

# **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*

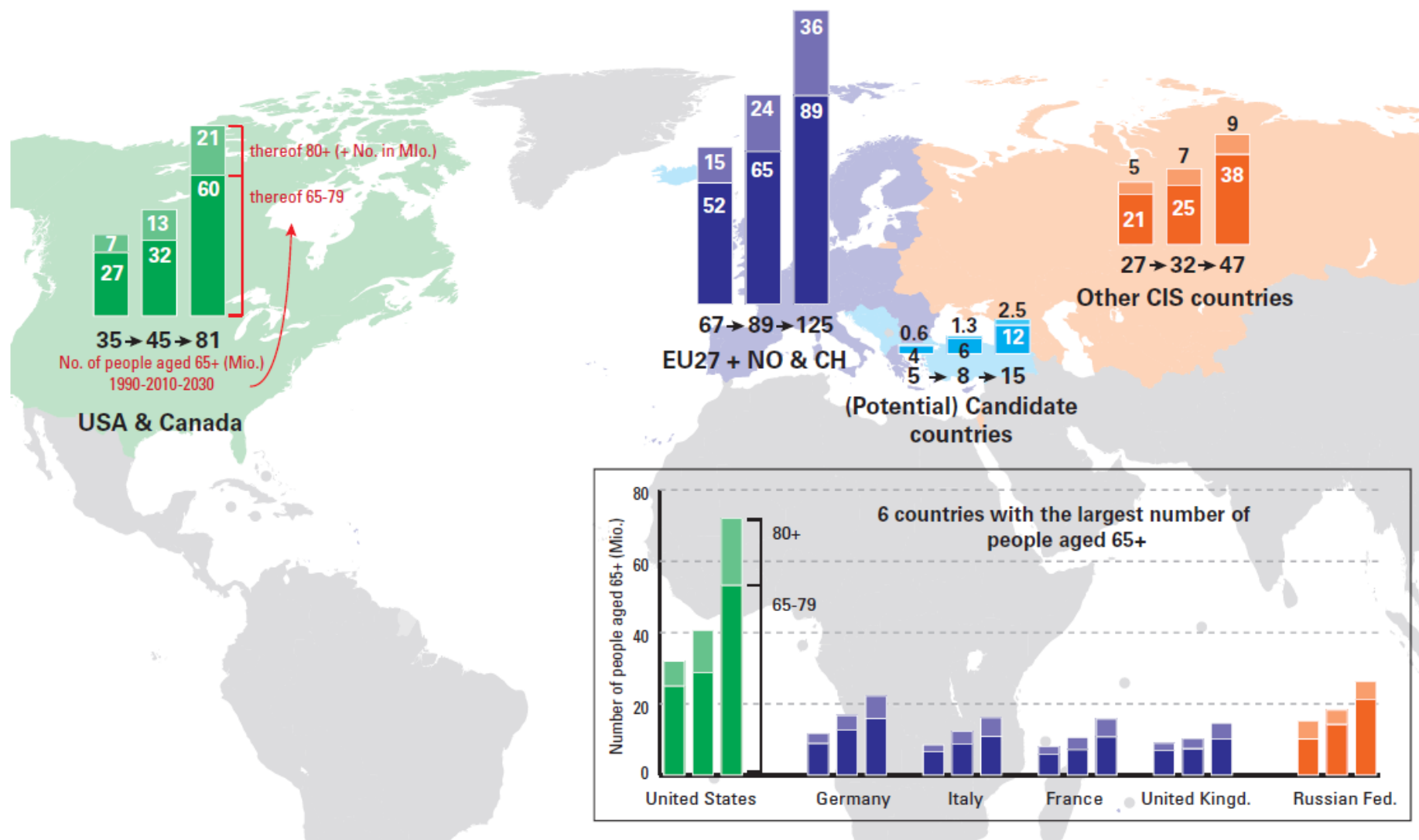
"Help the aged/ One time they were just like you/ Drinking,  
smoking cigs, and sniffing glue."  
(Pulp, 1997)

# 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

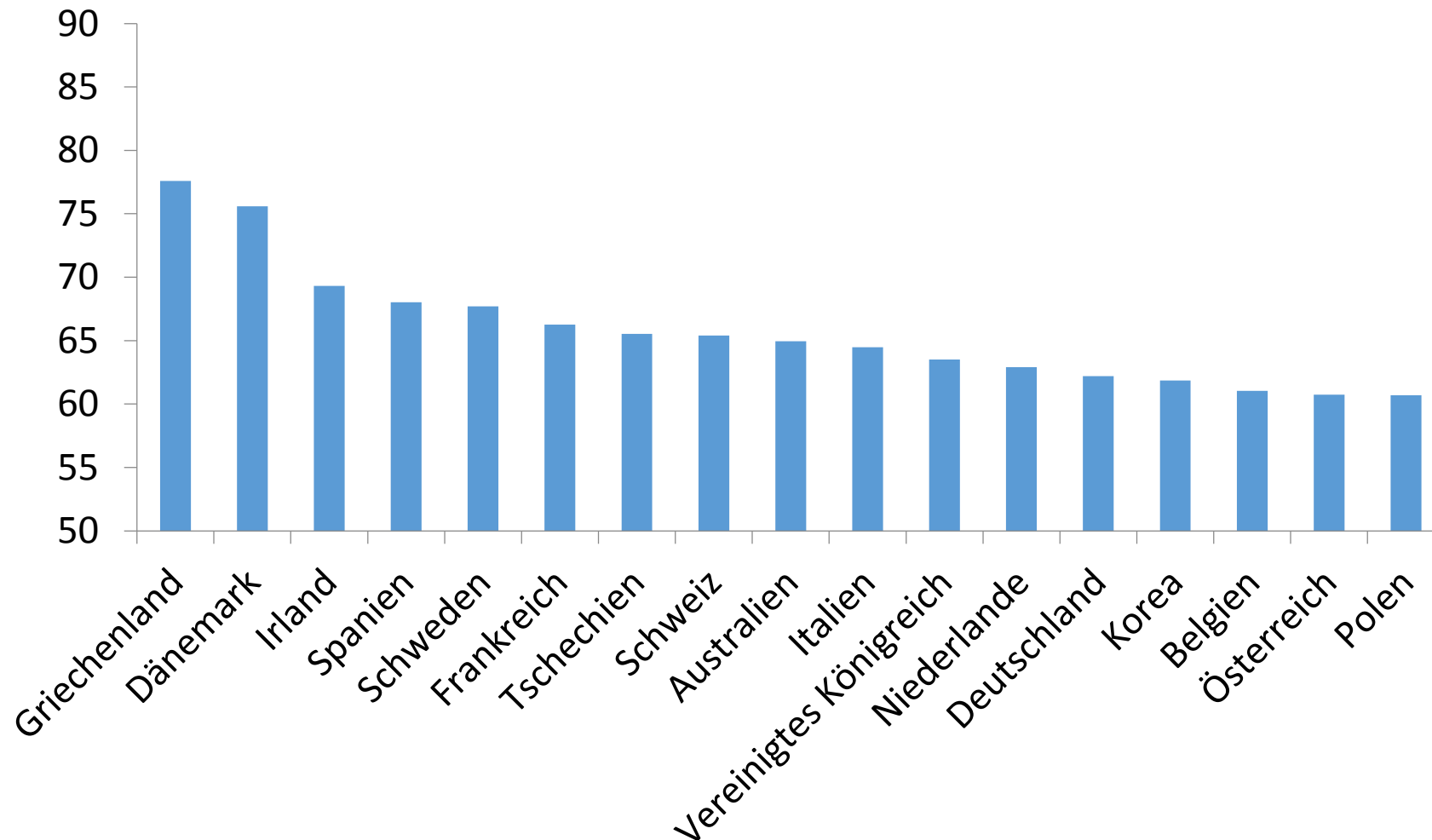
*Evolution of the population in the older age groups (65+, 65-79, 80+), 1999-2010-2030*



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



# 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

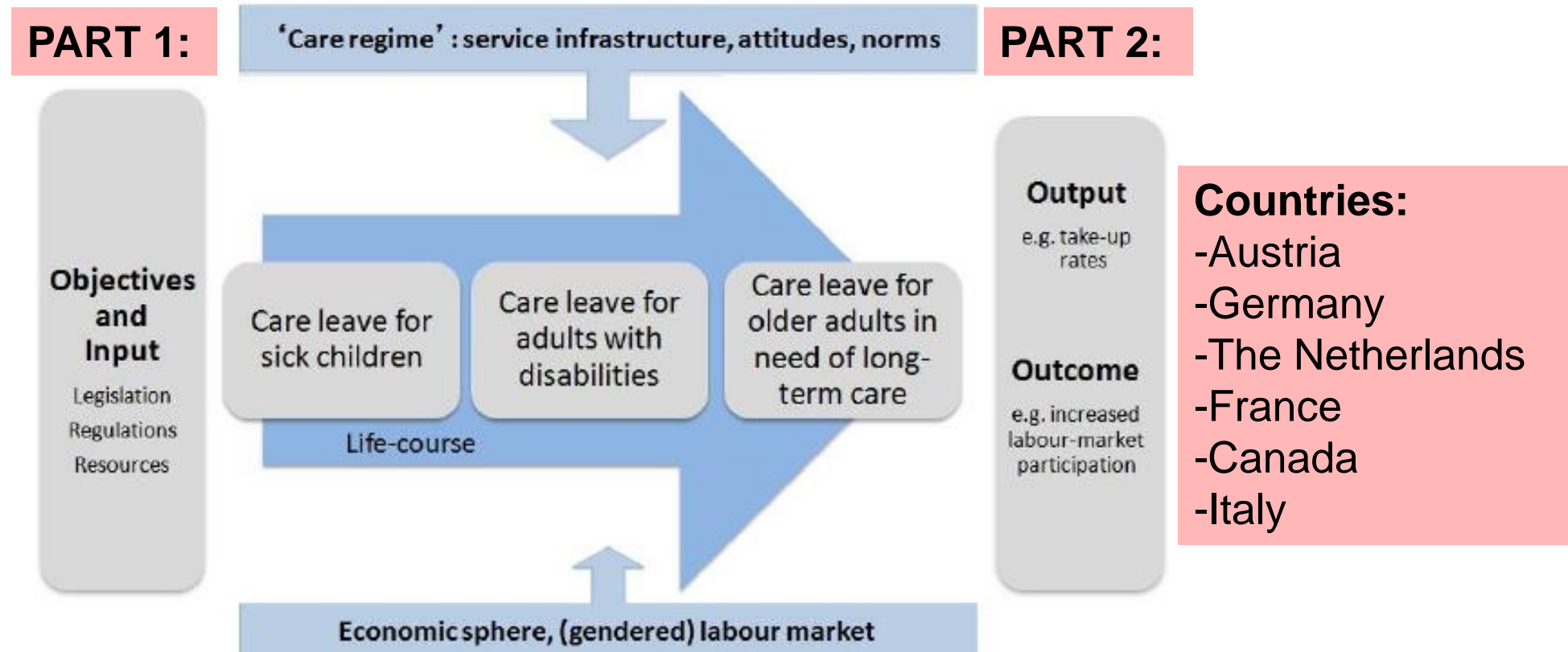
# Main differences between leaves for informal carers and parental leaves

- ✓ **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



# Methodology

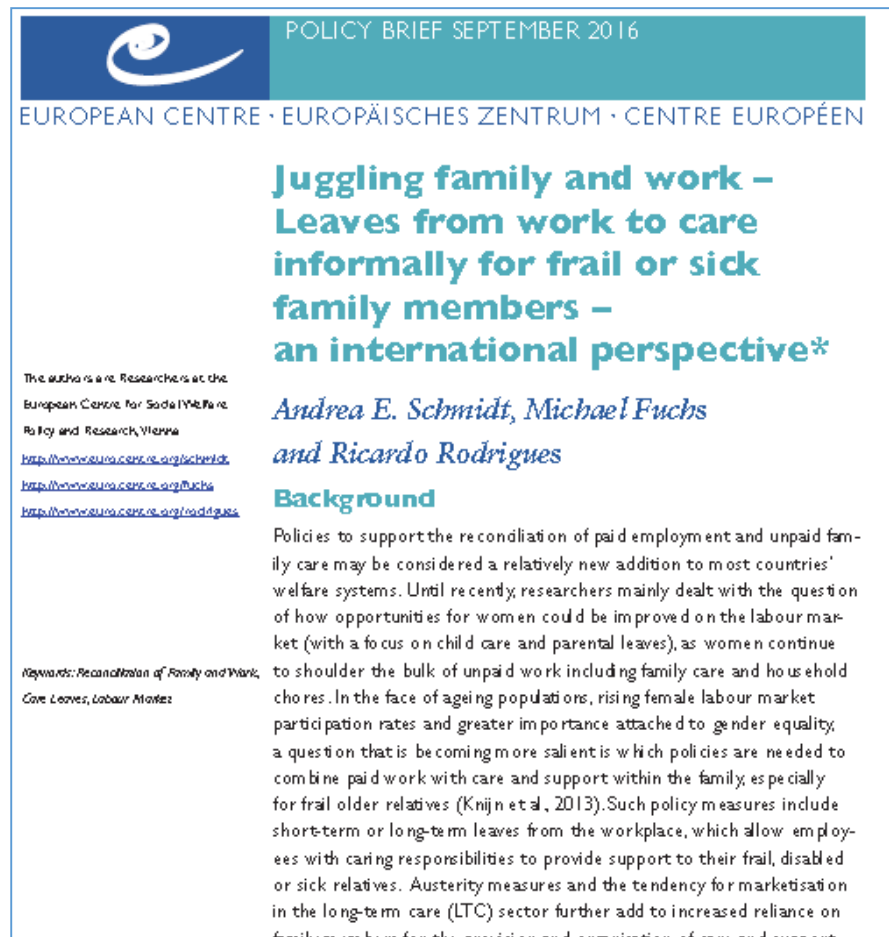
- Systematic review of 22 leave regulations in six countries (laws, 'grey' literature, academic publications in journals and books)
- Interviews with 2-3 (national) experts per country
- Analysis and comparison of national statistics (take-up estimates)
- Cost estimates (public expenditure)
- Separate 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)

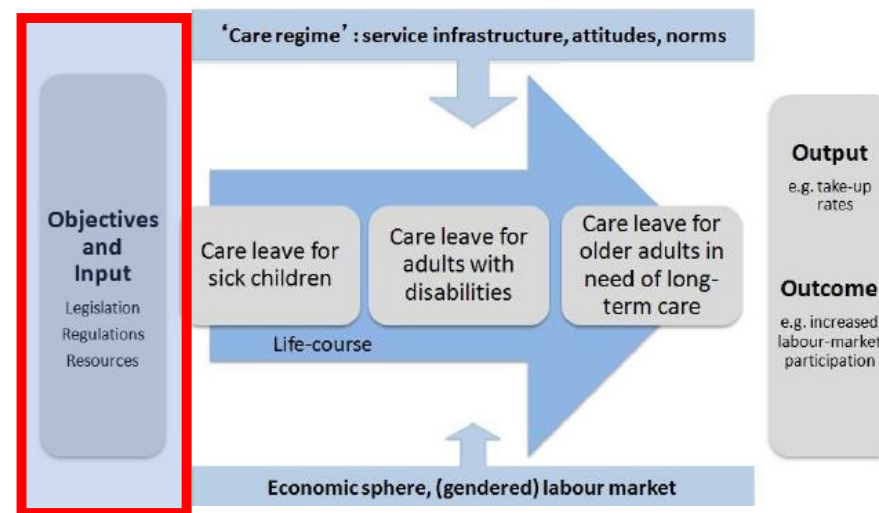
POLICY OBJECTIVES	DIMENSIONS
<b>Labour market attachment</b>	Minimum/Maximum duration Job protection during absence (Regular) annual leave entitlements
<b>Universal coverage</b>	Circle of eligible family members Degree of care need Entitlement for self-employed/unemployed Minimum company size/Minimum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

# Background

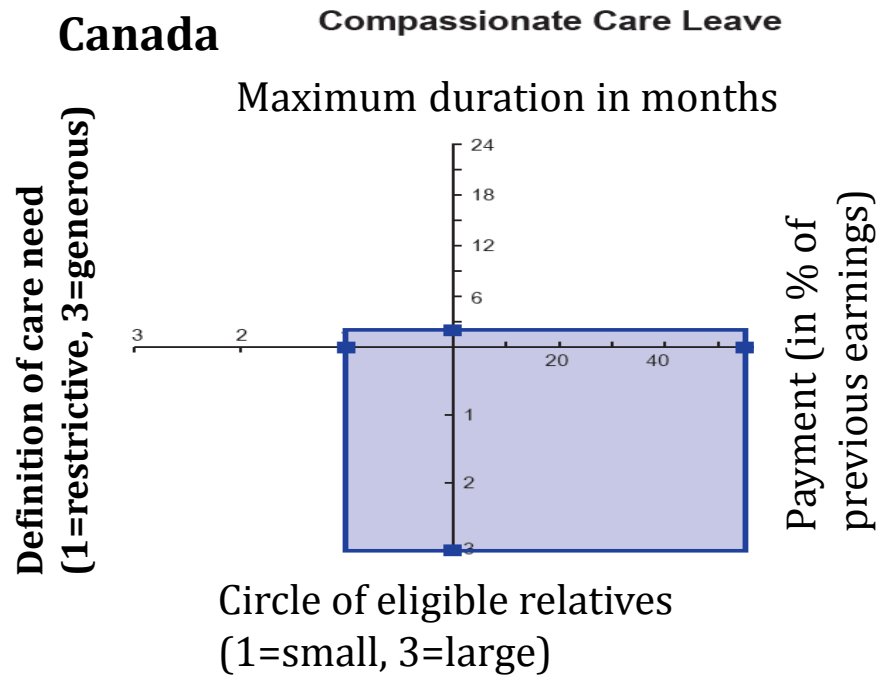
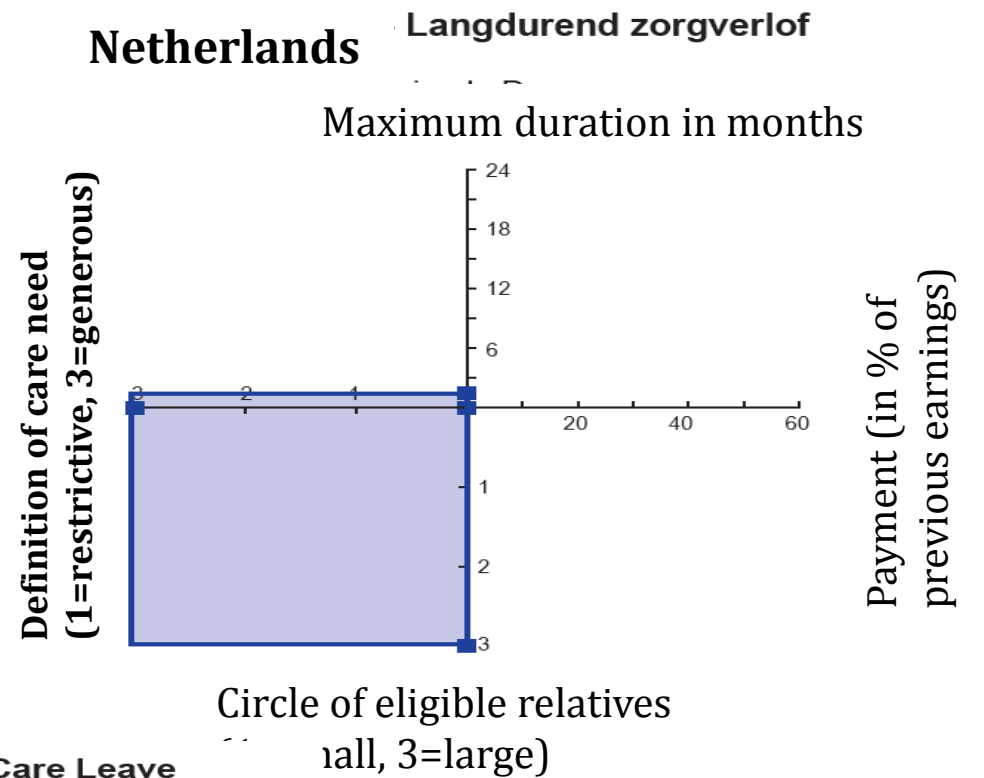
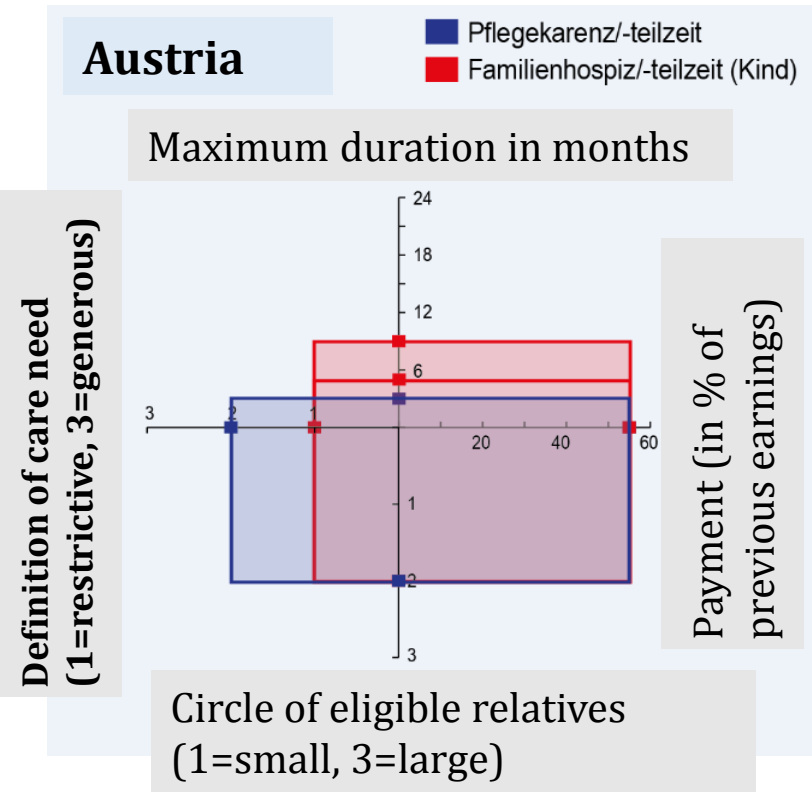
- Study carried out for the Federal Institute of Public Health in Switzerland (Oct 2015-April 2016)
- Policy consultancy about introducing respite care measures/care leaves for informal carers
- Printed copies available today
- Free download:  
[http://www.euro.centre.org/data/1474279866\\_17410.pdf](http://www.euro.centre.org/data/1474279866_17410.pdf)



# Results – Part 1



# Policy emphasis of longer leaves differs across countries studied



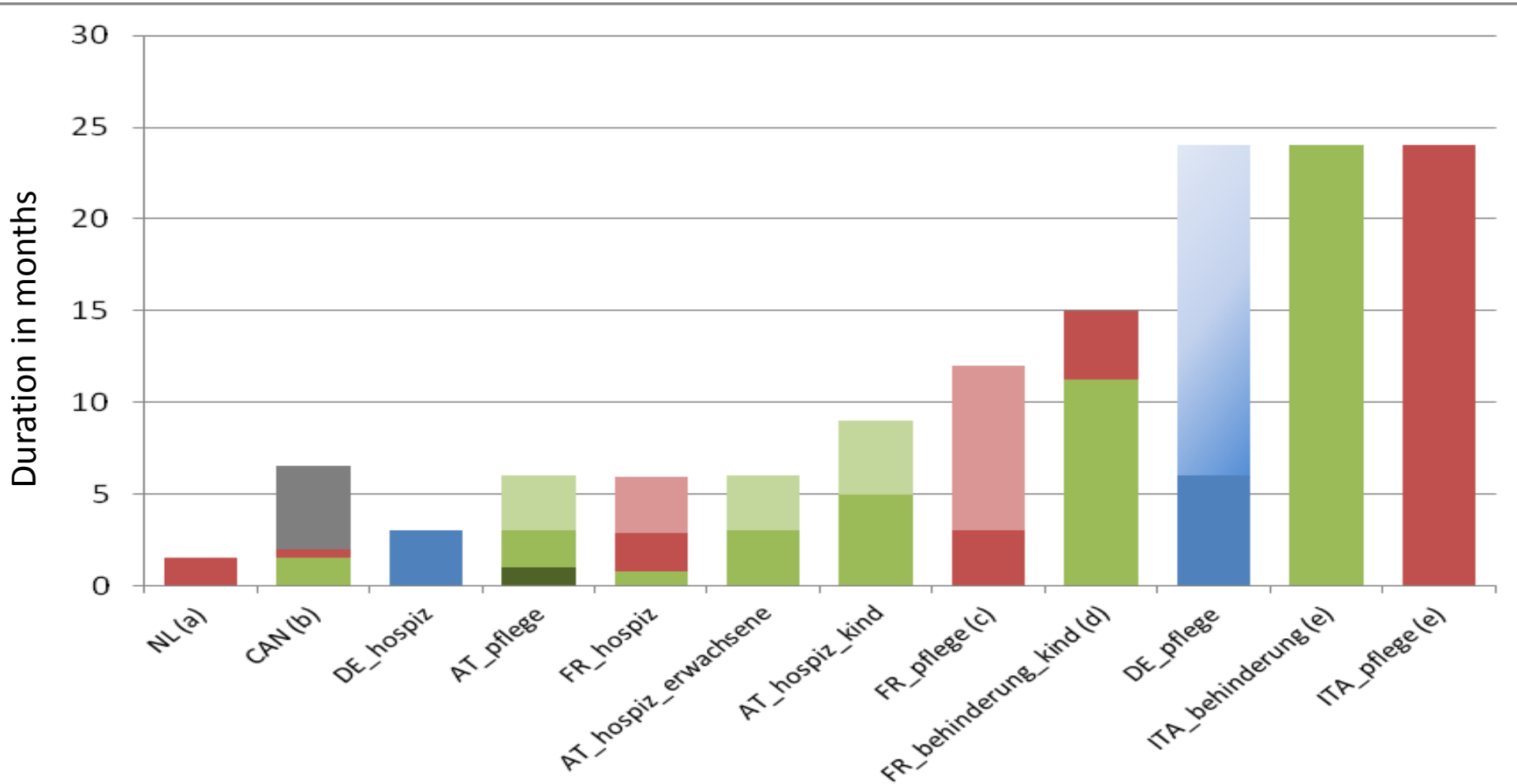
# Variation also apparent with regard to gender-sensitive policies

		Notification (in months)	Statutory right	Minimum company size	"2nd carer's quota"	Leave entitlement defined per carer	Bonus for single parents	Income- related benefit
Austria	Pflegekarenz/-teilzeit	0						
	Familienhospizkarenz/-teilzeit	0,25						
Germany	Pflegezeit	0,5						
	Familienpflegezeit	2						
	Freistellung bei Erkrankung des Kindes							
Netherlands	Langdurend zorgverlof	0,5						
France	Congé de solidarité familiale (Hospiz)	0-0,5						
	Congé de proche aidant (Pflege)	0,5-2						
	Congé de presence parentale	0,5						
Canada	Compassionate Care Leave	0						
	Benefit for Parents of critically ill children							
Italy	Congedo straordinario biennale retribuito	2						
	Congedo biennale non retribuito per i motivi personali	0,3						

Assessment scale

restrictive/no ----- ----- universal/yes No information/not applicable

# Overview of length and payment



paid (green)

unpaid (red)

paid but additional  
criteria  
(light green)

paid but additional  
criteria (light red)

loan for employees  
(blue/light blue)







minimum duration  
(dark green)

cash benefit  
without leave

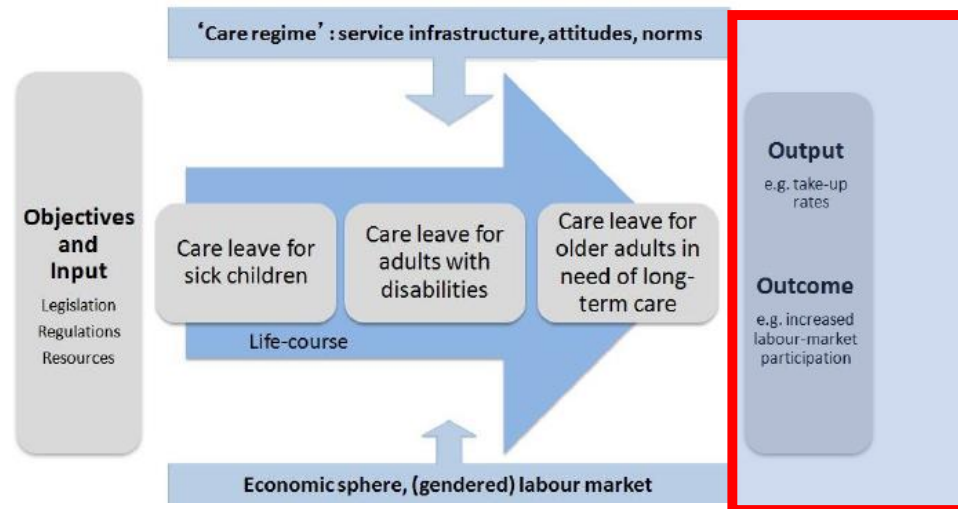


# Different logics of longer care leave models

- 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)

Rationale	Targeted at a particular group	Care recipient's degree of care need/state of illness	Type of activity of the informal carer
Examples	 e.g. children vs. disabled people 	 e.g. terminal illness vs. first instance of care need 	 e.g. organising care services vs. providing personal care 

# Results and lessons learnt – Part 2



# 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)*

Lessons learnt I

# 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)

*„...it is difficult to define the appropriate duration for care leave since a long leave may damage labour market position while a short leave might not be enough and force workers to resign from their job.“  
(Colombo et al., 2011:125)*

Lessons  
learnt II

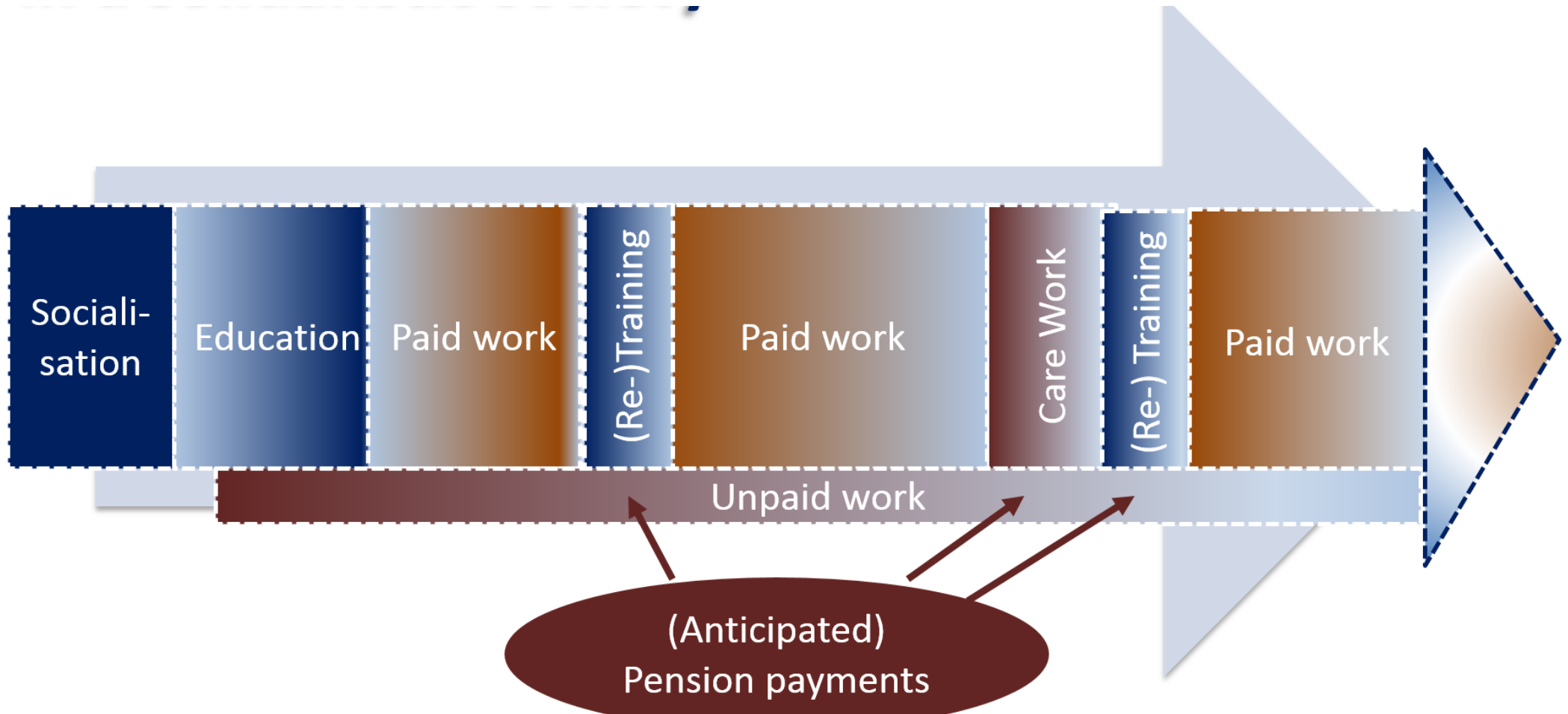
# Embedding leaves for informal carers within social policies

- ✓ **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?



# Thank you for listening!

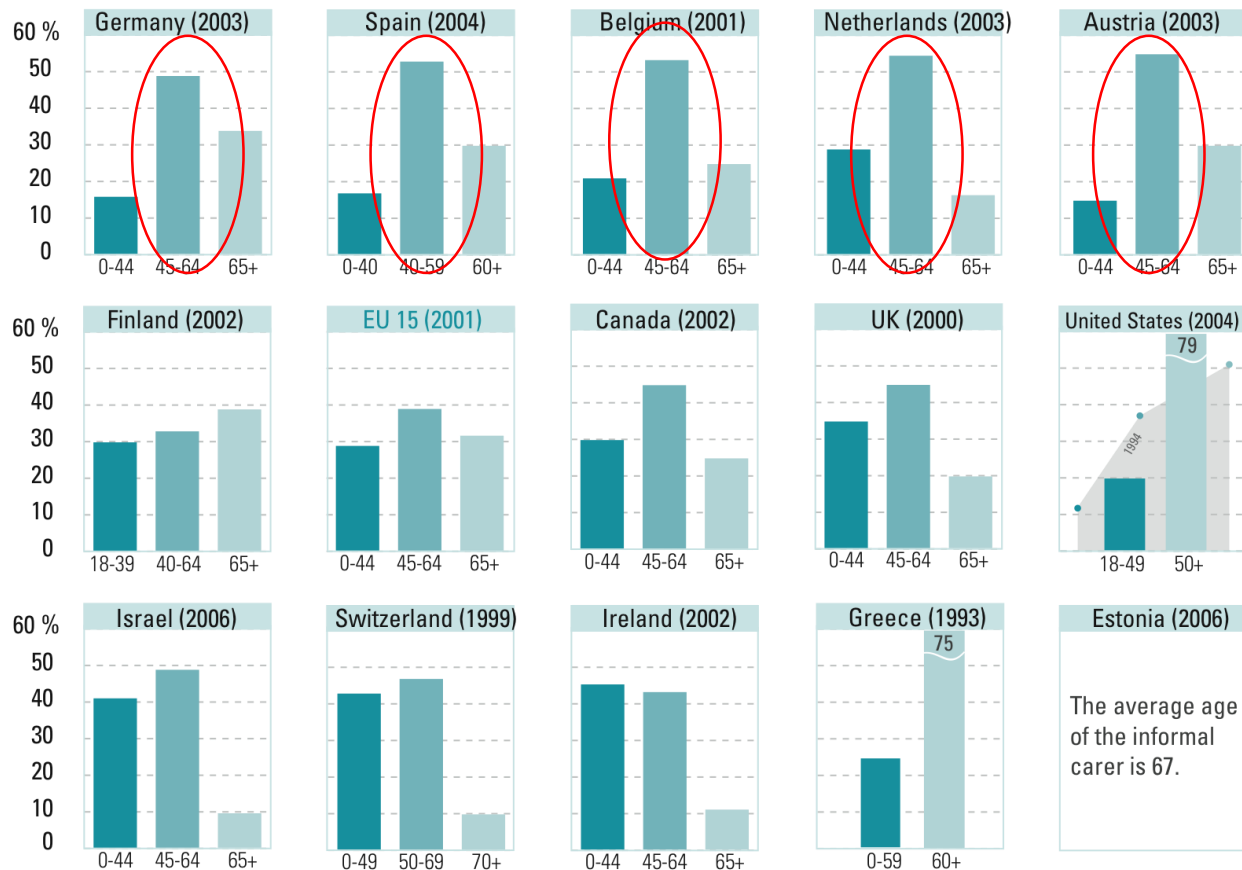
Contact, Comments or Questions:

**Andrea E. Schmidt**  
Austrian Public Health Institute  
andrea.schmidt@goeg.at



# 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.**”

# Context matters: variation in female labour market participation

