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Flanders: their  
vulnerability within  
the citizenship  
paradigm**

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# Families of children with special needs in Flanders: their vulnerability within the citizenship paradigm

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## **ABSTRACT**

Although societies, as a reaction to the social model of disability, try to integrate and empower people with impairments and disadvantaged families through inclusive policies, these population groups continue to experience integration difficulties. Besides negative changes in health, a weak socioeconomic situation of a family can have a considerable impact on the empowerment and integration opportunities that are available for these families. Using results of analyses on Flemish data, this article explores the socioeconomic situations of Flemish families that have children with special needs. The results indicate that families with a child with special needs find themselves more often in a weak socioeconomic situation, but having a disabled child does not directly undermine the socioeconomic living circumstances of the family, although it does place a heavy strain on familial relationships. These results provide valuable insights into the capacity of these families to fulfil their roles as empowered citizens.

### **Keywords**

child with special needs, familial situation, socioeconomic position, Flanders, empowerment

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## 1. Introduction

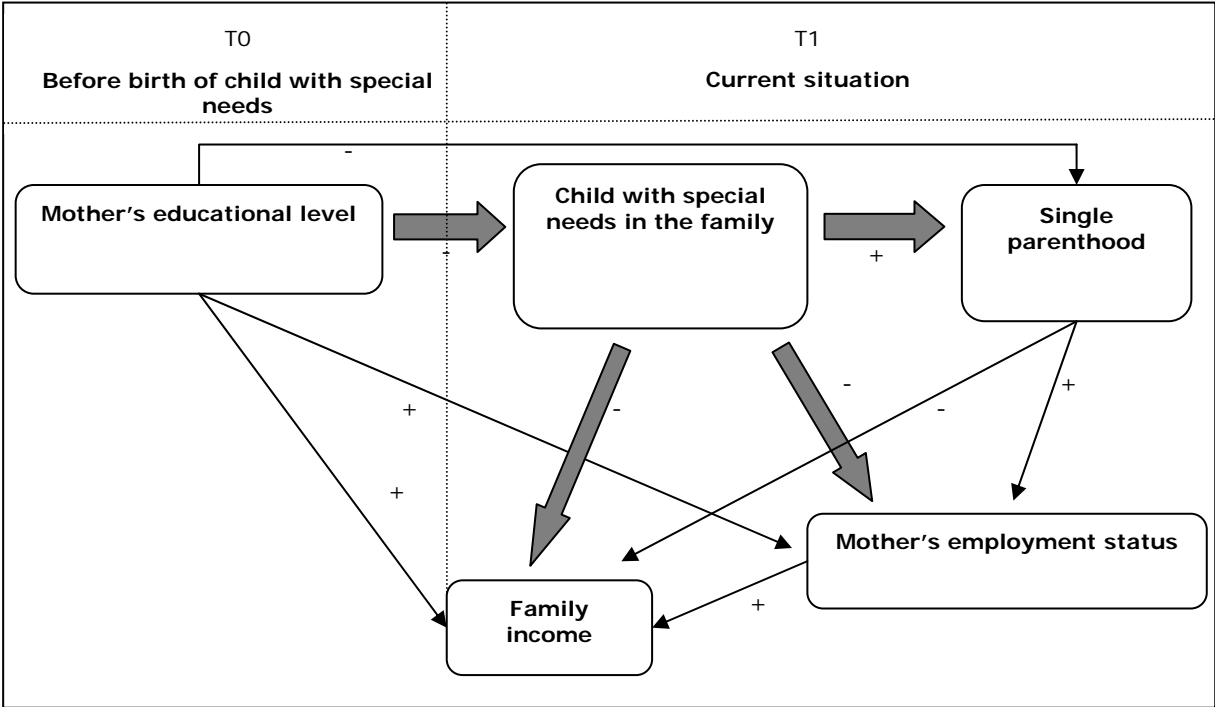
In the disability sector, a transition can be observed from the individual-theoretical defect model to the social-theoretical citizenship model (Brett, 2002; Van Genneep, 2000). It has come to be accepted that it is society that disables us, and that disabled people are an oppressed social group (Finkelstein, 2001). Empowerment has become the central topic of this emerging paradigm. Within this postmodern paradigm of citizenship, people with disabilities have legal, economic and social rights and obligations that enhance their control of their own existence (Van Puyenbroeck et al., 2001), and they must be granted the opportunity to participate in society. The focus is on personal budgets and integrated services such as ambulatory support, integrated and inclusive education and inclusive child care. A suitable environment must be created for various target groups. In Europe, the emphasis lies also on children, and children with impairments are at high risk of being excluded socially (Thompson and Emira, 2011; Dowling and Dolan, 2010).

Furthermore, socioeconomic inequality remains an ongoing problem, and we therefore wish to determine the extent to which recurring Matthew effects may be operative in the development of this emerging citizenship model. In Flanders, as in the rest of Europe, many families in lower socioeconomic positions continue to experience integration difficulties in areas such as housing, education, employment, leisure and cultural activities, despite existing measures designed to improve accessibility through inclusive policy. For this reason, deviations in socioeconomic status and health within a family can have a considerable impact on the empowerment and integration opportunities that are available (Calton, 2010).

In addition, the scientific literature asserts that (a) low socioeconomic status influences the risk of illness and disability (i.e. the 'social causation' hypothesis) and (b) these illnesses are accompanied by further adverse social effects in living circumstances (i.e. the 'health selection' hypothesis) (Warren, 2009; Desnerck, 2007). This formulation fails to distinguish between generations, however, and is not situated within the context of families. We apply these theories to the link between the socioeconomic status of a family and the presence of children with special needs in the family. The study focuses on (a) children's illnesses and disabilities and the impact of their conditions on the family, and (b) the impact of the family's socioeconomic situation on the likelihood of having a child with special needs. Determining the socioeconomic situation of these families will make it possible to identify their capacity to fulfil their roles as empowered citizens, and it will also reveal the possible ineffectiveness of new initiatives for certain target groups within this citizenship model. Recent insights into this matter are important for ensuring that support and care services allow all families to access the measures aimed at integration and inclusion. This will improve the quality of life of children with special needs, as well as that of their families.

For methodological reasons (an absence of longitudinal data) and for reasons of content, we use our own empirical data to test correlations from the general literature that indicate the existence of a bi-directional influence between the socioeconomic situation of the family and the presence of a child with special needs in the family. Figure 1 shows a hypothetical conceptual model complete with the variables used and their influences shown logically in time. The primary model with wide arrows is supplemented by other possible correlations between the main variables (thin arrows) to form a full model. This study and its results focus chiefly on the primary model, though the full model is also addressed.

Figure 1. Initial hypothetical conceptual model



**1.1. The conceptual model in the international literature**

Correlations from the general literature indicate that: the mother's educational level affects the likelihood of having a child with special needs in the family; the presence of a child with special needs in the family affects the partner situation; and a child with special needs influences the mother's employment status and therefore family income.

Empirical research attributes weaker socioeconomic capacities to families of children with special needs. The retrospective variable 'mother's educational level' is considered a causal factor, as previous studies have shown that better-educated mothers have healthier children. Education has a positive impact on health behaviour, the use of preventive care and birth weight, and a negative impact on smoking during pregnancy and teenage pregnancy (Cutler et al., 2008; Kearney and Levine, 2007; Cutler and Muney, 2009; Currie and Moretti, 2003). It can be stated that

socioeconomic situation, represented by the mother's educational level, is a 'fundamental cause' of the presence of a child with special needs in the family. Socioeconomic status as a fundamental cause emphasises the differential distribution of control over health and its implications for the resulting distribution of health outcomes. Those with a higher socioeconomic status benefit more from scientific knowledge and technological advances than do others. They differ in terms of spillovers (social relations), finances, habitus and treatment received from social institutions (Luftey and Freese, 2010).

The second factor in the model deals with the question of whether the presence of a child with special needs affects the familial relationship, where the main variable is the partner situation. Existing research states that a child's behavioural disorders, maladjustments, aggression and similar indicators are positively correlated with relational conflicts. A child's behavioural problems and the burden of care related to a child's physical disability cause additional stress in the relationship between parents, which can lead to relationship dissolution. The severity of the disability plays an important role in this process (Al-Krenawi et al., 2011; Bennet and Hay, 2007; Kersch et al., 2006; Reichman et al., 2008).

The link between the presence of a child with special needs and the employment status of the mother has been examined in a number of studies, and research has shown that the health problems or disabilities of children have a negative impact on the employment of the mother. Mothers of children with special needs more often work part-time, and they are more likely to be inactive on the labour market (Gorden et al., 2007; Loprest and Davidoff, 2004; Reichman et al., 2008). They face special difficulties in their efforts to combine work and family, due to the extraordinary amounts of time required by children with special needs, in addition to the lack of adequate and affordable childcare (also within the child's own social environment). Those who are employed are burdened with a heavy workload due to the additional care required by their children (Shearn and Todd, 2000; Stiell et al., 2006).

Finally, we consider the influence of the presence of a child with special needs on the family income. In general, the median income of households with children with disabilities is lower than that of households with children who do not have disabilities. At the same time, however, the families of children with special needs actually require a higher-than-average income, due to the increasing direct and indirect costs related to the specific needs of their children (e.g. medicines, specialised childcare, adapted transport). These additional costs increase the risk of poverty (Blackburn et al., 2010; Emerson and Hatton, 2007; Kiernan and Mensah, 2009).

## **1.2. Resulting hypotheses**

Our research tests three main hypotheses (see Figure 1), in response to the associated research questions:

- 1) Does the mother's educational level affect the likelihood of having a child with special needs in the family?

The mother's educational level is measured as a retrospective variable, based on the highest level of education completed by the mother, generally attained before the birth of her first child.

- 2) Does the presence of a child with special needs affect familial relationships?

This question focuses on the impact of the burden of care for a child with special needs on the partner situation in the family. Is there a higher likelihood of single parenthood?

- 3) Does the presence of a child with special needs correlate with the current socioeconomic situation of the family?

We concentrate on the dependent variable 'mother's present employment status' and on the variable 'family income'.

## **2. Data and method**

The data used for this study were derived from the FFCS (Flemish Families and Care Survey) database, which was realised as part of the 'Care for young children in Flanders' project (Flanders is the northern region of Belgium), which involved a large-scale survey of more than 2800 families. The research population consisted of all Flemish families in which the youngest child was under 15 years old. Four target groups were distinguished: (1) families with at least one child between the ages of 3 and 15 years ( $n = 654$ ); (2) families with at least one child under the age of 3 ( $n = 1\,275$ ); (3) families with a child with a disability recognised by the Flemish Agency for People with Disabilities ( $n = 458$ ); and (4) disadvantaged families ( $n = 434$ ). The sampling entity in this study was the family, and not the individual. Data were gathered through face-to-face interviews carried out between November 2004 and June 2005 by experienced investigators who were familiar with the CAPI method.

### **2.1. Definition of a child with special needs**

This research focuses on children with special needs (Target group 3, as described above). The overrepresentation of this group was determined by administrative sampling from the database of the Flemish Agency for People with Disabilities. In our study, we are less interested in the official listings contained in administrative data than in the actual presence of special needs in the family (as perceived by the families). For this reason, we measured the common-sense understanding according to responses to the following question: 'Does the child have special needs?'. Ghysels and

Debacker (2007) use a broad definition of the category 'children with special needs':

*A child with special needs is a child that needs more care and guidance than most children of his/her age because he/she has physical, mental or emotional problems or because there are problems with his/her behaviour or development.*

Parents further specified the nature of the special needs according to ten answer categories. These categories were re-coded into two larger categories: (1) disability: hearing impairment or deafness, visual impairment or blindness, protracted illness, physical disability, mental disability and/or autism spectrum disorders; and (2) attitude and learning problems (AL problems): problems with attention, learning, emotions and behaviour, as well as psychological problems.

## **2.2. Method of analysis**

Several regression analyses were performed in order to identify correlations between the socioeconomic situation of a family and the presence of a child with special needs. We used binary logistic regression analysis with 'child with special needs in the family' as the dependent variable. When the socioeconomic status of the family was the dependent variable, we used multivariate linear regression and multinomial logistic regression analyses. Various control variables were included. Interaction effects were tested and removed due to non-significance.

The regression models were executed within a sub-file of the complete dataset. As mentioned above, the FFCS dataset consists of four different target groups. Samples 1 (and 2), 3 and 4 are drawn from different populations. The addition of groups 3 and 4 led to the overrepresentation of disadvantaged families and families with children with special needs. It was necessary to neutralise this overrepresentation in order to allow valid statements that could apply to the entire population and to compare families of children with special needs to families that do not have children with special needs. For this reason, we begin by presenting the results of the regression analyses that involve only Groups 1 and 2. The sample included 262 families with at least one child with special needs and 1656 families that did not have children with special needs. The addition of a weighting variable allows us to create a representative picture of parent information from all families with children in Flanders. Three criteria were used as references for the weighting: family size, the age of the youngest child and the sampling stratum.

### 3. Results

Empirical research has shown that children with special needs impose a burden of care on the family. Moreover, descriptive research has established that the socioeconomic position of a family (as reflected in the mother's educational level) can affect the likelihood that a family will have children with special needs. The following analyses examine these links for families in Flanders. We first examine whether the mother's educational level influences the likelihood that a child with special needs will be present in the family. We then describe the impact that the presence of a child with special needs in the family has on the partner situation. Third, we discuss the influence of the presence of a child with special needs on the mother's employment status and its correlation with family income.

#### 3.1. Mother's educational level as a risk factor

The results presented in Table 1 confirm the correlation between the mother's educational level and the likelihood that a child with special needs will be present in the family. The results of this logistic regression model indicated that as the mother's educational level increased, the likelihood of having a child with special needs in the family decreased.

Table 1. Binary logistic regression analysis with 'child with special needs in the family' as the dependent variable and 'mother's educational level' as the independent variable.

	B	Sig.	Exp(B) Sub-file
Mother's educational level (reference category = higher education)		.000	
Primary education or less	1.134	.000	3.108
Lower secondary education	.820	.000	2.270
Higher secondary education	.244	.147	1.277
Number of children in the family (reference category = 1)		.000	
2	1.255	.000	3.507
3	1.609	.000	4.999
4	2.375	.000	10.753
Mother's age	.052	.000	1.053
Constant	-5.053	.000	.006

**Cox & Snell R<sup>2</sup> = 0.077; Nagelkerke R<sup>2</sup> = 0.140 ; n=1857**

This table also indicates that the likelihood of having a child with special needs in the family increased along with the number of children in the family (up to the maximum of four children that could be reported in the interview). Second, the results show that the likelihood of having a child with special needs increased along with the age of the mother. The addition of the variable 'chronic disease or disability of the mother' to the regression model produced similar results, and this control variable had a positive effect on the likelihood of having a child with special needs in the family (COR = 2.277,  $p < 0.000$ ,  $R^2 = 0.151$ ). The standardised logistic



coefficients indicate a strong likelihood of having a child with special needs in the family when the mother's educational level is primary education or lower, when there are 4 children or more in the family and when the mother is in poor health.

Distant causes should also be taken into account. The correlations described here cannot be interpreted as purely direct links. Educational level is more directly related to a particular lifestyle, which exerts a more direct influence on the likelihood of having a child with special needs in the family.

### 3.2. Familial burden

With regards to the partner situation in families of children with special needs compared to that in other families, the results shown in Table 2 reveal significantly more (OR = 0.332,  $p < 0.000$ ) single mothers in families of children with special needs.

Table 2. Binary logistic regression analysis with 'presence of child with special needs in the family' as the independent variable and 'partner situation' as the dependent variable.

	B	Sig.	Exp(B)
Child with special needs in the family	<b>-1.102</b>	<b>.000</b>	<b>.332</b>
Mother's health status (reference category = good)		<b>.000</b>	
Mother in poor health	<b>-1.516</b>	<b>.000</b>	<b>.220</b>
Mother in reasonably good health	<b>-.402</b>	<b>.041</b>	<b>.669</b>
Mother's educational level (reference category = higher education)		<b>.001</b>	
Primary education or less	<b>-.852</b>	<b>.001</b>	<b>.426</b>
Lower secondary education	<b>-.545</b>	<b>.011</b>	<b>.580</b>
Higher secondary education	<b>-.500</b>	<b>.002</b>	<b>.606</b>
Number of children in the family (reference category = 1)		<b>.000</b>	
2	<b>.489</b>	<b>.002</b>	<b>1.630</b>
3	<b>1.179</b>	<b>.000</b>	<b>3.252</b>
4	<b>.942</b>	<b>.026</b>	<b>2.565</b>
Mother's age	<b>.000</b>	<b>.988</b>	<b>1.000</b>
Constant	<b>2.152</b>	<b>.000</b>	<b>8.598</b>
<b>Reference category for the dependent variable = single; Cox &amp; Snell R<sup>2</sup> = 0.057; Nagelkerke R<sup>2</sup> = 0.101</b>			

For families of children with special needs, the odds were lower than they were for other families; in other words, families of children with special needs were less likely than other families to report a 'couple' partner status. The table also shows that the risk of single parenthood increased as the mother's educational level and the mother's health situation decreased, but it decreased along with the number of children in the family.

### 3.3. Influence on the mother's employment situation

Descriptive analyses have asserted that mothers of children with special needs are more likely to be unemployed than other mothers. In Table 3, the presented multinomial logistic regression with control variables on the sub-file generated conditional odds ratios in the model, which indicates that mothers of children with special needs were more likely to work part-time or to be unemployed. These correlations were not statistically significant, however, so the correlation resulting from the descriptive analyses must be explained by factors other than the presence of a child with special needs in the family.

Results from the regression model in Table 3 show that the only variables having a significant effect on the mother's working situation were her age, partner situation and educational level. The likelihood of part-time employment increased along with the mother's age, and for mothers whose educational level was lower than 'higher education'. Single mothers were more likely to work full-time than mothers who were in relationships. Our analyses revealed additional correlations when comparing full-time employment with unemployment. All of the control variables were significantly related. The risk of unemployment increased as the mother's educational level and health status decreased. Single mothers were less likely to be unemployed than mothers in relationships. The likelihood of unemployment also decreased as the number of children in the family increased.

Table 3. Multinomial logistic regression: Influence of having a child with special needs on the mother's employment situation.

Mother's employment status		B	Sig.	Exp(B)
Part-time	Intercept	-1.697	.001	
	Mother's age	.033	.000	1.034
	Child with special needs in the family	.116	.527	1.123
	One child in the family	.180	.645	1.197
	Two children in the family	.392	.313	1.480
	Three children in the family	.528	.209	1.696
	Single mother	-.580	.001	.560
	Mother in poor health	.998	.230	2.713
	Mother in reasonably good health	.200	.326	1.221
	Primary education or less	.567	.077	1.762
	Lower secondary education	.552	.004	1.737
	Higher secondary education	.651	.000	1.918
	Housing property	.102	.567	1.107
	Unemployed	Intercept	-.863	.110
Mother's age		.027	.014	1.027
Child with special needs in the family		.316	.118	1.372
One child in the family		-1.204	.001	.300
Two children in the family		-.994	.005	.370
Three children in the family		-.298	.445	.742
Single mother		-1.042	.000	.353
Mother in poor health		3.293	.000	26.930
Mother in reasonably good health		1.111	.000	3.038
Primary education or less		2.240	.000	9.392
Lower secondary education		1.286	.000	3.619
Higher secondary education		1.120	.000	3.066
Housing property		-.430	.026	.650

Reference category for the dependent variable = Full-time work; Cox & Snell R<sup>2</sup> = 0.155;  
Nagelkerke R<sup>2</sup> = 0.176

The standardised logistic coefficients indicated that the mother’s educational level, the mother’s health situation and the number of children in the family had a significant effect on the mother’s employment situation. We can therefore conclude that the socioeconomic and family variables had a stronger influence on the mother’s employment status than the presence of a child with special needs in the family.

**3.4. A comparison of family incomes**

In this part of the article, we consider the correlation between the presence of a child with special needs and the family income. Are families of children with special needs at a greater financial disadvantage? Leaving aside the possible increasing direct and indirect costs related to the care of children with special needs, we focus on comparing the average disposable family income of families of children with special needs to that of other families.

Table 4. Independent Samples T-test on family income (sub-file).

	Child with special needs in the family	N	Mean	Std. Deviation	Std. Error Mean
Family income, without outliers and 98 % range	No child with special needs	<b>1576</b>	<b>3307.2568</b>	<b>1417.01333</b>	<b>35.69398</b>
	At least one child with special needs	<b>232</b>	<b>3239.8275</b>	<b>1524.70645</b>	<b>100.05721</b>

P < 0.526

In the weighted sub-file, the Independent Samples T-test indicated that families with at least one child with special needs had a lower average income (approximately EUR 68 less) than other families (Table 4). This difference was not statistically significant, however, and cannot be generalised. However, when the distribution of the mother’s educational level and partner situation was the same for mothers with a child with special needs and mothers without, the average income of families with at least one child with special needs was actually a little higher. These correlations, which may seem contradictory at first glance, can be explained through a regression model with control variables (Table 5).

Table 5. Regression analysis of the influence of a child with special needs on family income, with control variables.

	B sub file	Beta sub file	Significance sub file
(Constant)	7.726		.000
Child with special needs	.043	.030	.096
Couple	.141	.103	.078
Part-time working father	.002	.001	.973
Unemployed father	-.292	-.130	.000
Part-time working mother	-.129	-.132	.000
Unemployed mother	-.296	-.266	.000
Mother with primary education or less	-.258	-.128	.000
Mother with lower secondary education	-.257	-.179	.000
Mother with higher secondary education	-.151	-.153	.000
Father with primary education or less	-.253	-.119	.000
Father with lower secondary education	-.181	-.121	.000
Father with higher secondary education	-.130	-.125	.000
Age of mother	.011	.155	.000
Age of father	.003	.074	.061
Two children	.077	.078	.000
Three children	.201	.126	.000
Four children	.328	.129	.000

**Dependent variable: family income (Box-Cox transformation)**  
**Adjusted R<sup>2</sup> = 0.488**

The model showed no correlation between the presence of a child with special needs in the family and the family income. The influencing factors were the educational levels and employment situations of both the mother and the father. Family income decreased when educational level was lower, when the mother or father was unemployed and when the mother was working part-time. Previous analyses have shown, however, that families of children with special needs are in a weaker position in these areas, thus implying an indirect link between family income and the presence of a child with special needs in the family. Family income increased along with the mother's age and the number of children in the family. The effect of partner situation on family income became insignificant when the influence of the number of children in the family was added. These results indicate that socioeconomic situation has a strong impact on family income. When the mother's educational level was the same in the two types of families, the effect described disappeared. Descriptive analyses indicate that the families of children with special needs are eligible for additional benefits, which may increase their family income.

### **3.5. Experienced extra costs**

Until now, the 'disability' of the family seemed to be more influential than the disability of the child as an explaining factor of the socioeconomic position of families with a child with special needs. To make the outline more complete, it is necessary to look at the extra costs that a family with a child with special needs experiences. Several studies affirmed that the presence of a child with special needs in the family increases the direct

and indirect family costs and those additional costs are strongly related to the use of care services, medical aids and transportation costs (Chartrand Beauregard, 1999; JR, 1998; Zaidi, 2005 and Jones and O'Donnell, 1995). Our focus in this paragraph goes to the use of general care services and experienced extra costs of families with a child with special needs.

Firstly, Van Landeghem et al. (2007) pointed to the higher use of health care institutions and care providers by children with special needs in Flanders. Children with special needs made more use of general practitioners, specialists, physiotherapists, psychiatrists, speech therapists and tutoring. When we looked more in detail to the higher use of care services by children with special needs (with exception of VAPH-services), we found that children with special needs used more frequently hospitals and additional help from schools.

Table 6 shows the results of binomial logistic regression analyses with the use of general care providers and health care institutions as the dependent variable. The regression analyses indicate that the presence of special needs influenced the use of the care services. Children with special needs used significantly more welfare providers and health care institutions. The age of the child and the number of children in the family influenced the use of the care providers negatively. This can be attributed to the better knowledge concerning care when the child grows and a postponing behaviour due to increasing care costs when the number of children in the family increases.

Table 6. Logistic regression: influencing factors of the use of care providers and health care institutions.

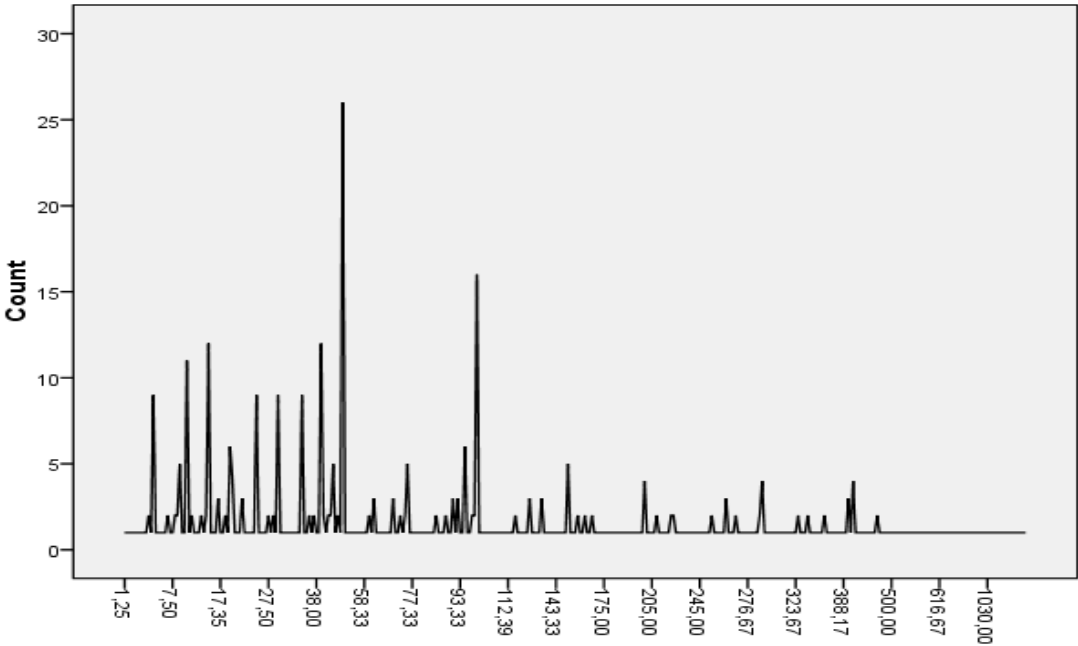
	B	S.E.	Sig. Weighted sub-file	Exp(B) weighted sub-file
Child has special needs	2,655	,496	,000	14,221
Number of children in the family (<16)	-,230	,052	,000	,795
Single parenthood	,211	,177	,232	1,235
Mother's educational level (reference category = higher education)			,160	
Primary education or less	-,335	,231	,147	,715
Lower secondary education	-,143	,182	,431	,867
Higher secondary education	,122	,132	,355	1,129
Child's age	-,129	,016	,000	,879
Mother's employment status (reference category= full-time employment)			,851	
Part-time	-,065	,132	,620	,937
inactive	-,077	,155	,619	,926
Mother's age	,005	,012	,674	1,005
Equivalent family income	,000	,000	,821	1,000
Constant	3,011	,476	,000	20,314

**Cox & Snell R Square= 0.061; Nagelkerke R Square= 0.108**

Secondly, we concentrated our analyses on the experienced extra costs related to the child's special needs. 60% of our sample of families with a child with special needs experienced extra costs for the support of their child with special needs. These extra costs varied between 1.25 Euro and

1,500 Euro a month. Graphic 1 shows that most of the families with a child with special needs experienced costs below 100 Euro a month and the costs were mainly related to expenditures for medicines (37,5%), medical care (33,8%), the use of health care institutions (15%) and school related exercises and guidance (26,7%). The expenditures for external child care were lower for children with special needs than for other children. This can be explained by the use of strongly subsidised VAPH-services by children with special needs authorized by the VAPH.

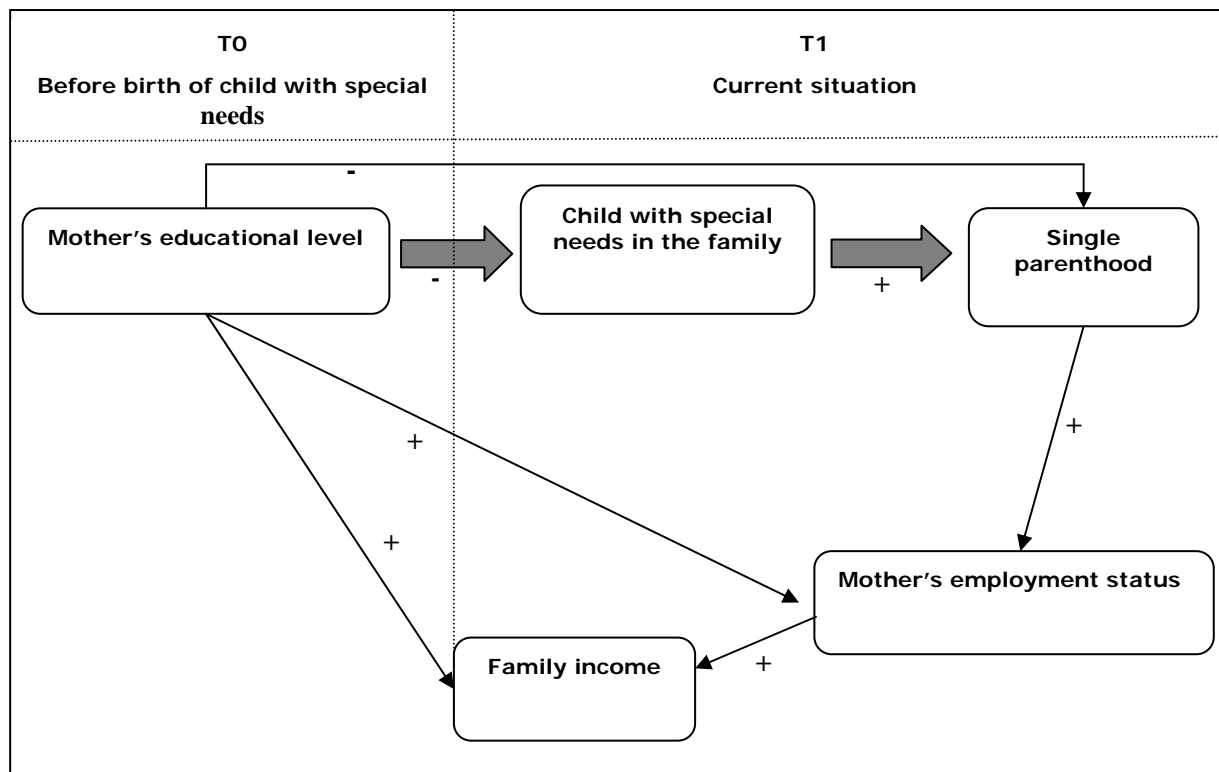
Graph 1. Spreading of experienced extra costs a month.



#### 4. Discussion

The findings described above reflect nuanced results regarding the three main hypotheses. The socioeconomic situation of families of children with special needs tends to be lower than that of other families. This result is largely due to the socioeconomic position of the mother and the impact of the presence of a child with special needs on familial relationships (Figure 2).

Figure 2. Final empirical model of the effect of family composition and current socioeconomic situation.



#### 4.1. Socioeconomic capacity of Flemish families with a child with special needs

Empirical analysis and the general literature show that the mother's educational level is linked to the presence of children with special needs in the family, indicating that a socioeconomic gradient applies to the families of children with special needs in Flanders. We use the variable 'mother's educational level' to reflect the family's socioeconomic capacity because of its retrospective character. The likelihood of having a child with special needs in the family increases as the mother's educational level decreases.

The educational level of the mother is considered a distant and fundamental cause within the context of the 'social causation hypothesis'. Many characteristics are linked to educational level, and the various combinations of these characteristics may have a more direct impact on the likelihood that there will be a child with special needs in the family.

#### 4.2. Familial relationships as a reinforcing factor

As stated in the previous paragraph, the socioeconomic situation (as reflected in the mother's educational level) of families of children with special needs tends to be more disadvantaged than those of other families. On the other hand, our results also show that the presence of a child with special needs in the family has no direct influence on the

employment status of the mother, and does not directly correlate with family income. Our empirical analyses provide no evidence that mothers of children with special needs are more likely to stay at home because of the burden of care related to these children. An indirect correlation does exist, however, because of the link between educational level and employment status.

The burden of care associated with children with special needs becomes apparent when analysing the partner situation in these families. The presence of children with special needs in the family increases the likelihood of single parenthood. The direct influence of the presence of a child with special needs on partner situation reinforces the weaker socioeconomic position of these families. Single parents are able to access the labour market, however, in part because of the wide availability of substitute childcare, which may help to improve their weaker financial position. Belgium is one of the few countries to have achieved the Lisbon goals with regard to sufficient childcare (European Commission, 2008). Other research indicates that single parents make more frequent use of childcare than parents who are in a relationship, regardless of the presence or absence of children with special needs.

The relationship between family income and the presence of a child with special needs is not straightforward. The lower educational levels that are associated with mothers in families of children with special needs are responsible for the lower socioeconomic positions of these families, and increase the likelihood that their income will be lower in the same way. When we compare educational levels across family types, however, we see that the average income of families with children with special needs is slightly higher for each band. This could be due to the special benefits that these families receive.

### **4.3. *Limitations and future research***

Although this study is restricted by the use of non-longitudinal data, the focus on the models discussed above allows a more profound examination of interesting variables identified in the literature. It also improves the clarity with which certain patterns can be presented. It is important to bear in mind that the variable 'child with special needs in the family' was measured according to the subjective judgement of the parents; this may have resulted in bias. However, other studies (e.g. Benitez-Silva et al., 2000), have stated that results based on subjective questioning strongly correspond to actual situations. In addition, we see the term 'disability' as a socially constructed concept that changes over time.

Additional research is required. In relation to this article, it is important to investigate the needs that these families have regarding the required care.



## 5. Conclusion

As stated in the introduction, the Flemish government is considering a major reorganisation of the disability care sector in order to incorporate an emerging paradigm in which the central terms are the rights, duties and inclusion of persons with special needs, and consequently children with special needs and their families (citizenship model). The wider focus lies on personal budgets, integrated services such as ambulatory support for families with a child with special needs, integrated inclusive education and inclusive child care. However, it should also be taken into account that not all families with a child with special needs have equal capacities and resources needed to empower themselves. The danger of this reorganisation is that Matthew effects may continue to recur more intensely, with some family types being neglected. This is why our study also indicates the socioeconomic strengths of families with a child with special needs and outlines the influencing factors.

We can conclude that two of the three hypotheses were confirmed in our analyses of the Flemish data. The mother's educational level affects the likelihood of having a child with special needs. With regard to the mother's educational level, the socioeconomic position of families with children with special needs tends to be weaker than those of other families. The second hypothesis was also confirmed in the Flemish data. The presence of a child with special needs in the family places a heavy strain on the familial relationships, thereby increasing the risk of single parenthood. On the other hand, the presence of a child with special needs does not undermine the socioeconomic circumstances of families directly. It has no direct effect on the employment status of the mother, nor is it directly related to family income (Hypothesis 3).

It is therefore important to focus on the family as an entity. Although a variety of formal disability care services exist in Flanders, the focus of the care available does not seem to support these families adequately. Both general and specialised forms of formal support are excessively oriented towards the child alone. To be more effective, they should be aimed at all family members and their relationships. We therefore conclude that during the deinstitutionalisation and personalisation of the disability sector, and the implementation of a social inclusion policy for children with special needs, it will be important to bear in mind the weak socioeconomic status and the high number of single parents in many families with children with special needs. Policy makers must take into account the influence that these factors will have on the overall effectiveness of the measures introduced.

A second conclusion that we can draw, is that the Welfare State succeeds in the protection of the weaker groups by reducing financial expenditures. Children with special needs use more health care institutions and care providers than other children. They experience, however, little extra costs which indicates a good protection by the Social Security system and our

welfare system. Moreover, the expenditures for external child care services are lower for children with special needs than for other children. This could be the result of the use of strongly subsidised, target group specific child care services by children with special needs.

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