Breaking Silos, Building Futures: Policy Innovations for Integrated Family and Child Support

Co-hosted by COFACE Families Europe and the Odisee Centre for Family Studies in Brussels, the conference convened researchers, policymakers, public administrators, and NGOs to advance integrated, place-based strategies for strengthening family resilience and equity. The event centred on policy levers that empower municipalities and amplify early investments, exploring how cross-sector collaboration enhances service quality and maximises long-term societal returns. The programme was structured around a keynote roundtable followed by four interactive streams, which served as workshops to foster debate on reimagining Early Childhood Education and Care (ECEC) centres as community anchors, designing integrated service hubs, innovating governance for local prevention, and harnessing digital tools to bridge service gaps. Bridging research, policy, and practice, the conference aimed to identify and foster the dissemination of scalable solutions - from Flanders' 'Huis van het Kind' to Estonia's digital platforms - to build resilient communities where all families can thrive. All presentations of the conference are available on the COFACE website. www.coface-eu.org

Keynote session

The conference opened with a keynote panel that framed the day's discourse, balancing focus on the need to break down silos between policy areas supporting families with young children. The four panellists - Wim Van Lancker, Christian Morabito, Mara Yerkes, and Olivier Thévenon - collectively built a case for systemic approaches, highlighting the pitfalls of fragmentation and the foundational elements required for success. Wim Van Lancker set the stage by immediately challenging common assumptions. He argued that the discourse on child poverty and early investment is "not only about young children," nor is it "only about services". Crucially, he warned that ill-designed policies can sometimes increase inequalities rather than mitigate them. Drawing on findings from the rEUsilience project, he highlighted how support for disadvantaged families remains fragmented and ill-suited to their needs. He introduced the critical concept of the "Matthew Effect", where expansions of childcare and parental leave systems are often first and foremost accessed by higher-income, higher-educated families, thereby widening the gap. Van Lancker stressed that investment must be grafted onto universalism - ensuring genuine access and choice for all - and must not forget the immediate power of cash benefits. He concluded that it is not a question of "cash OR services", but of doing both, a task made harder in an era of austerity where public spending often prioritises the elderly over children.

Building on this, Christian Morabito delved into the transformative potential and practical challenges of integrated early childhood development (ECD). He outlined how the early years form the bedrock for cognitive, socio-emotional, and physical development, fostering the 21st-century competences vital for thriving in modern societies. While quality ECD programmes can dramatically narrow inequality gaps, as evidenced by PISA data, Morabito cautioned that they are not a "magic bullet". The key, he argued, lies in integration: linking early education with health, nutrition, and social protection. "You cannot section the child according to the sector", he stated, underscoring that education, health, labour, and social protection ministries must work hand-in-hand. He pointed to models like the "Houses of the Child" in Flanders, which integrate services under one roof, as exemplars of this approach. However, he

highlighted a fundamental paradox: despite overwhelming evidence of high returns, ECD remains chronically underfunded, often below 1% of GDP. He further detailed how decentralised implementation often leads to "unfunded mandates" for municipalities and inequitable distribution of resources, penalising remote and marginalised areas.

Mara Yerkes brought a crucial sociological perspective, focusing on the lived experience of families navigating complex policy landscapes. Her research illuminated how "policy and service silos" act as a significant, yet understudied, barrier to gender equality and family well-being. Parents and caregivers are forced to find their way through multiple, complex systems, each with its own "languages, people, norms, and expectations." This navigation act - finding information, identifying eligible services, and processing conflicting requirements - imposes a significant burden. When families, particularly those with limited resources, cannot effectively navigate these silos, the consequences negatively impact their lives, children's well-being, and ultimately, our economies and societies. Yerkes's intervention served as a critical reminder that technical solutions for integration must be designed with the end-user in mind, simplifying access and reducing the cognitive and administrative load on families.

Finally, Olivier Thévenon of the OECD shifted the focus to the mechanics of implementation, drawing on extensive cross-national analysis. His first point emphasised the necessity of strong leadership, ideally from the centre of government, to drive integrated child well-being plans. However, he noted this must be balanced with long-term sustainability through legislation and line ministry ownership to avoid vulnerability to political change. He stressed the importance of "binding mechanisms" and the constructive involvement of Ministries of Finance to treat child investment as a fiscal priority. His second point highlighted the need to strengthen local ecosystems. Place-based policies, he argued, are best suited to adapt to local realities and co-design services with communities. He cited Estonia's reform, which streamlined support for children with special needs by enabling data flow between health and social registers, as a

powerful example. Thévenon's third point called for strengthening monitoring and evaluation across the entire policy cycle - not just impact evaluation, but also formative and process evaluation - to understand what works, why, and how policies can be improved during implementation.

Breakout stream 1: Expanding the boundaries of ECEC

Morning session

The morning session of Stream 1 wove together perspectives from EU policy, frontline integrated practice, and a deeply rooted regional-level case study to argue a compelling, unified thesis: to truly support a child's future, we must first support their family and community through cohesive, cross-sectoral systems.

The session opened with a European-level overview from Géraldine Libreau of the DG Education, Youth, Sport and Culture (European Commission), who framed the EU's vision for a high-quality, inclusive ECEC system. She emphasised that ECEC is the foundational step on the lifelong learning ladder and serves multiple, vital purposes. Through instruments such as the European Child Guarantee and the work of the ECEC Working Group of DG EAC, the EU is championing a dual approach: universal policies that benefit every child, complemented by specific measures for the most vulnerable, including children with disabilities, those from a migrant background, and Roma children. A key message was the necessity of "integrated work", where ECEC provision actively cooperates with other family support services. This ensures that the complex, multi-faceted needs of children and their families are met adequately and holistically. The EU's focus on monitoring quality, developing a competent workforce, and facilitating smooth transitions for children underscores a commitment to systems that are not only educational but truly supportive of overall well-being.

This policy vision was brought vividly to life by Hester Hulpia (from the Artevelde University of Applied Sciences, in Belgium), who argued that integrated working is "the only way to go". She began with a poignant reflection on the birth of a baby, a moment of joy that can also be overwhelming for parents, who are often confronted by a confusing "patchwork" of services, leading to feelings of loneliness and frustration. This fragmentation, she argued, is a result of services and policies working in silos. Poverty and exclusion are complex problems that cannot be solved by a single sector: they require "joined-up approaches". Ms Hulpia pointed to a wealth of evidence, from EU documents and research projects like INTESYS to practical models, that demonstrates the profound added value of integration. For children, it means less abrupt transitions; for families, smoother referrals and reduced stigma; and for professionals, greater competence through shared expertise.

Crucially, Hulpia positioned ECEC settings as the pivotal hub for this integrated work. They can act as a central, accessible point connecting families to a wider ecosystem of services, including health screening, speech therapy, parental support, and home visiting. However, she was candid about the challenges, from staff shortages and structural issues like differing funding streams and governance, to a simple lack of time to connect. She outlined five essential preconditions for success: a shared vision centred on the needs of children and families; genuine family and community involvement; a baseline of high-quality services; a competent system with strong, reflective staff; and finally, supportive policy and sustainable funding. A particular spotlight was placed on a new style of "network leadership". This is not a hierarchical role, but that of a "bridge-builder" or "local locomotive" who connects families, professionals, and organisations, maintains the network's vitality, and ensures it remains focused on its common goals.

The theoretical and practical frameworks established by the first two speakers found a powerful real-world exemplar in the detailed case study presented by Dr Sandra Fischer (University of Bonn) on the Family Centre System in North Rhine-Westphalia (NRW), Germany. Dr Fischer explained how Germany's federal system, with its layers of national framework, regional specification, and municipal implementation, provided the context for a remarkable "bottom-up" innovation. What began as a grassroots movement was transformed into a state-wide programme from 2006 onwards, formally embedded into law through the North Rhine-Westphalia Children's Education Act (KiBiz).

The core idea of the NRW family centres is to support children by supporting their parents, offering easily accessible, non-stigmatising services from a single source. To receive state funding, a daycare centre must achieve certification under the "Family Center NRW Quality Seal", a system that has spurred tremendous growth from 261 centres in 2007 to over 3,350 today - approximately one-third of all daycare centres in the NRW region. Dr Fischer illustrated this with compelling examples: educational counsellors from external partners holding regular consultation hours within the familiar premises of the family centre, and therapists providing individual sessions for children on-site, seamlessly integrated into their daily routine. This cooperation allows staff to act as a vital "bridge" to parents.

An evaluation of the NRW model cited by Dr Fischer confirmed that the work of family centres is widely perceived as an enrichment. However, it also revealed significant challenges, particularly at the intersection of different policy fields, such as between the youth welfare and healthcare systems. Skepticism from medical associations, concerns about "creating demand", and complicated billing procedures for "home visits" to a family centre can act as stubborn barriers. Despite these hurdles, the conclusion was overwhelmingly positive. Family centres are seen as a cornerstone of a preventive social policy. They reach children and parents "where they are anyway" and function as a vital anchor for the neighbourhood. Most importantly, they successfully link primary prevention (universal, accessible services) with secondary prevention (targeted advice for problems) and tertiary prevention (acting as a guide to specialised external services), creating a comprehensive, multi-layered support system.

Afternoon session

The afternoon session opened with a macro-level perspective from Elizabeth Shuey of the OECD, who presented findings from the landmark *Starting Strong VIII* report. She framed ECEC not merely as an educational intervention, but as a profoundly cost-effective public investment to close achievement gaps before they widen. The OECD's research illustrates that the initial disparities between children from different backgrounds can be significantly reduced over their life cycle through high-quality early years provision. However, Ms Shuey argued that the true potential of ECEC is only unlocked when it is strategically aligned with a wider ecosystem of supports, including parenting programmes, health and nutrition services, family benefits, and even housing and urban planning. This "rethinking of the boundaries" involves several key strategies: focusing on parents as partners and learners; creating community-based service hubs that operate on a "no wrong door" principle; extending coordination from the prenatal period into primary school; designing climate-resilient, family-centred community spaces; and developing integrated data systems that allow for a whole-of-government view of child and family well-being. She concluded by highlighting inspiring national governance models, from Japan's new Children and Families Agency to Colombia's *De Cero a Siempre* strategy, which provide the essential "glue" of national oversight, quality frameworks, and dedicated funding to hold coordinated services together.

This high-level policy analysis was complemented by Dr Mihaela Ionescu of ISSA (International Step by Step Association), who provided a conceptual bridge between policy and practice by introducing the framework of the "Early Childhood Development Ecosystem". She began with a resonant "why": a child's development is uniquely impacted by the quality of all their environments, from the home and neighbourhood to formal services. Because children's and families' needs are inherently complex and holistic, no single service can address them in isolation. Dr Ionescu then detailed the "what" of coordinated governance, which entails creating aligned structures, policies,

and funding from the national to the local level. The "how", she suggested, is underpinned by key factors: a shared vision and values, strong political leadership, trusted communication, and perhaps most critically, time. She presented a valuable continuum of integration, ranging from simple cooperation between independent institutions to full integration under one leading agency. Through initiatives like the INTESYS Toolkit and the Primokiz approach, ISSA has worked to equip municipalities with the practical tools to navigate this journey. A central takeaway was the concept of leveraging ECEC settings as the natural, accessible hub within this ecosystem, particularly for supporting children and families with higher vulnerabilities, thus ensuring that support is both functional and equitable.

The theoretical frameworks from the OECD and ISSA were brought to tangible life in the final presentation by Anne Lambrechts, who detailed the work of Elmer vzw, an integrated service and network partner in the Brussels-Capital Region. Elmer stands as a living embodiment of the principles discussed throughout the day. It is not a single service but a "holistic support centre" built on five pillars: children, parents, neighbourhood, professional integration, and innovation. Ms Lambrechts illustrated how this vision operates in practice through four integrated arms: its ECEC centres, a Family Centre ("Huis van het Kind"), a Centre for Inclusion, and a Practice Centre for Learning and Working.

The data from Elmer's ECEC centres paints a picture of a deeply diverse and intentionally supportive community: serving 428 children from 57 different countries of birth, with over half coming from vulnerable families. The centre actively fosters a social mix and provides a stable anchor for parents who are working, training, or navigating crises. The Family Centre integrated within Elmer Noord exemplifies the "service hub" model, offering everything from play-cafés and psychological consultations to school choice guidance, all under one roof. Simultaneously, the Centre for Inclusion proactively reserves places for children with additional needs and shares its expertise across Brussels, while the Practice Centre trains long-term unemployed individuals, primarily women, to become qualified childcare

workers, thus investing in the community's workforce.

Perhaps most strikingly, Ms Lambrechts showcased Elmer's extensive "network map," a web of partnerships with youth care services, mental health organisations, medical centres, and cultural institutions. This network is the practical manifestation of breaking silos, ensuring that a family engaging with Elmer has seamless access to a comprehensive spectrum of support. She attributed the organisation's sustained success since 1997 to a strong, value-driven policy shared by the whole organisation, a dynamic quality system, and a commitment to learning from other European practices through projects like Erasmus+.

Breakout stream 2: Integrated family support models

Morning session

The morning session of Stream 2 offered a detailed examination of one of Europe's most established integrated family support systems: the Flemish *Huis van het Kind* ('House of the Child'). This session provided a dual perspective, blending the high-level policy overview of the implementing agency with the grounded, practical realities faced by local municipalities. The collective narrative was not just one of a successful decade-long implementation, but a candid and reflective account of the complexities, challenges, and ongoing evolution of building a nationwide network of family support hubs.

The session was opened by Kristien Nys of the Odisee Centre for Family Studies, who immediately framed the discussion as a mutual learning opportunity, inviting participants from diverse backgrounds - policy, research, and practice - to reflect on how the Flemish experience could inform their own work. This set the tone for a conversation that was both "celebratory" and critically analytical.

The Governmental perspective

Tine Rommens, a policy adviser from the governmental agency *Opgroeien* ('Growing Up'), began by outlining the foundational vision. The Houses of the Child were established by a 2013 decree on preventive family support, with the ambitious goal of creating one in every Flemish municipality. This was not merely a recommendation but a legislative mandate, signalling a deep political commitment to integrated early childhood support. The model is Flanders' specific adaptation of the family centre concept, designed to provide multidisciplinary services that seamlessly bridge the traditionally separate domains of health, social care, and education, with a particular emphasis on the critical perinatal and early childhood periods. A key philosophical underpinning, which Ms Rommens stressed, is the principle of "proportional universalism". This means that while the doors are open to all families, ensuring there is no stigmatisation, the services are deliberately calibrated to provide more intensive, tailored support for families in vulnerable situations, thus addressing inequality at its roots.

The operationalisation of this vision has been impressive. Ms Rommens detailed the network's expansive growth, from its initial inception to its current near-universal coverage of all 294 municipalities in Flanders and the Brussels-Capital Region. To be officially recognised, a House of the Child must integrate the existing preventive medical consultation offices - which offer near-universal access to families for health monitoring - and provide at least two of four key activities: organising meeting places, offering group work, providing low-threshold individual support, and running a reception and information point. This structure ensures a baseline of service while allowing for significant local adaptation.

The funding mechanism, as explained by Ms Rommens, is a sophisticated two-tiered system. Core funding, distributed based on the number of minors and vulnerable families in an area, supports these basic services, with amounts varying significantly between municipalities. In addition, a larger pool of supplementary funding is available for more targeted initiatives, such as support for vulnerable young parents or language

development programmes. When combined with the separate, substantial funding for the medical consultation offices, the total public investment in this preventive infrastructure is significant, demonstrating a long-term commitment to a proactive rather than reactive social policy.

The heart of Ms Rommens' presentation was the insightful analysis from a major survey conducted in 2022-2023, marking ten years of the initiative. This evaluation provided a nuanced picture of both triumphs and enduring hurdles. A central finding was the critical importance of a physical location. While not legally required, the survey found that a tangible, accessible hub - often co-located with libraries, childcare centres, or local government offices - was instrumental in creating an integrated service environment where families could naturally seek support on a wide range of issues. This physical presence transforms an abstract network into a trusted community anchor.

However, the survey also revealed significant challenges. Firstly, achieving a genuine "social mix" within the Houses remains a formidable task. While they successfully reach many families with children aged 0-12, they struggle to engage certain demographics effectively. Notably, only 13% of Houses reported successfully reaching families with children requiring specialised support, highlighting a persistent gap at the interface between universal prevention and specialised care. Secondly, the ambition of truly integrated work across life domains is still a work in progress. The survey showed a great diversity of partnerships, most strongly in parenting support and childcare, but far fewer connections with sectors like mental health, youth care, and socio-economic support. This suggests that while the Houses are excellent at collaboration within the welfare sector, breaking into the deeper silos of healthcare and education is more difficult. Ms Rommens concluded by outlining four key future directions: the need for a higher amount of overall funding and more equitably distributed funding; the establishment of clearer frameworks for service quality to ensure consistency for families; the development of targeted strategies to promote inclusive engagement for all families; and a renewed push to facilitate and incentivise genuine cross-sector collaboration.

The Municipal perspective

Ivan Pauwels from the Association of Flemish Cities and Municipalities (VVSG) then translated this policy framework into the daily reality of local governments. He framed the House of the Child not as a standalone project, but as the central instrument for executing a coherent local family policy. He argued compellingly that supporting families extends far beyond offering parenting advice: it must be holistically woven into every municipal domain, from childcare and spatial planning to leisure and mobility. The fundamental question for every local council, he proposed, should be: "What do we want to achieve for children, young people, and families in our municipality?"

Mr Pauwels was candid about the difficulties. He identified a lack of tradition in taking ownership of this broad family policy agenda, compounded by limited budgets and a complex landscape of actors and responsibilities. This lack of clarity, he warned, causes problems at every level: in governance, for local employees, and, most importantly, for the families themselves who navigate a confusing patchwork of support. For these families, he argued, the House of the Child should represent a reliable, nearby, and familiar network - a "safe base" where they can find shared, custom-made support. For the city council, it is the primary policy instrument to make this vision a tangible reality. In essence, the House of the Child is the vehicle that allows a municipality to move beyond a scattered collection of well-intentioned actions towards a strategic, impactful, and holistic vision for family well-being. His presentation made it clear that the journey is a "long and winding road", but with sustained commitment, local governments are steadily and surely getting there, transforming policy ambition into daily practice for thousands of Flemish families.

Afternoon session

The afternoon session expanded the horizon beyond Flanders, presenting a "tour" of integrated support models from Italy, Estonia, and Bulgaria. Each presentation, while unique in its context, reinforced the core message of the stream: that the most effective family support is local,

accessible, co-created, and seamlessly blends universal access with targeted intervention. Together, they illustrated a trans-European movement towards reimagining community infrastructure as the bedrock of child and family well-being.

The Italian model: towards generative welfare

Luciano Malfer from the FBK Foundation in Italy opened with a visionary presentation that challenged the very architecture of traditional welfare systems. He argued for a fundamental paradigm shift from a state-centric model to what he termed "Welfare Factor 8". This framework envisions a collaborative ecosystem where well-being is co-produced not just by the state and the family, but also by corporate welfare, community initiatives, cultural and sports organisations, and even the often-overlooked contributions of grandparents. This represents a move from a "provided" welfare to a "generative" one, where every sector of society is activated and accountable.

Mr Malfer illustrated this with a tangible example: a voluntary territorial network in Italy that has grown to include over 100 diverse organisations. This network, which includes everything from local sports clubs and pizzerias to museums and professional firms, is not a talking shop but an action-oriented alliance. Coordinated by a Family Agency, these disparate entities come together to create and implement an annual plan of activities specifically designed to enhance family well-being. This could range of a local restaurant offering family-friendly meal deals to a sports club creating dedicated parent-child programmes. This model is now being scaled up through Italy's third National Family Plan (2025-2027), which explicitly designates Family Centres as the "hubs of new local governance". The role of these centres is evolving from being mere service providers to becoming the central nervous system of this new generative welfare, catalysing and coordinating a whole-community effort. Mr Malfer emphasised that this profound change requires new methodologies and dedicated change management, moving from a top-down approach to a co-designed, people-centred methodology that places families and communities at the very heart of the process.

The Estonian model: systematic, evidence-based "Family nests"

In stark contrast to the broad, ecosystemic Italian approach, Maarja Oviir-Neivelt of the Estonian Child Well-being Development Centre Foundation presented the "Perepesa" (Family Nest) model - a masterclass in systematic, evidence-based implementation. She began by articulating the problem: a previously fragmented and inaccessible system where children's developmental issues were identified too late, leading to costly interventions down the line. The Perepesa model was designed as a precise, scalable tool for local governments to conduct systematic prevention work.

The foundation of Perepesa is the "one-door principle". Each centre, staffed by a core team of a manager, a playroom instructor, and a psychologist, offers a comprehensive package of nine core services, all free of charge. These are not random activities but carefully curated, evidence-based interventions spanning from pregnancy to a child's entry into school. They include psychological counselling, parenting schools for expectant families, the renowned "Incredible Years" parenting programme, and a dedicated Dads' Club. The physical space is deliberately designed to be a warm and welcoming "nest", featuring a central playroom that serves both as a venue for child development and a relaxed setting for early detection of needs and building parental friendships. The model's impact is demonstrated by its rapid, organic growth. From a pilot project, it has become a national priority, with the number of centres set to expand to 28 by 2027, supported by strategic national action plans and European Social Fund investment. The feedback from parents is overwhelmingly positive, with services consistently rated 9 out of 10, underscoring the profound need for such a non-stigmatising, competent, and community-anchored space.

The Bulgarian model: grassroots integration

Maria Petkova from the Tulip Foundation brought the session to a close with a presentation on the Sure Start family centres in Bulgaria, a model that excels in its grassroots, human-centric approach. These centres, located in diverse settings from

cities to small villages and vulnerable neighbourhoods, are built on the premise of creating a "Children's house / House of the family and the community" that is genuinely open to all. Their strength lies in their profound flexibility and their ability to build durable trust.

Ms Petkova described a vibrant hub of activity where pregnant women, parents, and children can drop in at any time to join an activity of their choice. The range is vast and responsive to local need: from practical lectures on breastfeeding and administrative procedures to joint cooking sessions, puppet theatres, and individual consultations with visiting specialists like speech therapists or psychologists. An external evaluation confirmed the model's high effectiveness, particularly its role as a vital bridge between isolated families - especially in vulnerable communities - and the formal institutions of health, education, and social services. The impact is multi-generational. For children, it means the development of social and cognitive skills and a smoother transition to kindergarten. For parents, it leads to improved parental skills, enhanced family relationships, and a renewed positive attitude towards education and health. Ms Petkova identified the key success factors as the friendly, non-judgmental approach of the staff, the focus on prevention instead of sanctions, and the strong, practical partnerships with every local stakeholder, from maternity clinics and schools to community clubs and municipalities. The centre becomes a true community asset, overcoming the negative effects of poverty and isolation by simply creating a space for social interaction and mutual support.

Breakout stream 3 : Prevention through cross-sectoral collaboration

Morning session

The morning session of Stream 3, "Prevention Through Cross-Sectoral Collaboration", presented a multi-layered argument for re-engineering social support systems around the proactive needs of children and families. The session wove together a global framework for parenting support, a critical analysis of Germany's decentralised welfare model, and a decade-long case study of implementing preventative structures, collectively building a compelling case for why cross-sectoral collaboration is not just an administrative ideal but a fundamental necessity for realising children's rights and breaking cycles of disadvantage.

Dr. Sanja Budisavljevic of UNICEF opened the session with a poignant reminder: "When a child is born, parents are born too", immediately centring the family unit as the primary agent of a child's development, well-being, and learning. With 42 million parents of young children in Europe and Central Asia, the scale of the opportunity (and the challenge) is immense. Budisavljevic introduced the World Health Organization's Nurturing Care Framework, which positions parents at the centre of a holistic system encompassing health, nutrition, safety, early learning, and, most foundationally, responsive caregiving. This framework, she argued, inherently demands cross-sectoral collaboration because "no single sector can meet the complex needs of young children and families".

The stark statistics she presented painted a clear picture of the current gap between this ideal and reality. Alarmingly, one in two children under five faces violent discipline from their caregivers, one in four lacks adequate early stimulation, and one in five is not meeting their developmental milestones. Critically, Dr. Budisavljevic highlighted a massive unmet need for support: three-quarters of parents report needing parenting support, but only half have been able to access it. This unmet demand is exacerbated by fragmented systems, which she illustrated with a quote from a mother in North Macedonia describing a complete lack of supportive infrastructure across media, health, and society. In response, UNICEF is advocating for a unified Parenting Support Framework. This multisectoral approach, involving ministries of health, education, and social policy, is both preventive and efficiency-enhancing, avoiding duplication and pooling resources. The framework is structured as a pyramid, offering universal support for all families, targeted support for those with specific needs, and intensive, multi-

dimensional support for families with complex challenges, all underpinned by a strong enabling environment of legislation, financing, and data. Dr. Budisavljevic concluded by showcasing European models of integrated family centres and hubs, from the UK's Family Hubs to Flanders' Huis van het Kind, posing the central question for policymakers: "What does it take to scale these local networks sustainably across countries?"

Building on this global call for integration, Prof. Dr. Jörg Fischer (Erfurt University) provided a deep dive into the German context, analysing the potential and pitfalls of "Family Policy Relocalisation". Germany, he explained, is a social state based on the principle of subsidiarity, where tasks should be performed by the smallest, lowest, or least centralised competent authority. While this principle aims to bring decision-making closer to citizens, Fischer revealed a significant contradiction: local municipalities are the living environment for families, yet they often lack a real formal mandate to shape a coherent family policy. Traditionally, German family policy has been heavily fiscal (focused on financial transfers like child benefits) and characterised by expensive, non-transparent benefits, a lack of empirical data, and ideologically driven debates. This has resulted in a system with a strong focus on intervention for individual problems rather than prevention and the strengthening of community resources.

However, Prof. Fischer identified a promising shift towards relocalisation. New laws supporting work-life balance, the establishment of an early intervention system ("Frühe Hilfen"), and state-level family policies are creating new openings. The key, he argued, lies in recognising family policy as a crucial 'soft' factor in local development, best understood and shaped at the municipal level. The challenges are formidable: a fragmented landscape of services, no shared understanding of family policy across different levels of government, and a weak connection between real family needs and the services offered. Yet, the successful elements emerging from this decentralised approach are instructive. They include establishing binding local structures for family support while preserving autonomy, devolving responsibility and funding to the local level as the on-the-ground expert, and

institutionalising needs-based assessment and integrated social planning as the foundation for evidence-based policy. The crucial lesson from Germany is the need to reject ideological frameworks in favour of evidence-based responses, treat family policy as central to community development, and empower intergenerational engagement in shaping the services that affect them.

Dr. Christina Wieda from the Bertelsmann Stiftung then presented a powerful, longitudinal case study that brought the theoretical and policy discussions to life: the "Leave No Child Behind" initiative in North Rhine-Westphalia (NRW), Germany. Launched in 2011 as a partnership between the State Government and the Bertelsmann Stiftung, this project has worked with 40 municipalities to build local "prevention chains". These chains are defined as systematic, cross-phase collaborations between stakeholders from child welfare, education, health, and social services, intended to create seamless support from pregnancy through to career entry. The initiative's core philosophy is to "think from a child's point of view", focusing on building resilience by mitigating risk factors and strengthening protective factors throughout a child's life course.

Dr. Wieda shared key research findings from 2012-2015 that identified critical success factors. Prevention works when it is championed by the mayor and council, involves inter-administrative cooperation, is implemented in early childhood, and is evidence-based. A key insight was the role of health services (paediatricians, midwives, maternity wards) as critical, low-threshold access points for reaching at-risk families who might not engage with traditional educational or social services. This highlighted a persistent "integration gap", as health actors were often marginalised in prevention policy. A 2023 evaluation, a decade after the initial research, provided a sobering yet hopeful status update. It confirmed that prevention chains are significantly more successful when politically anchored; without this backing, they risk remaining isolated projects. While most municipalities have established initial structures, their binding nature and scope vary greatly. Strong networks now exist between youth welfare and educational

institutions, but health and labour market actors remain underrepresented. Success stories include municipal family offices and digital platforms, but progress is universally hampered by skilled worker shortages and financial constraints.

Dr. Wieda then delivered a pivotal contribution to the session by decisively "combating the myth that prevention is a voluntary task." She rooted the obligation for preventative action in Germany's constitutional fabric, citing fundamental rights to human dignity, non-discrimination, and state protection for the family. She referenced landmark Federal Constitutional Court rulings that affirm a child's right to conditions enabling healthy development and to an education with guaranteed minimum standards. Furthermore, she illustrated that the legal basis for prevention chains is already embedded across German Social Code books and state laws, which mandate cross-sectoral cooperation and joint planning. Her conclusion was that the vision of "prevention chains without gaps" does not require new laws or initiatives, but rather the determined implementation of the existing legal framework. The state's responsibility is to enable and monitor local authorities to comply with these laws, transforming a theoretical entitlement into a lived reality for every child.

Afternoon session

Building upon the morning's arguments, the afternoon session of Stream 3 offered a deep and practical immersion into the Italian experience of cross-sectoral collaboration. The session presented a tapestry of large-scale national programmes and innovative community projects, all unified by a shared commitment to preventing family vulnerability through intensive, relationship-based support that seamlessly bridges the health, education, and social service sectors.

The national programme: P.I.P.P.I.

Professor Paola Milani from the University of Padua presented the Programma di Intervento Per la Prevenzione dell'Istituzionalizzazione (P.I.P.P.I.), a nationally-scaled initiative that represents a paradigm shift in Italy's approach to vulnerable families. The programme's very name, inspired by the resilient fictional character Pippi Longstocking, signals its core mission: to prevent the institutionalisation of children by strengthening their family environments. Since its experimental start in 2011 with 10 cities, P.I.P.P.I. has grown exponentially, now involving over 500 territorial areas and supporting more than 19,600 families with children aged 0-17, thanks in part to funding from the National Recovery and Resilience Plan. Furthermore, the 2021 Budget Law and the 2021-2023 National Social Action Plan recognised P.I.P.P.I. as one of the first six Essential Levels of Social Performance (LEPS). From its launch in 2011 to 2021, P.I.P.P.I. has therefore undergone a long and complex journey from a research program to a public policy that now enjoys stable national public funding.

Professor Milani explained that P.I.P.P.I. is fundamentally about "breaking the silos between research evidence and practice". It employs an "Innovation Implementation Science Method" to create a living bridge between academic research, policy, and frontline social work. The programme is grounded in an ecological understanding of vulnerability, viewing it not as an individual failing but as a faltering in the relationship between a person and their environment. To address this, P.I.P.P.I. employs a rigorous, participatory methodology centred on the "World of the Child" framework, an adapted assessment tool from the British Assessment Framework, that maps a child's developmental needs against parental capacities and wider family and community resources. This shared tool provides a common language for the multidisciplinary teams - including social workers, educators, health professionals, and the families themselves - that form the backbone of the intervention.

The intervention itself is intensive, multi-purpose, and relational, delivered through four core strategies over a two-year period: home-based

family support; parents' and children's groups; a formal partnership between the family, ECEC services, schools, and social services; and the strategic engagement of informal social support from within the community. Professor Milani was candid about the barriers, including professional isolation, mutual distrust between sectors, and educators' apprehension about engaging with social services. P.I.P.P.I. systematically dismantles these barriers through interprofessional capacity building, joint training, and the development of shared protocols. A powerful testimony from a daycare educator illustrated this transformation: "The awareness of a positive relationship and mutual professional respect between the daycare center and social services forms the foundation for strong family engagement". This has repositioned early childhood settings not just as educational spaces, but as central hubs in an integrated support system.

The community hub: Poli Millegiorni - territorial garrisons for the first thousand days

Debora Sanguinato of Save the Children Italy then presented a complementary model: the *Poli Millegiorni* ('A Thousand Days Hubs'). This programme directly addresses the stark inequalities that emerge in the first three years of life, where children in disadvantaged contexts in Italy already show evident fragilities that widen as they enter primary school. Launched in 2022, the Poli Millegiorni are conceived as "territorial garrisons with a high educational density", located within kindergarten spaces to increase the educational offer for the 0-3 age group.

Ms Sanguinato detailed a holistic, "high-density" model that integrates three macro-actions. Firstly, it provides direct educational services to enhance children's cognitive, emotional, and social skills. Secondly, it offers comprehensive family support, including psychological support, job-seeking advice, and responsive parenting pathways. Thirdly, and crucially, it enables the local integrated 0-6 system by activating territorial coordination with municipalities, regions, and health services, and by training operators. A key element of programmatic innovation is the built-in sustainability model: Save the Children manages the start-up with private funding, with the explicit goal of transitioning the hubs to full public management by municipalities within a few years. Already, two of the seven established hubs have been successfully taken over by local authorities. The programme acts as an "engine of social cohesion", creating bonds of trust between operators and families and functioning as an active node in a network that can intercept fragility early and provide integrated responses.

The multisectoral framework: coordinating health, education, and social services

Dr. Giorgio Tamburlini from the Centro per la Salute del Bambino (CSB) provided the overarching framework that connects such community initiatives to a broader systemic vision. He argued for a multisectoral approach to parenting support that addresses the roots of adverse outcomes by promoting "nurturing care through material and immaterial support to parental resources". While material support like cash transfers is essential, Dr. Tamburlini stressed the critical, evidence-based importance of "immaterial support" - the universal, skilled support that helps all parents develop responsive caregiving skills.

He outlined the ideal system, where health services provide early, universal involvement of parents; ECEC services offer pedagogical insights to enrich traditionally medically-focused services; and social services ensure links to welfare benefits and multiservice support. The obstacles to this integration are familiar: budgetary and organisational silos, a lack of mutual recognition among professionals, and insufficient awareness of what works. To overcome these, Dr. Tamburlini highlighted two essential components. The first is multiprofessional training (12-24 hours) that builds a common understanding and language across sectors. The second is the establishment of multisectoral coordinating mechanisms, often in the form of "0-6 coordination tables" led by municipal authorities.

He illustrated this with two parallel approaches unfolding in Italy. The bottom-up approach is exemplified by the *"Villaggio per Crescere"* ('Village to Grow up') project, which creates

spaces for parents and children aged 0-3 to spend quality time with educator facilitation. These villages naturally stimulate cross-sector networking. The top-down approach is embodied by the new, ambitious national "Primi passi" ('First steps') programme, funded through the Child Guarantee. This five-year, country-wide programme will combine cross-sector coordination mechanisms, universal home visiting, and the "Villages" model, aiming for local management with central coordination and a strong focus on disadvantaged areas.

Breakout stream 4: Innovations for equitable family support

Morning session

The morning session of Stream 4 presented an evidence-based narrative on combating social inequality, moving from a stark diagnosis of the problem at a European level to a detailed case study of a national solution in Finland. The session blended together quantitative research on the structural barriers facing families with qualitative testimonies of their daily struggles, culminating in the presentation of a proactive, integrated service model designed to build resilience from the ground up.

The European challenge: cumulative inequality and the resilience gap

Dr. Rense Nieuwenhuis from Stockholm University opened the session by framing the overarching challenge through the lens of his Horizon Europe-funded rEUsilience project. He began by referencing a high-level EU group that emphasised the need to foster resilience in the face of major societal megatrends and labour market inequalities. His research introduced a critical framework for understanding inequality in resilience, which consists of two components: the differential *need* to be resilient (exposure to labour market risks) and the differential *capacity* to be resilient (the ability to avoid poverty when those risks materialise).

The project's findings revealed a deeply troubling pattern of cumulative disadvantage. Dr. Nieuwenhuis demonstrated that across European countries, the groups with the least capacity to be resilient - such as single-parent families or those with low education - are systematically the ones most exposed to economic shocks and labour market instability. This creates a vicious cycle where the most vulnerable are perpetually the least equipped to cope. To "breathe life" into these statistics, he shared poignant quotes from over 300 focus group interviews with low-resource families in Belgium, Sweden, and other nations. A parent in Belgium articulated the "complexity to work", describing an impossible bind involving lack of transport, unavailable childcare, and then being stigmatised as unwilling to work. A Swedish mother spoke of the "impossible choice" between reducing her work hours to care for her children with special needs and facing severe economic hardship. These testimonies highlighted a "snowball effect" where delays and bureaucratic inflexibility in public services exacerbate crises rather than resolving them.

Dr. Nieuwenhuis concluded that the barriers are not a lack of agency - families were shown to be resourceful and prioritised their children's well-being against all odds - but profound structural and operational weaknesses in the welfare state. In response, the rEUsilience project proposed 15 policy principles centred on three pillars: better income support, closing the childcare gap, and providing comprehensive family support services. These principles are characterised by a firm commitment to universalism, adequate benefit levels, policy complementarity, and a crucial shift to considering the family as a unit, rather than focusing solely on individuals.

The Finnish response: a national integrative reform

The session then turned to Finland, where Maria Kaisa Aula, Chair of the Central Finland Wellbeing County, detailed a comprehensive national effort to address precisely the kinds of inequalities Dr. Nieuwenhuis outlined. She began by grounding the discussion in the specific realities of Finnish children, citing a recent school health study that found 8 out of 100 children can

hardly ever talk to their parents about their problems, 9 experience weekly parental violence, and 9 are bullied weekly at school. Before a major reform, she explained, the service system was "very scattered", with over 300 municipalities providing services of varying quality and availability, leading to significant inequalities and a particular lack of basic mental health services.

Ms Aula then described the broad, integrative Child and Family Services Reform Programme (LAPE), implemented nationally between 2015 and 2023. This programme was guided by a holistic approach focused on improving the entire "growth environment" of children, empowering all families, and strengthening close human relationships. A cornerstone of this reform was the creation of the '**Family Centre'**, a structure designed to gather low-threshold basic social and health services for children and families under one roof, fostering collaboration with early childhood education and care, NGOs, and parishes.

A pivotal subsequent reform in 2023 saw the reorganisation of social and health services from municipalities to 21 new wellbeing counties. Ms Aula addressed the critical question head-on: "How to ensure integration with divided responsibilities?" The answer, she detailed, lies in robust coordination mechanisms. These include common wellbeing plans for children, annual negotiations between municipalities and the county, voluntary agreements on networks, and innovative tools like **Child Budgeting -** analysing resource use across municipal and county budgets - and Child Impact Assessments for all major decisions. She stressed that while structural reform ("hardware") was necessary, it is not sufficient. True integration requires "software" - new ways of working. This involves re-educating both leaders and professionals, using evidence-based methods like "Let's Talk About Children" and "The Incredible Years" parenting programme, and crucially, integrating this cross-sectoral, child-centred approach into the university education of teachers, nurses, social workers, and doctors.

The Finnish model in practice: from local hubs to a digital portal

Marina Wetzer-Karlsson from Väestöliitto (The Family Federation of Finland) provided the final piece of the puzzle, detailing the practical rollout and current state of the Family Centre model. She explained that the concept, developed over 20 years and inspired by models in Norway and Sweden, was sped up by government grants and a co-design structure involving a national network. The core aims are to provide coordinated support, offer low-threshold help close to families' everyday lives, leverage the crucial role of NGOs for peer support, and, fundamentally, to reduce inequalities in wellbeing and the long-term costs of corrective services.

Ms Wetzer-Karlsson presented a compelling visual model of the Family Centre as a hub supporting everyday life, integrating municipal health and welfare services, county-level social and healthcare, and the vital activities of NGOs and parishes. She reported that there are now around 150 Family Centres across Finland's 21 welfare counties, with over 550 open meeting places, ensuring broad coverage. A key innovation she highlighted is the e**lectronic Family Centre**, a digital platform divided into three sections: "Omaperhe" (My Family), an information and service portal for families; a professional data bank for seamless information sharing between sectors; and "Helpperi," a dedicated portal for young people. This digital tool embodies the low-threshold, "no wrong door" philosophy, making support easily accessible and breaking down information silos between professionals.

Afternoon session

The afternoon session of Stream 4 delved into one of the most transformative trends in modern social policy: the digitalisation of family and child support. The session presented a compelling dual perspective, contrasting a broad, pan-European analysis of the challenges and opportunities with a deep dive into a global frontrunner nation that has turned digital integration from a concept into an operational reality. The overarching message was clear: when implemented thoughtfully, digitalisation can be a powerful tool for breaking administrative silos, preventing non-take-up of benefits, and proactively supporting families in need.

The European landscape: progress, pitfalls, and prudence

Claudia Peroni from the European Foundation for the Improvement of Living and Working Conditions (Eurofound) opened the session with a comprehensive mapping of the digitalisation of social protection across the EU, with a specific focus on family and child benefits. Her presentation provided a crucial contextual framework, identifying both the significant advances and the persistent hurdles. She revealed that child benefits are among the most automated social transfers in the Union, with countries like Austria, Estonia, and Finland leading the way in automatically granting benefits upon the birth or registration of a child. This automation is primarily enabled by two factors: the benefits are often universal (not means-tested) and entitlement can be easily verified through interconnected data sources, such as population and tax registers.

However, Ms Peroni meticulously outlined four key challenges that member states continue to face. The first is **fragmentation**, which can occur across different providers, governance levels, or categories of beneficiaries (for instance, self-employed vs. employees). This fragmentation complicates the user experience and leads to uneven service quality. The second, and perhaps most fundamental challenge, is **data access and management**. Verifying entitlements often requires cross-checking multiple databases that are not interconnected due to legal, technical, or practical obstacles. Eurofound identified promising solutions emerging, such as unified digital interfaces in the Czech Republic, specific data-sharing agreements in Portugal and Slovenia, and streamlined centralised procedures in Denmark.

The third challenge revolves around the **ethical and practical dimensions of automation**. While automation can dramatically simplify procedures and save resources, it remains a "legislative grey area". Peroni pointed to the Dutch child benefit scandal as a stark warning of the risks associated with opaque algorithms and a lack of human oversight. She emphasised the need for robust safeguards, including transparency about the use of algorithms and ensuring human intervention

remains possible for complex or atypical cases. Finally, she addressed the critical issue of the **digital divide**. Digitalisation risks excluding the very people who need support the most - such as single parents, low-income households, or those with a migrant background - if it leads to the reduction of paper-based or in-person application channels. Paradoxically, she noted, the full automation of benefits, which removes the need for any application at all, can be a powerful tool to overcome this divide. Her key takeaways stressed that success depends on improving interoperability, proactively addressing atypical situations and digital exclusion, ensuring transparency in automation, and maintaining an unwavering user-centric focus throughout the digitalisation process.

The Estonian example: from proactive payments to life event services

Hanna Vseviov, Director of Family Policy at the Estonian Ministry of Social Affairs, then presented a live case study of a nation that has built an integrated digital support system. She set the stage by highlighting Estonia's unique digital "readiness", with 95% of households having internet access and the country ranking first in the EU for the share of online public services. This high level of trust and infrastructure is the bedrock upon which their system is built.

Ms Vseviov detailed three examples of Estonian digital innovation. The first is the **proactive payment of family benefits**, operational since 2016. This system automatically calculates and pays benefits without any application or paperwork, thanks to seamless data exchange between four state information systems (health, population, taxes, and benefits). This has led to a 98% customer satisfaction rate and, crucially, frees up caseworkers to dedicate their time to unique and complex family situations, such as parental disputes.

The second example is the development of **"life event" services**, which bundle multiple related services into a single, user-centric process. The service for the "birth of a child" brings together 14 different services on the state portal. The most ambitious model, however, is the life event service for a **"child with a health**

problem". Here, Estonia's system moves from being reactive to genuinely proactive and supportive. When a doctor diagnoses a child with a condition that may lead to a disability, the parent's consent triggers an automatic data transfer from the Health Information System to the Social Services and Benefits systems. Crucially, it is the assessed *support needs* of the child, not the raw diagnosis, that are sent to the municipality's child welfare specialist. The system then mandates that the specialist must contact the family within 10 working days to offer support, all before the family has had to navigate a single application form.

This model fundamentally reorients the relationship between the state and the family. It shifts the burden of initiating support from the overwhelmed parent to the competent public authority, ensuring help is offered at the moment of need. A personalised dashboard on the state portal allows families to see their rights and available support across all levels of government, creating unprecedented transparency. Ms Vseviov concluded by acknowledging the preconditions for such a system: high-quality data, a delicate balance between data protection and proactive support, a clear division of responsibilities between local and central government, and, above all, a foundational trust in public institutions and a robust digital infrastructure like Estonia's secure data exchange layer, X-Road.

In conclusion, the session illustrated a clear trajectory for the future of family support. The European analysis provided a (necessary) cautionary map of the digital journey, highlighting risks like fragmentation and exclusion, whereas Estonia's pioneering work, offered a compelling "final destination": a seamless, proactive, and humane digital welfare state where bureaucratic silos are rendered obsolete by inter-operable data, and families are met with support rather than paperwork at the most challenging moments of their lives.

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