would not be allowed to start kindergarten until September, thereby considerably complicating the parent’s return to work. Therefore they opt to enrol the child in September of the previous year, but with real attendance beginning in March. In real terms this means that these statistics may include children who actually do not yet attend kindergarten. In addition, the objectives of *The White Paper* (2001) are not fully reflected in the actual functions of kindergartens. On the other hand, it is also necessary to take into consideration the major regional differentiations¹⁵. In some locations, there is such a great demand for placement in kindergarten (also see Appendix 2) that not even three-year-old children are enrolled (even for a partial stay of 4 hours per day). Preference is given to older children – those who are just about to start school. This is generally in line with the above-specified objectives and in some kindergartens, by

contrast, they set up a special department for the youngest children. Despite the prevailing principle of education in kindergartens, we can find – at least implicitly – some features that are attributable to the idea of reconciling work and family care.

Apart from the aforementioned concurrence of parental contributions and the placement of the child in kindergarten for up to 4 hours a day, which allows parents to work part-time, we can find support for the conciliation model, which is also in the process of setting criteria for admission to kindergarten. Due to inadequate capacity, many kindergartens are forced to establish criteria for the admission of children based on attendance (especially in larger cities), which do not have any basis in legislation, but simply are based upon their discretion (Kuchařová et al. 2008). The economic situation of both parents is one of the three most common criteria for the acceptance of a child into a facility (Annex 2).

The identification of principles, objectives and functions of nurseries in the CR is somewhat difficult, especially because current legislation governing the setting and operating conditions are not thoroughly resolved. The reasons and circumstances surrounding the relatively drastic “development” of the last 20 years (see Annex 4) are absent in this respect, along with valid data at the national level. Yet, as already mentioned above, the characteristics of crèches rather correspond to the principle of services meant to facilitate the reconciliation of work and family (and at the same time, they are also an important indicator for the (non) inclusion of the welfare state among the various types of familialism or de-familialism). However, there is an obvious effort to not guarantee “only” care, but to develop the child in many areas. At present, however, there remain in the CR only residual nursery services, and compared to the kindergartens, they are completely marginalized in the Czech model of the welfare state. Since the beginning of the 1990s, when the Czech Republic had more than a thousand nurseries with a capacity for nearly 40,000 children, their number declined significantly between 1990 and 1991, and gradually decreased to the current 46 facilities with a capacity for 1413 children (UZIS CR 2009). Coverage of the target population, children from 0 to 3 years, ranges from 1 to 3% and has the worst status based on various international comparisons (e.g. Bartáková 2008). Based on national documents and some follow-up measures, there is quite an apparent attempt to ensure that nurseries remain only in a marginal way and that there is an effort to keep the care of children under 3 years of age within the family. This effort can be proven through several facts.

Although the EU and OECD recommend that all pre-school education be united under one system or within one ministry (cf. Starting Strong I, 2001; Childcare services sector EU 2006), in the CR nurseries are within the jurisdiction of the Ministry of Health, which reinforces the emphasis on the care-giving function and, understandably, is completely outside of the main agenda of the ministry¹⁶. The position of the Czech welfare state to nurseries can also be demonstrated in the problematic meeting of priorities of the Lisbon Treaty (according to which by 2010 there should be 33% of children aged 0 - 3 years placed in childcare facilities). According to *National Family Report* (2004: 24), “*This goal is in conflict with current policy, which is focused on family support and oriented by the child's welfare.*” From this declared position, we can determine that the system of care for children from 0 to 3 years in the CR is built on the idea that the welfare of a child under 3 years is only possible in a family environment. For this reason, the system of public care for children in this age category can only be of a residual character, only addressing “emergency or abnormal situations” when child care cannot be provided within the family. Such a stance is then reflected in other measures, significantly affecting the availability of this type of care. The first measure is the setting of parental leave and parental contributions so that in comparison to the case of children older than 3 years, it would not limit the concurrence of parental allowance and the placement of the child in an institutional facility for 4 hours a day. This is essentially a form that Czech mothers of children under 3 years of age would welcome most

in their reconciliation of work and family care (cf. Plasová 2008; Křížková, Hašková 2003, etc.).

Even in relation to the innovations of taking parental leave and parental contributions¹⁷, which financially favour the rapid withdrawal of parental allowances (especially the rapid parental allowance that can be withdrawn over the course of two years), we can pose the question of whether the system of public childcare in the CR is ready to provide for the needs of those parents who will return to the labor market in as little as two years. The planned amendment of the Ministry of Labour and Social Affairs (the Pro-family Package) is probably anticipating a solution to the problem through the provision of care for children under 3 years, particularly through a plan called Parental Mutual Assistance¹⁸ (see above). According to the objectives of this document, this step should legalize the current practice of parents who resolve the problem of inadequate childcare through mutual self-help for remuneration. This is in the field of the informal or “grey” economy, which prevents the practice from being used more widely. “This measure aims to extend the original offer of informal childcare services on an individual basis”.... For the children being cared for, the provider creates an environment similar to that of a family, even simulating sibling groups” (MLSA 2008: 39). Again it is evident that there is pressure on childcare to be provided within a pure family environment. Despite the many positive effects that this childcare option offers (e.g. non-institutional, individual nature of childcare, affordable and socially viable), it is doubtful whether PMA will ensure high quality and affordable care. There are almost no set requirements or quality standards for hygiene, food, activities or child development, etc. The amendment rather relies on the fact that if the provider is a parent (particularly a mother taking care of her own similarly aged child), the fact of parenthood is sufficient to guarantee the quality of care for young children. Quality is also closely connected to the issue of the credibility of such a service for parents.

According to some surveys (Kuchařová et al. 2008), there is evidence that if the PMA legalized the already established relations on the basis of neighborly assistance (as is otherwise the intention of the package), then there would probably be only a legal change in the relation to nanny/friend, into whose care parents entrust the care of their child and who they trust. At this level, mothers would not expect any special training/courses from their nannies, except for a first aid course. On the other hand, if it was not possible to secure babysitting by a person the parent knows or at least someone recommended, and it was necessary to find a “stranger”, then it would be likely that parents/mothers would demand that the care-provider be able to prove their reliability through the completion of a course or psychological test, etc. (ibid). In this case, the relation between the PMA and private businesses in this area remains problematic. The PMA does not need to abide by hardly any requirements for hygiene or equipping of the facilities, as is the case for setting up trades in the area of childcare. Similarly, in contrast to entrepreneurs, the fees are not subject to income tax, which for professional service providers, who need to reflect the costs of overhead in their services, this could represent an absolutely untenable form of competition (cf. Kuchařová et al. 2008).

Table 2 Summary of principles, objectives and functions of public care for children from 0 to 6 years of age in the Czech Republic

	Crèches/nurseries (care for children from 0 to 3 years)	Kindergartens (care for children from 3 to 6 years)
Principles	Securing sufficient childcare for working parents / idea of reconciling work and family / two-income home model	Universalism, pre-school education as a value / needs of the child / communities
Objectives	The aim is to provide comprehensive care for the all-round development of children, usually aged 3 years, in terms of health and education as an indivisible whole . Nursery care follows up on childcare in the family.	The goal/mission of kindergartens is to complement family care and closely connect it to the provision of childcare in a professional environment with adequate incentives for the child's development and learning
Functions Features	Primarily upbringing/care-giving ; secondarily educational/upbringing	Primarily educational , secondarily care-giving, compensation of socio-economic level

SUMMARY OF NEURALGIC POINTS OF THE CZECH MODEL OF CHILDCARE SYSTEMS

We conclude that in the Czech system of childcare there are both basic principles: the educational model and the conciliation model. However, at first glance there is an obvious difference between the concept of care for children from 0 to 3 years and that of children over 3 years of age; there is a strictly maintained division between the two in the Czech Republic. The provision of public care for children under 3 years (nursery schools) has practically disappeared. There is much pressure exerted on parents to take care of their children under 3 years within the family. This somewhat undermines the respect for differentiation among various family patterns, choices and strategies. On the other hand, the system of kindergartens for children of 3 to 6 years is a part of a social policy in the Czech Republic that is fully supported, and not just financially.

We may, however, notice from certain signs of both the system itself and the diversified needs of parents that there is a need to change the models and their limits (e.g. the high proportion of children under 3 years in kindergarten, the demand of parents for non-parental childcare, a new institute of Parental Mutual Assistance (PMA) and non-commercial mini-schools). Despite the expectations of European social policy (EU, European Commission), there are still existing Czech policies/measures that create pressure on parents to provide family care (preferably maternal care) for children under 3 years of age. If there is a “failure” within the family, then care can be provided only on an individual basis and in an environment that is as similar to the family model as possible (e.g. this can be demonstrated through long paid parental leave, the lack of institutional care for children under 3 years of age, the setting up of a Parental Mutual Assistance program). On first glance, it could also be said that such efforts are accompanied by the need for high quality childcare, but some features of the Czech system of services, specifically for children under 3 years, evoke certain doubts. Most probably it can not always be said that family care of a child up to the age of 3 is in all circumstances the best possible solution. In this respect, the OECD points out in its key elements/directives the establishment of a system of care for children: the objective is the elimination of child poverty and balancing the chances of children from different environments, etc. However, in this case it responds (at least at the level of declarations) by setting up a system of Czech kindergartens which, in exactly such cases, declare children under 3 years of age to be among its target groups. The guarantee of the quality of care could also be threatened if in the future the Czech Republic intends to provide care for children under 3 years of age outside of the family based on (1) Parental Mutual Assistance without any basic standards or requirements for the quality of care (other than that the provider has a

clean criminal record and safe facility), or (2) leaving the costs of providing childcare to parents and private providers (entrepreneurs, employers).

The care of children over 3 years, mainly provided by kindergartens, at least at the level of the declared objectives and principles, is marked by the attempt to provide universal access to education for children in a given age group (with preference given to children who are at the age just before compulsory school attendance). On the other hand, there can be some doubt about the fulfillment of the principle of universality for an entire age category of children, if the providers of kindergartens in the case of an excess of demand over supply “assistant” in the realization of others, based on their needs to create criteria for the enrollment of children to school.

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APPENDIX 1

Kindergartens – children from 2003/04 to 2008/09 according to age

Age of children		2003/04*	2004/05*	2005/06	2006/07	2007/08	2008/09
Total		286 340	286 230	282 183	285 419	291 194	301 620
including	Up to 3 years	23 092	24 709	23 849	22 475	23 710	26 384
	3-years old	71 530	70 717	69 519	72 108	73 997	79 025
	4- years old	83 303	84 296	82 369	84 573	85 867	88 134
	5-years old	85 961	85 193	85 883	85 866	87 273	87 927
	6- years old**	22 454	21 315	20 093	19 997	19 896	19 699
	Up to 6 years	-	-	470	400	451	451

Source: database UIV

Note.

* In the 2003/04 and 2004/05 school years, including schools in health facilities.

** Children older than 5 years of age in 2003/04 and 2004/05.

Kindergartens – percentage of children attending kindergartens in individual age categories of the population in school years from 2003/04 to 2008/09

Age of children		2003/04*	2004/05*	2005/06	2006/07	2007/08	2008/09
including	Up to 3 years	25,3%	26,5%	25,4%	23,0%	23,0%	24,8%
	3-years old	80,0%	77,3%	74,6%	76,6%	75,3%	76,5%
	4- years old	94,4%	94,2%	90,0%	90,7%	90,9%	89,4%
	5-years old	96,0%	96,4%	95,8%	93,7%	93,2%	92,8%
	6- years old**	25,0%	23,8%	22,7%	22,3%	21,6%	21,0%
	Up to 6 years	-	-	0,5%	0,5%	0,5%	0,5%

Source: database UIV

Note.

* In the 2003/04 and 2004/05 school years, including schools in health facilities.

** Children older than 5 years of age in 2003/04 and 2004/05.

Appendix 2

Rejected applications for enrollement of kindergarten based on the size of the group in the municipality (in %)

Rejected applications	Number of inhabitants in locality						Total
	Up to 500	500 - 999	1000- 1999	2000- 9999	10 000 – 49 999	50 000 and more	
Yes	10,8	22,2	30,2	53,2	45,8	70,5	36,8
No	89,2	77,8	69,8	46,8	54,2	29,5	63,2
Portion of rejected applications of the total number of applications in all localities*	3,1	5,4	8,3	13,2	11,9	22,4	10,4
Portion of rejected applications of the total number of applications – only in localities where at least 1 application was rejected**	26,6	24,8	27,3	24,6	25,5	31,2	27,5

Source: Kuchařová et al. 2008: 85

Pozn.:

* the total percent of rejected applications expresses the portion of rejected applications in total in the municipality of a given size. The total number of rejected applications is related to the total number of applications in municipalities of a given size.

** the percent of rejected applications is counted only from those kindergartens where some applications were rejected. The average percent of rejected applications in facilities where all the children were not accepted is statistically undifferentiated in its relation to the size category of the municipality.

Appendix 3

Criteria for accepting children to kindergarten (in%)

No criteria	13,1%	If they have some criteria, including:	
1 criterion	3,9%	Age of child	93,2%
Combination of 2 criteria	2,8%	Permanent residency	83,9%
Combination of 3 criteria	9,5%	Working parents (both)	77,7%
Combination of 4 criteria	15,6%	Attendance of child's sibling	66,1%
Combination of 5 criteria	24,4%	Full-time attendance	61,8%
Combination of 6 criteria	16,7%	Single parent	49,1%
Combination of 7 criteria	8,0%	Family in need	34,5%
Combination of 8 criteria	4,7%	Other	19,5%
Combination of 9 criteria	1,1%	Czech citizenship rights	13,6%
N	639	Family with 3 children or more	7,0%

Source: Kuchařová, et al. 2008: 86

Appendix 4

Number of nurseries and placements from 1990 to 2007

	1990	1991	1992	1993	1994	1995	1996	1997	1998
Number of nurseries	1 043	486	381	247	235	207	151	101	79
Number of placements in nurseries	39 829	16 628	13 196	9 265	8 565	7 574	5 551	2 965	2 191
Rise/Fall of placements between years (%)	-	- 58,3%	- 20,6%	- 29,8%	- 7,6%	- 11,6%	- 26,7%	- 46,6%	- 26,2%
	1999	2000	2001	2002	2003	2004	2005	2006	2007
Number of nurseries	67	65	59	58	60	58	54	48	49
Number of placements in nurseries	1 913	1 867	1 717	1 674	1 770	1 708	1 671	1 567	1 587
Rise/Fall of placements between years (%)	-12,7%	- 2,4%	- 8,0%	- 2,5%	+ 5,7%	- 3,5%	- 2,2%	- 6,2%	+ 1,3%

Source: UZIS, Roční výkaz o činnosti zdravotnických zařízení. Stav k 31.12. příslušného roku in Kuchařová et al. 2008.

Note: Since 2000, nurseries and micro-nurseries include other children's facilities. Until 1999, the figures include only nurseries and micro-nurseries.