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Familisation and defamilisation policy in 22 European countries

Abstract: High employment and activation rates have come to be hallmark of the European Union strategy. To support the economic growth and limit the negative consequences of aging societies Member States have to attract more people into employment. Breaking down the barriers to labour market entry and re-entry, especially for women who take on family responsibilities, has become some kind of *signum temporis*. But the problem we face is not only how to encourage women to enter the labour market but how to reconcile a number of objectives: achieving gender equity, raising fertility, lowering unemployment, increasing labour market activity, improving the well-being of children. The paper compares state policy towards working families in 22 European OECD countries and their potential consequences for women's labour market activity. It develops and uses a welfare state typology based on the theoretical concept of familisation and defamilisation. After the widely recognised Esping-Andersen's typology of welfare-state has been criticised mostly by feminist authors, scholars all over the world are looking for alternative criteria to identify models which are "gender sensitive" i.e. reflect the gender differences due to caring responsibilities. The debate led to introduce a theoretical concept of (de)familisation which concentrates on the extent to which public policy supports family in its caring function. The paper focuses on the caring function of a modern family and its consequences for women labour market activity. We identify models of state policy based on three criteria: *defamilisation of care, familisation of care and defamilisation of cost of the children*. The former two were used by other authors but their methods of measuring are questioned in this paper. 'Defamilisation of cost of children' measures the taxes, tools and family benefits which remain unnoticed by many authors. The typology allows the identification of variations of state policies and thus a classification of 22 European countries investigated here.

Keywords: care (de)familisation, cost familisation, family policy, child care, welfare state typology, parental leave, family benefit, family taxation

JEL codes: J16, J08, J18, D13, H31.

There are two purposes of the paper. Firstly, we aim at proposing a new care regimes classification, using the concepts of care and cost de/familisation. Secondly, we scrutinise the concept of care familisation, which has been mostly neglected in the litera-

ture. Our ambition is to answer the question whether care familisation can be seen as reconciliation of two different approaches to female emancipation; one in the first place supporting women employment, the other basing on care economic and social valuation. In order to achieve the purpose we distinguish between two different kinds of familisation: *positive* and *negative*, and argue that the increasing number of working women (mothers) leads to transition from negative to positive care familisation, and from care familisation to care defamilisation. We argue that rich, developed democracies are in a process of transition from “negative” care familisation – forced by lack of alternatives, to a “positive” care familisation i.e. – securing, to some extent, economic independence of care-giver. The proposed differentiation allows us to question the deeply-rooted belief that care familisation is the main hindrance to women’s employment. However, we draw attention to a limited possibility of leave familising potential and highlight caring to employment subordination.

The paper is divided into three sections. We begin with a critical analysis of familisation and defamilisation concepts, which, in the second part of the paper, are the basis for identifying care regimes. In the last section we discuss the thesis of the paper.

1. Familisation and defamilisation concepts

In the time of absolute traditional model domination there was no need for debate on care. But the increasing women labour market participation rates make it a necessity and one of the major social policy issues.

Esping-Andersen (1999, p. 51) defines defamilisation as *the degree to which households’ welfare and caring responsibilities are relaxed – either via welfare state provision or via market provision*. The author highlights that defamilisation cannot be equalised with “anti-family” approach in social policy. Contrary to de-familialising regime, a familialistic system set up a framework in which a household carries responsibility for their members’ welfare- which, consequently, has not much to do with “pro-family”. The idea of defamilisation is absolutely central to the *new egalitarianism*.

The idea of defamilisation defined as above remains clear; welfare states or the market provide (eventually partly or fully subsidised) childcare facilities. With respect to childcare worth considering is the concept of familisation. It can mean two things: (1) familialising care as a consequence of the lack of available and/or affordable childcare facilities, which slightly corresponds to what Leitner (2003) called *implicit familialism*; or (2) familialising through actively encouraging parents to care for their children at home (according to Leitner: *explicit familialism*; see below).

The purpose of care familisation is to make a family responsible for childcare (and adult care). The distinction between the two kinds of care familisation occurs in their relation to care defamilisation. The former, *implicit*, can be equalised with

“no alternative”, as we propose to call it, *negative familisation*. Families have to bear care responsibilities because no other options are available. If we make a thought experiment and imagine there is no childcare facility or service available; (no nannies, crèches, kindergartens, family-carers etc.) we receive a framework of full care familisation and lack of care defamilisation. By not offering an alternative, the state indirectly “forces” families to bear a burden related to childcare. The increase in care defamilisation (measured as an effect of the policy, i.e. coverage rate) must in turn lead to a decrease in *negatively familialised* care and vice versa, an increase in care familisation has to be on care defamilisation account.

Continuing our thought experiment, imagine the scenario: the care defamilisation indicator equals zero, so what could be a consequence of developing maternity/parental leave and benefits provision? The rate of children who are taken care of by their families is already 100 percent, the only thing that is changing are the conditions of caring which are becoming better and better. The *explicit* familisation or rather *positive familisation* policy, as we prefer to call it, encourages but not forces families to care for the children. It gives an option to choose from. Long, well paid childbearing and childrearing related leaves with guaranteed return to employment encourage families to care for their children. Obviously, the positive familisation is interrelated with care defamilisation, but it is not the way as in the case of negative familisation. The familisation indicator measures “effective parental leave” (see below) which is dependent on compensation rate of the benefit paid to parents. It can increase without having an impact on the level of defamilisation measures, theoretically better paid leaves *may but do not have to* decrease defamilisation. There are many possibilities, for instance: the same number of parents decide to be on parental leave, for the same period, but they simply take advantage of better conditions. The *positive familisation* is an *option*, and must be treated as an *opportunity given to parents*, which may eventually influence the level of care defamilisation on its demand side. At the very same moment policy can be strongly (*positively!*) familialising and de-familialising.

2. Cost (de)familisation

In market economies wages are paid according to worker’s output or time and not according to the varying numbers of dependants. Raising children involves two different kinds of costs: direct spending (food, clothing, education etc.) and unearned earnings. Putting the two facts together leads to a simple conclusion; the presence of a child makes a family worse off (from a household’s budget point of view). If the cost of bringing up a new generation of citizens is recognised as a public concern and not as an exclusive responsibility of the family, states provide some kind

of horizontal redistribution between those citizens who do and those who do not take on the task of raising children. Countries differ over the extent and forms of redistributions. The economic support for the family consists of two components: on the one hand, support to families with children, on the other hand - support to dependent spouses (Montanari 2000). According to the two separate categories of economic support, we defined two different kinds of cost defamilisation: *Children Cost Defamilisation* (CHILDCD) and *Not Working Spouse Cost Defamilisation* (SPOUSECD). The two differ in their character, aims and tools.

Children Cost Defamilisation is defined as *the extent to which the state relieves a family from financial burdens caused by the presence of a child*. It aims at redistributing the cost of bringing up children from a family to the whole society. The instruments for economic support of the family with children comprise: family benefits, tax allowances, tax credits (the CHILDCD does not comprise benefits connected with maternity and parental leaves which are parts of the care familisation indicator; see below). In many countries the family benefits are based on universality principle. In the case of tax relief the rights are restricted to citizens taking part in labour market activities. An important characteristic of the Children Cost Defamilisation is their independence of the labour market status of any of the parents (at least if they are not mean-tested). Thus, if a mother decides to participate in the labour market, the level of cost defamilisation will remain unaltered.

Not Working Spouse Cost Defamilisation is defined as *the extent to which the state "allows" one of the spouses not to work, by providing financial support through the tax and benefit system*. It is crucial to understand that the tax relief or benefits rights are calculated without taking into account the presence of minor children. The SPOUSECD includes above all, tax relief in the form of: joint taxation (in three different forms: aggregation, income splitting and the family quotient), tax credits and tax allowances and benefits for a dependent spouse. In most cases the positive economic effect for families is achieved when there is a substantial difference between earnings of a wife and a husband and/or, which is connected, if one of the parents does not work on the labour market. In consequence, the solutions are regularly criticised for supporting "the male breadwinner model" by having a negative effect on the labour supply of women. A general trend observed in the European Union countries has been a move towards independent taxation and away from joint taxation (O'Donoghue and Sutherland 1999).

3. Care familisation

In all Western democracies women have a statutory right to a minimum length of maternity leave, which allows to give up for some period their work before and af-

ter delivering a baby. The differences between countries are expressed in terms of length and pay during the leave. More recent developments are other kinds of leaves: paternity leave and parental leave - which are defined as being on leave, in addition to maternity leave, to allow parents to take care of an infant or a young child (OECD, 2001). The parental leave can be seen as a guarantee that: parents do not suffer economically (when having small children), children can benefit psychologically from the presence of their parents, parents do not feel the stress of being unemployed and children can develop relationships with both their father and mother (Haas and Hwang 1999). A state can encourage individuals to care for their children by providing time rights – leaves with employment protection, and benefits rights - economic support in exchange for foregone earnings. The longer the leave and the higher the replacement rate, the stronger incentives to care for children at home, the higher level of Care Familisation (CFAM), which is defined as the time and financial incentives to care for a child at home. (The CFAM does not comprise transfers and tax benefits which are not connected with maternity/parental leaves.)

The low male take-up rates across the countries of the study (see European Commission 2005), make us focus on mothers' entitlements. Mostly women carry responsibilities for childcare. Thus, if in a country a parental leave is a family right, so women and men have the right to claim the leave, it affects the level of care familisation. But if a parental leave is an individual, non-transferable right, i.e. parents are not in the position to decide who will make use of the leave, the part reserved for the father is not taken into account when it comes to care familisation.

4. Care defamilisation

Most governments provide some kind of formal child-care arrangements. At the Barcelona summit the aims were formulated: by the year 2010 all the EU countries are expected to provide childcare to 90 per cent of children 3 years old to mandatory school age and for every third of younger children. The target expresses the will to reduce obstacles parents, mostly mothers, experience when entering a labour market. Provision of adequate childcare arrangements is commonly perceived as a *sine qua non* of allowing women to take up jobs and carry on working through their lives.

Care defamilisation (CDEF) characterises *involvement of the state or market in providing non-parental childcare*. The state can do it in two ways by producing or financing nonparental care, thus it can influence: availability (number of childcare facilities), affordability (lower the costs of childcare to parents) and quality (by regulations or by standard of provided services) of childcare facilities.

It is worth highlighting a difference between care (de)familisation and cost (de)familisation. The latter can be analysed on one scale i.e. the increase in cost defamili-

sation level leads to a decrease of cost familisation level. The same principle cannot be applied to care familisation and care defamilisation. The state policy can simultaneously support parents caring for their children at home and provide adequate childcare. The two aims are not directly interchangeable, a country strongly familising care for children does not have to have a low level of care defamilisation. Obviously, the care (de-) and familisation are interrelated. Generous incentives to care for children at home, i.e. long and well paid child-caring leaves, may substantially limit childcare facilities demand. The interrelations have to be pronounced in the measures of care (de)familisation (see: Michon 2008).

5. Why typology?

Much of the modern literature is concerned with classification of the welfare state or somehow corresponds to the identified or ideal types of welfare provision. The explanation is pragmatic and methodological at same time: classifications are particularly helpful when it comes to comparing (some aspects of) the welfare state – a matter of high complexity. A significant reduction of complexity resulting from identification of ideal types is a powerful argument for using classifications (Bonoli, 1997). It gains importance in the context of the European Union which constructs its policy towards social questions to some extent basing on the best examples of individual countries. The identification of a number of types of welfare state or policies provides the options available for reform (Bonoli 1997). Obviously, there is no deterministic relation or limited options list, but it is argued that the successful solutions, “best practices” or so, can play the role of patterns to follow.

Arts and Gelissen (2002) give three arguments for typologising: (1) typology is a valid and reliable instrument for classifying the welfare state; (2) it is a means to an end – explanation- not an end in itself - *a regime is said to reflect a set of principles or values that establishes a coherence in each country's welfare package* (Kasza 2002, p. 272); (3) theory construction on the welfare-state is still at an early stage.

There have been major changes in the structure of welfare states throughout Western democracies and comparative studies in the last two decades. After Esping-Andersen (1990) work was criticized for its “gender blindness” (see Langan & Ostner 1991, Lewis 1992, Orloff 1993) many authors have been aiming at developing a gender-balanced approach to analysing social policy across countries.

It is of crucial importance to recognise that strengthening the family in its care function by the state can adopt different forms of services, rights and financial support. Leitner (2003) mentions: time rights (parental leave), direct and indirect transfers for caring and social rights attached to care giving (i.e. pension rights, inclusion in other social security schemes or derived rights for non-employed spouse).

6. Care regimes

Leitner (2003) uses a concept of (de)familialism to develop four ideal types of familialism:

- The *explicit familialism*; which is characterised by countries actively supporting the family in its caring functions (strong familialism, weak defamilialism),
- The *optional familialism* means that institutional structures allow the family to choose whether to provide care to its members on its own, or to get relieved by the state or market (strong familialism, strong de-familialism).
- Within the *implicit familialism* the family remains neither actively supported in its caring function nor given an option to be unburdened from caring responsibilities (weak familialism, weak de-familialism).
- *De-familialism* is characterised by structures offering care services by the state, market and voluntary sector on the one hand, and lack of family care support on the other. Although the ideal types constructed by Leitner provide a useful tool for comparative work, we still face a problem how to measure the degree to which families absorb care burden, and this is why the concept proposed by the author remains problematic. She limited the criteria for matching the countries with types to two: defamilisation is measured as a rate of children aged 3 or younger who are covered by institutional (market or state) facilities, and familialistic types are those where the parental leaves are paid.

7. MEASURES. Cost defamilisation

For a comparative analysis of cost defamilisation we need an indicator that on the one hand reflects both direct and indirect transfers, on the other hand, is calculated by taking into consideration country specific conditions. We believe that the cost defamilisation indicators presented below positively tackle the problems.

$$CD (\text{cost defamilisation}) = \text{CHILDCD} + \text{SPOUSECD} \quad (1)$$

The whole cost defamilisation is a sum of Not Working Spouse Cost Defamilisation and Children Cost Defamilisation.

$$\text{CHILDCD} = 100\% \times \frac{\text{Tax reliefs and family cash transfers paid in respect of dependent children}}{\text{“Take home pay” of a single person earning average gross wage}}, \quad (2)$$

$$\text{SPOUSECD} = 100\% \times \frac{\text{Tax reliefs and family cash transfers paid in respect of non-working spouse}}{\text{"Take home pay" of a single person earning average gross wage}}. \quad (3)$$

The SPOUSECD is measured as a “marriage subsidy” defined as the difference in post-tax incomes of a married person with a dependent spouse (without taking into account the presence of minor children) and a single person (Montanari, 2000) . The cost defamilisation indicators are based on relative standards, the approach which is widely accepted in international comparisons. However, it is not free from drawbacks. As Whiteford argues replacement rates “do not provide consistent relative measures of the generosity of benefit systems”(1995; p. 7). This is due to three main factors: (1) not all aspects of benefit systems and their function are taken into account (Whiteford 1995). What does it mean in the context of cost defamilisation? According to OECD methodology (OECD, 2005) tax reliefs and family cash transfers paid in respect of dependent children between (but not including) five and twelve years of age who attend school are included. We have to be aware of another shortcoming: the replacement rates are based on entitlement rules, in many countries benefits are related to: number of children, age of children, or income of families. It can apply as well to tax reliefs, for instance there can be a large group of people whose earnings are too low to profit from them. So differences in any of the aspects mentioned could lead to changes in the countries rank; (2) average gross earnings are not comparable across countries. There are many reasons for that: the problem to determine the type of worker to use as a base for comparison, not including unearned income, separation of part-time and full-time workers, fringe benefits being or not being included (Whiteford, 1995; 10-15). We can add that in the context of the cost defamilisation the level of the indicator can be slightly misleading when comparing particular countries; for example 30 per cent in one country may result in a quite acceptable level of living standards (especially when received with average gross wage of a partner), when in another it would be absolutely unacceptable.

8. Care defamilisation

In the paper de-familisation of care refers to the extent to which the state or market relieves a family (females) from care responsibilities, the two indicators of defamilisation are based on the assessment of a coverage rates (the percentage of children in childcare facilities provided by states) of children 3 years old or younger and of children aged 4 to the school age (which is different in different countries). The cov-

erage rate for the youngest children can be somehow misleading in the countries in which the parental leave policies offer parents good opportunities to care for their offspring at home. The best example is Finland, the country with relatively modest childcare coverage rate, where since 1990 parents have been guaranteed an opportunity to use a childcare facility. Thus, to be more reliable, the measure of care de-familisation for children 0-3 years old, partly reflects the generosity of parental leaves offered to parents.

$$\text{CDEF} = 100\% \times \frac{\text{Childcare coverage rate for children 0-3 years old}}{(\text{156}^1 - \text{number of weeks with full replacement rate})/156} \quad (4)$$

In the case of care defamilisation for children older than three years till the mandatory school age, there is no need to take into account the factor of parental leaves because in most countries the entitlements finish before the child is 3 years old. So to measure the care defamilisation we use the childcare coverage rate for children aged 3 to compulsory school age:

$$\text{CDEF} = \text{childcare coverage rate for children aged 3 to mandatory school age.} \quad (5)$$

Care defamilisation indicator is limited to the state provided and/or (fully of partly) financed childcare facilities, which does not fully encompass all the forms of relieving parents from care responsibilities. It does not take into account care provided on the non-regular basis. We can expect that in some countries adult family members other than parents, friends or neighbours can care for the children, which is not reflected in the official data. Similarly, childminders paid directly by parents, but not officially registered. In this context it is possible to distinguish three forms of care defamilisation; *by the state*, *by the market* (paid, but not provided or co-financed by the state), and *unpaid* defamilisation (provided for “free” or on the exchange basis). The problem with the three kinds of care defamilisation is availability and comparability of data – (the estimation for “old” 15 EU countries was made with use of ECHP data (Michon, 2008).

9. Care familisation

The main idea behind care defamilisation is to unburden parents from care responsibilities. The main point of familisation is to make parents care for their offspring

¹ 156 – is the number of weeks during three years 3 · 52 weeks = 156.

at home. The purpose can be fulfilled in two ways: a positive one (the state supports the family in their care responsibilities) and a negative one (the state “forces” families to care for their children by not offering any other option (that is what Leitner calls “implicit familialism”). The measure of care familisation proposed in the paper reflects only the “positive” part. To measure care familisation Leitner (2003; 360) simply distinguishes between paid and unpaid parental leaves. Being paid and having employment guarantee can be a strong incentive to suspend labour market participation. Thus, the indicator shows a very important aspect of leave policy and strength of care familisation. However, the approach has the limitations of nominal measurement i.e. they are meant to identify categories but there is no intrinsic ordering to the categories. This narrows interpretations of the results to: familialising or not familialising state policy. The method can lead to misleading results because it does not distinguish between well and poorly paid leaves arrangements. Bambra (2004) uses the maternity leave compensation (level of replacement income) and compensated maternity leave (the length of time for which women can take a paid maternity leave) as two separate measures. We decided to use the measure of “effective leave” (see below) which allows to rank countries according to the strength of care familisation.

$$\text{CFAM} = \frac{\text{WEEKS OF LEAVE} \cdot \text{REPLACEMENT RATE}^2}{100} . \quad (6)$$

We face a problem of choice between detailed comparisons which do not allow for a useful simplification versus identifying models (regimes) to see the policy in a wider, but not so detailed, perspective. Comparing different countries is always a problem of compromise and it is not going to change in the near future, but we, as scholars, have to remain aware of the limitations.

10. Results³

In order to compare the countries the indicators of care and cost (de)familisation were calculated. The comparison demonstrates that the countries differ consider-

² For the calculations “flat rate payments” have been transformed to percentage of average wage according to OECD definition.

³ There is a number of limitations in using the indicators in the form proposed above. Firstly, fully comparable data on childcare services are unavailable. Each country included in the study has its own constellation of childcare services consisting of :day care centres, kindergarten, family-type care, nannies, child-minder at home, (preschool) education system, etc. (European Communities 2005).

ably in this respect.. The most strongly familialising policy has been observed in Hungary, where the state gives a mother of a new-born child relatively best opportunities to care for the child at home. In the United Kingdom and Switzerland the leaves are less generous, in the former there is an unpaid parental leave (13 weeks), in the latter no parental leave is available. The largest differences occurred as regards care defamilisation of the youngest children. In Slovakia, Sweden, France and Denmark, Belgium and Iceland the services appeared to be much more widespread than in other countries. In comparison with other countries Belgium turned out to practice the most cost defamilialising policy. In all the countries (except Poland) families with children receive direct or indirect transfers. In five countries: Sweden, Finland, Switzerland, Hungary and the United Kingdom, there are no tax reliefs and benefits paid to non-working spouses.

11. Identifying models

To organise the observed data into meaningful structures we used a cluster analysis. The cluster analysis is a number of different methods of grouping objects of similar kinds, and it does not provide any explanation, using similarities and dissimilarities between cases. We used the Ward's method of amalgamation and squared Euclidian distance as a measure.

As a result we identified three regimes of care policy:

- 1) Within the *coherent* regime the state policy provides, on the one hand relatively well paid and long maternity/parental leaves, on the other hand, childcare facilities. (It is enough to say that in the countries like Finland and Denmark, municipalities must arrange a place for children in childcare facilities.) However, the states refuse to unburden families from the cost caused by the presence of a

In many countries childcare services are available only on a part-time basis. Another problem is that national statistics follow, most of the time, national particularities of the care system, making a systematic cross-national comparison impossible (Plantega and Siegel 2004) Secondly, cost defamilisation indicator is calculated for an average wage earner. Thus, some of the mean-tested benefits and tax relief, especially in liberal countries, do not influence the indicator's level. We can expect that in many countries (for example Poland) the cost defamilisation indicator would be higher. Collective labour or regional regulations arrangements in a number of countries may regulate leaves in a different way than legislative entitlements. So for example in Denmark and the Netherlands a large number of civil servants receive higher benefits than fixed by law (Brunning and Plantega 1999). The other examples are Belgium, where the Flemish community pays an additional benefit during the first year, Germany, with five *Länder* pay a means-tested childrearing benefit extended to the third year of parental leave (Moss and O'Brien 2006). Finally, the problem of applying welfare state regimes to comparative social policy studies is a convenience it offers to the researchers. They serve as an easy-adopted starting point for a comparative analysis of different social policy areas, which was not Esping-Andersen's point.

Table 1. Care and cost (de)familisation indicators in 22 European countries in 2004

	Care familisation indicator * (CFAM)	Care defamilisation		Cost defamilisation		
		Children ⁰⁻³ (CDEF3)	Children 4-mandatory school age (CDEF4)	Not working spouse (SPOUSECD)	Children (CHILDCD)	Sum (CD= SPOUSECD + CHILDCD)
Austria	0,32	0,11	0,82	0,04	0,25	0,29
Belgium	0,14	0,63	0,99	0,21	0,20	0,41
Czech	0,44	0,11	0,85	0,02	0,23	0,25
Denmark	0,38	0,74	0,93	0,09	0,11	0,20
Finland	0,46	0,30	0,70	0,00	0,12	0,12
France	0,51	0,64	1,00	0,01	0,15	0,16
Germany	0,25	0,08	0,89	0,19	0,18	0,38
Greece	0,19	0,08	0,60	0,10	0,10	0,20
Hungary	0,76	0,12	0,86	0,00	0,27	0,27
Iceland	0,21	0,62	0,94	0,16	0,10	0,26
Ireland	0,06	0,02	0,55	0,10	0,14	0,24
Italy	0,25	0,07	0,93	0,03	0,14	0,18
Luxembourg	0,32	0,18	0,80	0,09	0,24	0,33
Netherlands	0,16	0,39	1,00	0,08	0,08	0,16
Norway	0,38	0,27	0,90	0,04	0,10	0,14
Poland	0,18	0,02	0,60	0,03	0,00	0,03
Portugal	0,17	0,21	0,75	0,02	0,13	0,15
Slovakia	0,48	0,84	0,70	0,10	0,15	0,26
Spain	0,16	0,11	0,98	0,06	0,05	0,10
Sweden	0,55	0,64	0,90	0,00	0,13	0,13
Switzerland	0,13	0,04	0,54	0,00	0,16	0,16
United Kingdom	0,10	0,02	0,60	0,00	0,19	0,19

* to calculate the indicator, only the mothers' entitlements were taken into account, Belgian career break is not exactly the same as parental leave; France; for the second child; Switzerland 2005, ** Belgium, the average for French and Flemish community; Slovakia for 2 years old

Source: own calculations based on data: European Communities (2005), OECD (2005), Clearinahouse <http://www.childrjolicvintl.org>, www.childcareinchanainaworld.nl — national reports. The Federal Social Insurance Office, Switzerland.

child (with the exception of childcare). Thus, the states socialise the cost of care but not the other cost of parenthood and they are committed to social services in order to allow women to work in the labour market.

With a high level of care familisation and defamilisation it can be tempting to call the model “optional”, which suggests the real choice between care and employ-

Table 2. Care regimes

	Coherent	Subsidiary	Neutral
	Denmark, France, Sweden, Iceland Norway, Finland Slovakia, (Czech)	Germany, Belgium Netherlands, Italy, Hungary, Austria, (Spain), Luxembourg	United Kingdom, Poland, Portugal, Switzerland, Greece, Ireland
Care familisation	high/modest	modest/low	modest/low
Care defamilisation (3)	high/modest	modest/low	low
Care defamilisation (4)	high/modest	high/modest	low
Cost defamilisation	modest/low	high/modest	modest

ment. In the case of Sweden and Denmark we can rather talk about phases in a policy design: familialising in the first year after childbirth and defamilialising after that period. Because no leaves and benefits are offered Swedish and Danish mothers do not have good opportunities to care for their 2 year-old children at home. In the two countries time to care and time to work occurred one after another and not simultaneously as is the case of Finland.

- 2) The principle of “subsidiarity” means that the state will only interfere when the family’s capacity to service children is exhausted. Thus, the *subsidiary* model provides a strongly familialising policy – generously paid and long leaves in order to encourage motherhood. The supply of care arrangements alternative to family care, as in the case in Germany and Austria, is very limited. Within the subsidiary model there is an assumption that one of the spouses would work in the labour market while the other takes care of the household. The incentives for family childcare are also benefits and tax reliefs offered to families. Germany, Luxembourg, Austria and Hungary are among the most cost defamilialising states, mostly in respect to dependent children but also to nonworking spouses.
- 3) Within the *neutral* model neither services nor supportive care policies are provided by the state. In the welfare regime a family carries most of the responsibilities for childcare. The alternative options are: unpaid (grandparents, friends, neighbour etc) or market care defamilisation, which can lead to limited mothers’ employment opportunities. The states are rather resistant to accept that the role of the government encompasses the responsibility to help to “reconcile” work and family responsibilities and only to a modest extent unburden families from direct costs of raising children. The countries follow a liberal rule of modest, mean-tested benefits to the families (example: Polish family benefit and childcare benefit). It is worth underlining that the model may be formed because of policy aimed at prevailing a conservative model of the family.

When preparing a classification there are always some problematic cases. The two countries that are difficult to classify are: the Czech Republic (included in the coherent model) and Spain (subsidiary). The former has a very low level of child-

care defamilisation as regards the youngest children but one of the highest when it comes to children aged 4 to mandatory school age. The latter does not defamilialise cost as much as the countries which represent the subsidiary model.

Table 3. Comparison with other typologies

Care regimes	Leitner(2003)	Esping-Andersen (1990)
<i>Coherent</i> Denmark, France, Sweden, Iceland, Norway, Finland Slovakia, (Czech)	<i>Optional familialism</i> Belgium, Denmark, Finland, France, Sweden	<i>Social democratic</i> Denmark, Finland, Sweden, Norway
<i>Subsidiary</i> Germany, Belgium, Netherlands, Italy, Hungary, Austria, (Spain), Luxembourg	<i>Explicit familialism</i> Austria, Germany, Luxembourg, Netherlands, Italy	<i>Conservative</i> Germany, Belgium, France, Austria, Switzerland, Italy, Netherlands
<i>Neutral</i> United Kingdom, Poland, Portugal, Switzerland, Greece, Ireland	<i>Implicit familialism</i> Greece, Portugal, Spain	<i>Liberal</i> Ireland, United Kingdom
	<i>De-familialism</i> United Kingdom, Ireland	

There are striking similarities between the clusters of countries in Leitner and our care regimes (see Table 3). The vast majority of countries are placed in similar groups. The coherent regimes correspond to optional familialism, subsidiary to explicit familialism, and neutral to two regimes i.e. implicit familialism and de-familialism. There are some doubts whether to include Belgium in the group of optional familialism. At first sight the country seems to give a choice between parental care and care defamilisation to the parents. However, there are big question marks when considering the fact that Belgium is the country with paid (poorly) but rather short parental leave (3 months), the childcare coverage is high mostly because it is mandatory for children aged 2,5 years, and because it is widespread in the Flemish, but not in the French, part of the country. The other aspect is the cost defamilisation – not considered in Leitner regimes, and Belgium is very much at the top of the list of most cost defamilialising countries. All the aspects discussed make us think of Belgium as a different care model than France and Scandinavian countries.

There are two slight differences in the group composition between care regimes proposed in the paper and Esping-Andersen “three worlds”; France and Switzerland are classified as a conservative model which corresponds to coherent care regime. The care regimes of the former are coherent (which corresponds to social-democratic) and of the latter are neutral (corresponding to liberal). To summarise, the results confirm the usefulness of regimes for the cross country comparison. Different methods of identifying the regimes do not give substantially different classification.

12. What does care familisation really mean?

In the last part we present a discussion on care familisation. Contrary to defamilisation, which has become one of the most fashionable terms in social policy literature, the concept of care familisation has not received much attention.

Treating the increase of female employment rate as an independent variable, we can track the development of familisation policy in Western democracies. It is not important whether women want or need to do paid work, an increasing employment rate simply made the need for parental (familisation) and non-parental childcare (defamilisation) become an important social and political issue.

Concern about health of mothers and children was one of the main motives behind adoption of the first legislation allowing women to take time off work because of bearing a child at the end of the 19th and the beginning of the 20th century. The provision was restricted to unpaid leave which covered specific categories of workers (Gauthier 1996). The next step in the development of maternity - related legislation was an introduction of cash benefits to be paid during a period of maternity leave. The lead in relation to that was taken by Germany (1883) with the introduction of benefits representing 50 per cent of women's regular pay (Gauthier 1996).

The ILO Maternity Protection Convention from 1919 gave women the right to leave their work six weeks before the expected date of confinement and to stay off till the end of six weeks after the confinement (ILO 2005a). The revised Maternity Protection Convention from 1952 guaranteed women 12 weeks of paid maternity leave, with at least 6 weeks of compulsory leave following confinement (ILO 2005b). The revision of the two Conventions from the year 2000 guaranteed women 14 weeks of maternity leave and cash benefits that "shall be at a level which ensures that the woman can maintain herself and her child in proper conditions of health and with a suitable standard of living" (ILO 2005c).

A commonly accepted view on care policies is that it may reflect two varying and conflicting purposes: encouraging mothers to stay at home and supporting their employment (which is sometimes perceived as a tool for promoting gender equity). The distinction has been reflected in the debate on "women-friendly care policy". Some feminist authors are in favour of "masculinisation" of females' biography i.e. full-time employment, long-life employment with possibly short breaks related to child-bearing and rearing. The opposite approach is presented by the supporters of "care ethics" who provide an alternative view on the policy which should take *care* as a starting point, and in consequence guarantee all citizens the right for care-giving and care-receiving. We argue that care familisation, if some criteria are met, may lead both to improving access to paid work and secure economic independence of the carer.

From a feminist point of view, a women-friendly welfare state would promote the independence of women. One of the most prominent proposals was made by Ann Shola Orloff (1993). She claimed that the welfare state should provide wom-

en with the capacity to form and maintain an autonomous household. It could be achieved in two ways: providing payments for family care that secure economic independence of the carer and her dependants; or improving women's access to paid work and unburdening the family from care through expansion of public services (1993; 319-322). Orloff stresses that access to employment seems to be a more legitimate strategy for achieving emancipation.

Knijn and Kremer (1997) present a different approach to female emancipation. They underscore that a concept of citizenship "should be based that every citizen, whether male or female, could claim the right to give care to people in his or her immediate context when circumstances demand it" (Knijn and Kremer 1997). According to "*care ethics*" approach care, mainly "females' business", have to be valued as an important human practice (Sevenhuijsen 2000).

In general, a parental leave helps facilitate women's involvement in the labour force and thereby their economic independence. As Haas and Hwang (1999) observed for Sweden: the existence of parental leave gives a strong inducement to establish themselves in the labour market in full-time job that pays well, before having children. A clear effect of introducing parental leave arrangements is that women have integrated employment as a vital part of their lives (Björnberg 2002). Since the benefits during parental and maternity leaves are, in many cases, based on the income of the parent prior to birth, it can contribute to a strong incentive to be well established in the labour market.

The use of "effective leave" in the cross countries comparison of care familisation is justified. Firstly, in most cases the statutory (maternity) benefits' levels are set with reference to wage levels. Secondly, this acts as a standardizing tool across countries. Finally, availability of paid leave, with high levels of compensation, substantially influences the take up rates, thus simply comparing the length of leaves would be misleading in the context of care familisation. Given the differences in payment level, it is not possible to rank the countries simply according to the length of consecutive weeks of maternity and parental leave.

The data on parental leaves and benefits are a part of a story – option individuals have. The paid leaves ' "real meaning" depends on a number of cultural, economic and social conditions. For example, we can expect that giving an opportunity for part-time employment during a parental leave, would have a very limited impact on parents' participation in the labour force in a country where part-time jobs are rather seldom and of poor quality. The best possible measure of positive care familisation would be a take-up rate (measured by the number of days and the number of individuals). Unfortunately, in many countries the data are mostly unavailable or their quality does not allow for a systematic cross country comparison.

In almost all countries under analysis entitlement to the statutory maternity leave/benefit and parental leave/benefit is based on employment-related criteria, for instance: a minimum period of employment in the years before confinement,

contributions, earning a certain amount or simply being a worker at the time of becoming pregnant. There should be a proof of the intention to work in paid labour force. In a number of countries the benefits of giving birth as an employed mother contrast with those which are paid to housewives. Council Directive on parental leave (1996) regulates that eligibility criteria relating to the length of employment or the length of service in a company may not exceed one year (Commission of the European Communities, 2003).

Looking at the data on employment rates among women (Table 4) at the age 25-29 (in most of the countries an average age of giving birth to the first child is 28-29) does not allow us to neglect the problem. In many countries, mostly post-socialist, like: the Czech Republic, Poland, Slovakia, Hungary; but also in Southern European countries - Italy and Greece, only around three out of five females in this age group would be entitled to paid leaves.

Table 4. Females employment in 2004 (age group 25–29) (%)

Country	Activity rate	Unemployment rate	Employment rate (as a % of whole population)
Austria	81	6	76
Belgium*	74	13	64
Czech Rep.	64	12	56
Dentmark	81	7	75
Finland	76	9	69
France	78	14	67
Germany	73	10	66
Greece*	75	20	60
Hungary	65	7	60
Iceland**	84	2	82
Ireland	79	3	77
Italy*	64	17	53
Luxembourg	71	6	67
Netherlands*	85	4	81
Norway	79	5	74
Poland	76	24	57
Portugal*	85	9	77
Slovakia	73	19	59
Spain	80	16	67
Sweden	79	8	73
Switzerland	85	5	81
U.K. ***	75	4	72

* 2003 ** 2002 *** The United Kingdom – 25–34 years olds

Source: own calculations based on LABORSTA.

Even if we look at Table 4, we still cannot really say what part of the employees are entitled to a leave and a benefit. In some countries there are some exceptions from the common rules as e.g. the Austrian employees on short-term contracts who are not entitled to parental leave at all, in case their contract is terminated before birth, Belgian and Greek judges, home-workers and domestic workers in Italy (Commission of European Communities 2003).

In many countries there are benefits, of lower rates, which are paid unconditionally to mothers who are on maternity leave, but are not entitled to “regular” benefits.

In a number of countries parental leaves are unpaid (for example: Ireland, Spain) or the benefits are mean-tested (Poland). Thus, the care familisation indicator proposed before would equal zero. However, some mothers (parents) make use of unpaid leave. For instance: based on a survey on the uptake of parental leave in Ireland, it was estimated that 20 per cent of eligible employees had taken unpaid parental leave (Moss and O’Brien 2006).

In some countries the benefits paid to parents employed in the public sector (where women dominate) are higher. To picture: in Italy the public sector employees receive 100 per cent of their earnings during maternity leave (otherwise it is 80 per cent) and during the first month of their parental leave (in the private sector it is 30 per cent), similarly in Belgium civil servants receive a full salary during a maternity leave (instead of 77 per cent) In Spain public employees of the central state government, and employees under a growing number of collective agreements, can extend maternity leave by four weeks.

13. Final remarks

Orloff (2006) argues that we have been witnessing “farewells to maternalism” – a transition from the policy model encouraging mothers to care for their children at home and eschew employment, to a model “employment for all” under which women are expected to participate in the labour market in a “male way”. The family leaves seem to be a trigger for a transition from a negative to a positive care familisation. In many respects for mothers it is a change for the better; with the benefits, insurance (in many countries including pension contribution) and job guarantee, a parental leave may offer decent conditions for child caring.

To a large extent caring conditions women experience reflect their employment situation. In that sense it is justified to say that care is becoming more and more subordinate to employment. Even if in a few countries a parental leave is available to non-employed women (unemployed, students, housewives) a benefit is not paid to them or, if it is, the amount is very low.

In this context the issue we face is: can a parental leave positively influence the care conditions in rich, developed democracies? The answer is: *yes*, but its potential

is rather limited. There are many, confirmed by research, reasons for that. Firstly, a relatively long leave period connected with scarce childcare facilities leads to great problems in re-entering the labour market. A consequence for many mothers taking a parental leave is a final withdrawal from the labour market instead of a career break. Thus, paradoxically, strengthening care familisation (in terms of conditions but not in terms of length) requires widespread defamilisation after the period of leave. Secondly, in a number of countries looking after children younger than one year at home is considered necessary, or demanded at least. But in the case of older children, the social and cultural support for home-based child care and in consequence the governments and employers' sympathies for prolongation of leaves are much lesser. Thirdly, some groups of parents are not interested in taking advantage of long parental leaves, these are mostly parents with higher income, higher education, good labour market position and self-employed. Fourthly, the changing employment patterns, an increasing part-time employment rate, may substantially reduce the level of *real* care familisation. Being employed part-time before confinement leads *de facto* to the worsening of caring conditions and decreases the attractiveness of parental leave. Fifthly, attractiveness of parental leaves may trigger employers' reluctance to hire women of child-bearing age on permanent contracts because of the risk that they might stay at home for many years (especially when giving birth to more than one child). In consequence it becomes necessary to hire a fixed-term substitute for a permanent employee who is on parental leave. If a labour market is gender-segregated the substitutes of women are mostly women. The increase of fixed-term contracts leads to an increase in the number of parents who are not fully included in the leaves regulations: if your contract ends during a parental leave, you have no right to return to your previous workplace. Sixthly, the parental/maternity leave potential to familialise caring varies according to labour market situation. While in principle the job protection is regulated by law, in market reality many mothers report their employers' unwillingness towards re-employment or disappearance of their workplaces.

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