Where have all the sons gone?
Leaves from work to care informally for frail or sick family members

Andrea E. Schmidt
(based on work together with M. Fuchs & R. Rodrigues)
Presentation at the 14th Leave Policies and Research Annual Seminar
21-22 September 2017, Prague
"Help the aged/ One time they were just like you/ Drinking, smoking cigs, and sniffing glue."
(Pulp, 1997)
What you may expect before your dinner

• Comparison of leaves from work to care informally for frail or sick family members:
  • Conceptualisation and contrast with parental leaves
  • Comparative analysis of policies in six countries (NL, AT, DE, IT, FR, CAN)
  • Where have all the sons (and husbands) gone? (take-up)

• Embedding care leaves in social policy
  • Leaves from work for informal carers as a unique social policy measure
  • Food for thought for policy design
Demographic trends increase share of potentially frail older people

Evolution of the population in the older age groups (65+, 65-79, 80+), 1999-2010-2030

Source: Rodrigues, Lamura & Huber, 2012 (based on UNPP 2011)
Informal care: it’s a women’s world

Share of female carers in % of total, 50-64 years

Source: OECD (2011), SHARE data.
Little attention paid to leaves for informal carers in the literature

• Main focus on reconciliation between work and family life with regard to parents of smaller children (Blum, Koslowski & Moss, 2017; Dearing 2016)

• Some authors have dealt with gender equality in leaves from work for informal carers (Saraceno & Keck 2011)

• Limited empirical overviews of care leave policies for informal carers (Colombo et al., 2011; Rodrigues et al., 2012), lacking a theoretical framework
Rationale

Role of leaves from work for informal care for relatives is increasing (cf. Knijn et al. 2013):

• **Increasing share of older people** > increasing share of people with care needs in the population

• **Austerity measures** in public budgets have led to increasing reliance on informal carers/relatives

• **Increasing labour market participation of women** > availability to carry out 'labour of love' is decreasing
Main differences between leaves for informal carers and parental leaves

✓ **Planning:** „Dependency of older parents just happens.“

✓ **Perspective:** Children develop step by step > with (frail) older people often unpredictable how health status develops, and when it starts to worsen

✓ **Intergenerational hierarchy:** Where children care for their parents, relationship changes, but hierarchical relationship between parents-children may remain the same > filial obligations combined with lack of authority over how to proceed in care arrangements

Source: Knijn, Martin & Le Bihan, 2013.
Conceptual framework of the study

PART 1: ‘Care regime’: service infrastructure, attitudes, norms

Objectives and Input
Legislation
Regulations
Resources

Care leave for sick children
Care leave for adults with disabilities
Care leave for older adults in need of long-term care

Life-course

Economic sphere, (gendered) labour market

PART 2:

Output
e.g. take-up rates
Outcome
e.g. increased labour-market participation

Countries:
- Austria
- Germany
- The Netherlands
- France
- Canada
- Italy

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Methodology

• Systematic review of 22 leave regulations in six countries (laws, ‘grey’ literature, academic publications in journals and books)
• Interviews with 2-3 (national) experts per country
• Analysis and comparison of national statistics (take-up estimates)
• Cost estimates (public expenditure)
• Separate analysis for short-term leaves (e.g. to care for a sick child) and long-term leaves (e.g. to care for a frail parent)
## Analytical dimensions (Part 1)

<table>
<thead>
<tr>
<th>POLICY OBJECTIVES</th>
<th>DIMENSIONS</th>
</tr>
</thead>
</table>
| **Labour market attachment** | Minimum/Maximum duration  
Job protection during absence  
(Regular) annual leave entitlements |
| **Universal coverage**     | Circle of eligible family members  
Degree of care need  
Entitlement for self-employed/unemployed  
Minimum company size/Minimum job tenure |
| **Legal security**         | Rules regarding notification time  
Statutory right  
Employer’s veto rights |
| **Flexibility**            | Part-time work (or combination)  
Earlier return to the workplace |
| **Income security**        | Replacement rate/other financial benefit  
Who pays? |
| **Social security**        | Pension entitlements  
Health insurance/Sickness benefits (if needed) |
| **Gender equality**        | Entitlement per carer  
Bonus for single parents (financial benefit, longer duration)  
Income-related benefit |
Background

• Study carried out for the Federal Institute of Public Health in Switzerland (Oct 2015-April 2016)
• Policy consultancy about introducing respite care measures/care leaves for informal carers
• Printed copies available today
• Free download: http://www.euro.centre.org/data/1474279866_17410.pdf

Juggling family and work – Leaves from work to care informally for frail or sick family members – an international perspective
Andrea E. Schmidt, Michael Fuchs and Ricardo Rodrigues

Background

Policies to support the reconciliation of paid employment and unpaid family care may be considered a relatively new addition to most countries’ welfare systems. Until recently, researchers mainly dealt with the question of how opportunities for women could be improved on the labour market (with a focus on childcare and parental leaves) as women continue to shoulder the bulk of unpaid work including family care and household chores. In the face of ageing populations, rising female labour market participation rates and greater importance attached to gender equality, a question that has become more relevant is whether policies are needed to combine paid work with care and support within the family, especially for frail older relatives (Kriple et al. 2013). Such policy measures include short-term or long-term leaves from the workplace, which allow employees with caring responsibilities to provide support to their frail, disabled or sick relatives. Authority measures and the possibility for relatives active in the long-term care (UTC) sector further add to increased reliance on

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Results – Part 1

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Policy emphasis of longer leaves differs across countries studied.
Variation also apparent with regard to gender-sensitive policies

<table>
<thead>
<tr>
<th>Country</th>
<th>Policy Description</th>
<th>Notification (in months)</th>
<th>Statutory right</th>
<th>Minimum company size</th>
<th>“2nd carer’s quota”</th>
<th>Leave entitlement defined per carer</th>
<th>Bonus for single parents</th>
<th>Income-related benefit</th>
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<tbody>
<tr>
<td>Austria</td>
<td>Pflegekarenz/-teilzeit</td>
<td>0</td>
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<td></td>
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<td>Germany</td>
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<td></td>
<td>Familienpflegezeit</td>
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<td></td>
<td>Freistellung bei Erkrankung des Kindes</td>
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<td>Netherlands</td>
<td>Langdurend zorgverlof</td>
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<td>France</td>
<td>Congé de solidarité familiale (Hospiz)</td>
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<td>Congé de proche aidant (Pflege)</td>
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<td></td>
<td>Congé de presence parentale</td>
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<td>Canada</td>
<td>Compassionate Care Leave</td>
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<td></td>
<td>Benefit for Parents of critically ill children</td>
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<tr>
<td>Italy</td>
<td>Congedo straordinario biennale retribuito</td>
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<td></td>
<td>Congedo biennale non retribuito per i motivi personali</td>
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Assessment scale:
- restrictive/no
- universal/yes
- No information/not applicable
Overview of length and payment

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Different logics of longer care leave models

- Historically rooted:
  - AT: Discussions about euthanasia
  - NL: Participation society
  - IT: Disabled people’s lobby
- Less pronounced differences for short-term leaves (5-36 days)
- Large variation for longer leaves (6 weeks to 24 months)
Results and lessons learnt – Part 2

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Take-up and public expenditure

• A small group of employees uses leaves from work to care for relatives
  • Highest take-up rate in Austria, Germany and the Netherlands (ca. 2.5% of entitled employees)
• Highest public expenditure in Austria (0,0014% of GDP) and Italy (0,0002% of GDP)

Two sorts of factors decisive for take-up:

✓ Structural factors
  (e.g. duration, amount and type of financial benefit)

  *Generosity comes at a cost (Austria)*

✓ Psychological factors
  (e.g. stigmatisation, psychological burden, lack of support from colleagues, gender roles)

  *Support from colleagues at work crucial (Netherlands)*
  *Stigmatisation on behalf of employers counterproductive (France)*
Duration and gender equality

- Of all leave-takers, between 60 and 80% are women
  - But these consider only the employed population
    > real gender inequality even higher
  - Men prefer to use regular annual leaves first (Netherlands)
- Duration of 3 months usually sufficient for organisation (!) of care
- Labour market attachment desirable, but risk of burn-out
  - Most carers use full-time leave (Austria)
- 'Bonus' policies if more than one carer takes a leave are good news, but have had limited success (Austria)
- Maximum ceiling of financial benefit counterproductive for gender equality (Canada, Germany)
Embedding leaves for informal carers within social policies

✓ Leaves for informal carers are a unique social policy measure (to be distinguished from flexible working times)

✓ **Equity aspects**: statutory entitlement crucial particularly for low-qualified (negotiation skills)

✓ Leaves for informal carers have steering potential for acceptance of care work in general (tackling gender roles, increasing employers‘ awareness)

✓ The ‘right‘ design depends on the overall welfare state context (e.g. availability of home care/institutional care, family relations, labour market culture)
Food for thought: Policy-making

• Recognise interconnectedness of structural and psychological factors (e.g. regarding gender division of care work)

• Reduce stigmatisation:
  • Avoid financial risks (Germany)
  • Avoid complex processes in a psychologically burdening situation (Canada)
  • Increase recognition of care work by establishing a right to care (Austria)

• Mechanisms for take-up differ from mechanisms for take-up of parental leaves (e.g. stigma)

• Effects of leave policies for informal carers largely unknown (e.g. regarding labour market attachment)
An integrated approach to work-life-family reconciliation?

Source: Reproduced with permission from K. Leichsenring (2017).
Thank you for listening!

Contact, Comments or Questions:

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Middle-aged women as the main source of „informal“ care

Informal carers for frail relatives by country and age group

“[The sandwich generation] reported the highest levels of work, family and total overload; [...] and the poorest perceived physical health. The sandwich group is also more likely to be absent from work, turn down a promotion [...]. However, they were more likely to report positive spill-over between their work role and their role as caregiver.”

(Duxbury & Higgins, 2013:4)
Context matters: variation in female labour market participation

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