PROF COLETTE FAGAN, DR HELEN NORMAN

National policies to support the reconciliation of employment, childcare and the care of older family members

A comparative review to inform personnel policies in the European chemical industry

Supported by the European Commission

IMPRINT

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Nolte | Kommunikation, Berlin

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This report was commissioned and published by the European Chemical Employers Group (ECEG), the Fédération Européenne des Cadres, and industriAll Europe as an integral part of their project 'Children – Care – Career: Equal Participation of Women in the European Chemical Industry' and was financially supported by the EU Commission.

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A comparative review to inform personnel policies in the European chemical industry

Report submitted to the European Federation of Managerial staff in the Chemical and Allied Industries, industriAll Europe and the European Chemical Employers Group.

DECEMBER 2013

1 *Acknowledgements: We would like to thank Emma Temple-Malt, doctoral student at the University of Manchester, for her research assistance.*

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Executive summary

The European chemical industry will face workforce and skill shortages unless personnel policies adapt to the realities that the workforce has contracted and the average age has risen (Tivg, Eggert and Korb 2010). The proportion of women who are employed in the chemical industry is low, particularly when compared to the overall female employment rate in each country. Women account for only around a third of employees working in the chemical industry across the EU-28 – far lower than the proportion of women in total employment (45.7 per cent).Hence recruiting and retaining more women in the chemical industry will help offset the projected personnel and skill shortages.

Reconciliation measures make an important contribution to the recruitment and retention of women and support employees – men as well as women – who have family care responsibilities to coordinate with their employment. We provide a comparative overview of the national framework of legal regulations and policies to support the reconciliation of employment with the care of children and older family members in nine EU countries: Belgium, the Czech Republic, Finland,

France, Germany, Italy, Spain, Sweden and the United Kingdom. It is intended to help companies, associations and national governments develop appropriate strategies to achieve equal participation of women in the chemical industry, which is also one step towards achieving one of the European 2020 priorities; namely to reach a 75 per cent employment rate for women and men aged 20-64 by 2020.

Chapter two discusses women's underrepresentation in science and research at university as well as in professional, managerial and board positions due to under-recruitment of girls and young women into Science, Technology, Engineering and Mathematics (STEM) subjects at school and university, which is a pivotal filter for entry to many occupations within the chemical industry. Women are also under-represented in professional, managerial and board positions due to under-recruitment and 'leaky pipeline' career progression. The chapter also provides an overview of women's share of employment in the chemical industry and in the labour market for the nine countries in the study.

Chapter three details and compares the statutory family leave provisions and social care services that are available in each country to improve the reconciliation of work life, child care and care work for elderly family members. It identifies the best practices and initiatives that support women's labour market participation through an assessment of the provisions and gaps in the reconciliation policy frameworks in each country.

Chapter four provides a summary and conclusion of the report. Out of all nine countries, we find Sweden and Finland to have the most developed and integrated suite of policies for reconciling work and family life. A summary of the particular issues identified for the countries in this study in relation to maternity and paternity leave, parental leave, leave for a sick child or relative, other work-time reconciliation measures as well as child- and eldercare services is provided. In light of this, we make the following recommendations for enhancing the reconciliation measures provided by firms in the European Chemical industry:

1. Enhance statutory maternity, paternity and parental leave systems so that employees who take parental leave (of up to a year) are financially supported and have a guarantee to return to the same or equivalent job.

2. Introduce specific encouragement for men to make use of leave and family-related working time adjustments, thus reforming the organizational culture and norms so that care is seen as a gender neutral joint rather than a female-only responsibility.

3. Opportunities to work reduced or more flexible work schedules (e.g. adjust start and finish times, working at home, job sharing, reduction in hours) should be extended and promoted to all employees.

4. Provide appropriate training and career support for employees returning after a period of parental leave.

5. Introduce training and information for line managers to help them to innovate and manage more flexible working arrangements. Consider setting targets for delivery on the implementation of certain policy reforms, such as male take-up of parental leave or working-time adjustments.

6. Increase support to help employees find affordable and quality childcare for young children. For example, through employer supported packages that increase employee's choices such as childcare vouchers and/or workplace crèches.

7. Increase support for employees with elder care responsibilities through options to work flexibly, take leave and by providing clear information about available financial support for accessing eldercare services where appropriate.

Introduction

The European chemical industry will face workforce and skill shortages unless personnel policies adapt to the realities that the workforce has contracted and the average age has risen (Tivg, Eggert and Korb 2010). One part of the solution lies in 'active ageing' policies, which was assessed in a follow-up report prepared by The Age and Employment Network (TAEN) in collaboration with European Chemical Employers Group (ECEG), European Mine, Chemical and Energy Workers' Federation (EMCEF) and the Fédération Européenne des Cadres de la Chimie et des Industries Annexes (FECCIA) (2012)[2]. In this report we turn to examine the role of reconciliation measures for integrating women into employment and supporting employees – men as well as women – who have family care responsibilities to coordinate with their employment.

The proportion of women who are employed in the chemical industry is low, particularly when compared to the overall female employment rate in each

2 *Further details of these projects can be found on www.demographicsinchemistry.eu, including the study 'The Impact of Demographic Change on the Chemical Industry in Europe' by Professor Thusnelda Tivig of Rostock University.*

country. According to Eurostat data for 2012, women account for just less than a third of those employed in the chemical industry (32.2 per cent) in the EU-28 – far lower than the proportion of women in total employment (45.7 per cent). Hence recruiting and retaining more women in the chemical industry will help offset the projected personnel and skill shortages.

Part of the solution is to improve reconciliation policies given that childcare and informal eldercare responsibilities continue to fall mainly on women. Women tend to organize and adapt their work schedules around alternative forms of informal, family-based care (i.e. grandparents and/or fathers) and, if available and affordable, more formal types of care provision. This means that they often reduce their hours; in some countries this includes switching to part-time employment after having children. Men's care roles and work-family reconciliation also needs to be supported and encouraged to promote a more gender equitable sharing of care responsibilities which will also support women's employment and career progression.

This report provides a comparative overview of the national framework of legal regulations and policies to support the reconciliation of employment with the care of children and older family members in nine EU countries: Belgium, the Czech Republic, Finland, France, Germany, Italy, Spain, Sweden and the United Kingdom. These countries have been selected because together they account for more than 80 per cent of production in the European chemical industry and they encompass a range of different national policy approaches to the reconciliation of employment and care responsibilities. Germany is the largest chemical producer in Europe, accounting for 29 per cent of chemical sales in 2011. France is next, accounting for 15.4 per cent of chemical sales, followed by Italy (9.7 per cent), the UK (8.6 per cent), Spain (7.2 per cent) and Belgium (6.4 per cent). Sweden and Finland have a smaller production share at 1.6 and 1.2 per cent respectively but are included in this study because they are two of the most advanced countries in the promotion of gender diversity and women's equal participation in the labour market. Finally, the Czech Republic also has a smaller production share accounting for 1.4 per cent of chemical sales but has one of the highest proportions of women working in the chemical industry (Figure 2.3, section 3.2) (Tivig, Eggert and Korb, 2010).

The report details and compares the statutory family leave provisions and social care services that are available in each country to improve the reconciliation of work life, child care and care work for elderly family members. It identifies the best practices and initiatives that support women's labour market participation through an assessment of the provisions and gaps in the reconciliation policy frameworks in each country. It is intended to help companies, associations and national governments develop appropriate strategies to achieve equal participation of women in the chemical industry.

2.2 EU2020 STRATEGY

One of the European 2020 priorities is to reach a 75 per cent employment rate for women and men aged 20-64 by 2020 (European Commission, 2011). It is envisaged that this will be achieved by getting more people, particularly women and older workers, into employment. Thus, identifying best practices and initiatives for attracting and retaining women in the chemical industry is one step towards achieving this goal.

This objective links with the Strategy for equality between women and men, which is the European Commission's work programme on gender equality for the period 2010-2015 (European Commission, 2010). This is a comprehensive framework committing the Commission to promote gender equality into all its policies for the following thematic priorities:

- Equal economic independence for women and men;
- Equal pay for work of equal value;
- Equality in decision-making;
- Dignity, integrity and ending gender-based violence;
- Promoting gender equality beyond the EU

- Horizontal issues (gender roles, including the role of men, legislation and governance tools).

The Strategy highlights the contribution of gender equality to economic growth and sustainable development and supports the implementation of the gender equality dimension in the Europe 2020 strategy. It builds on the priorities of the Women's Charter[3] and on the experience of the 2006-2010 Roadmap for Equality between women and men[4].

2.3 THE CURRENT SITUATION OF WOMEN'S EMPLOYMENT IN THE CHEMICAL INDUSTRY

There is a gender imbalance in the proportion of students and researchers in Science, Technology, Engineering and Mathematics (STEM) at school and university, which is a pivotal filter for entry to many of the professional and technical occupations within the chemical industry. This is a manifestation of the so-called 'leaky pipeline' of women on career ladders and in organisational hierarchies.

The leaky pipeline in STEM suggests that the initial education and career aspirations of many women have been thwarted, and that some may have diverted into other professional areas of training and employment in which their STEM skills are under-used, and the loss of this pool of talent fuels the shortage of qualified scientists, technologists and engineers. The leaky pipeline also perpetuates restrictive and damaging stereotypes about the interests and capabilities of women and men. Such stereotypes create a negative feedback loop which deters younger generations of female pupils from studying science and mathematics and applying to study STEM degrees, which also restricts the employment opportunities of women whilst deterring men from entering heavily feminised arenas (Fagan and Teasdale, 2008; Norman et al, 2013).

According to latest figures published by the European Commission (2012), the share of women in total employment reached 45 per cent in 2010, but women made up 53 per cent of tertiary educated people who were employed as professionals or technicians. However in that same year, in the EU-27, only 32 per cent of scientists and engineers were women (European Commission, 2012). Some countries have a better gender balance than others: the proportion of female scientists and engineers was higher in Belgium (49 per cent) for example, but the majority of EU countries have a much lower share of women among scientists and engineers such as in the Germany and the UK where there were just 23 and 21 percent of women in this category respectively (European Commission, 2012).

According to the European Commission (2012), women now represent around 40 per cent of all researchers in the Higher Education Sector, 40 per cent in the Government Sector and 19 per cent in the Business Enterprise Sector. While in all sectors their number has been growing faster than that of their male counterparts (+5.1 per cent for women annually compared with +3.3 per cent for men from 2002 to 2009), female researchers still struggle to reach decision-making positions with, on average, only one woman for every two men on scientific and management boards across the European Union. Indeed, women are severely under-represented in professional, managerial and board positions due to under-recruitment and 'leaky pipeline' progression. While there as been some progress to improve

3 Ahead of International Women's Day, the European Commission strengthened its commitment to equality between women and men with a Women's Charter. This political declaration sets out five key areas for action and commits the Commission to building a gender perspective into all its policies for the next five years while taking specific measures to promote equality. The Charter presents a series of commitments based on agreed principles of equality between women and men. It aims to promote: i) equality in the labour market and equal economic independence for women and men, namely through the Europe 2020 strategy; ii) equal pay for equal work and work of equal value by working with Member States to reduce significantly the gender pay gap over the next five years; iii) equality in decision-making through EU incentive measures; iv) dignity, integrity and an end to gender-based violence through a comprehensive policy framework; and v) gender equality beyond the EU by pursuing the issue in external relations and with international organisations. The 2010-2015 strategy for equality between women and men followed this Charter.

4 The Roadmap for Equality ran from 2006-2010 and had six priority areas for EU action on gender equality: i) equal economic independence for women and men; ii) reconciliation of private and professional life; iii) equal representation in decision-making; iv) eradication of all forms of gender-based violence; v) elimination of gender stereotypes; and vi) promotion of gender equality in external and development policies. For each area, it identifies priority objectives and actions.

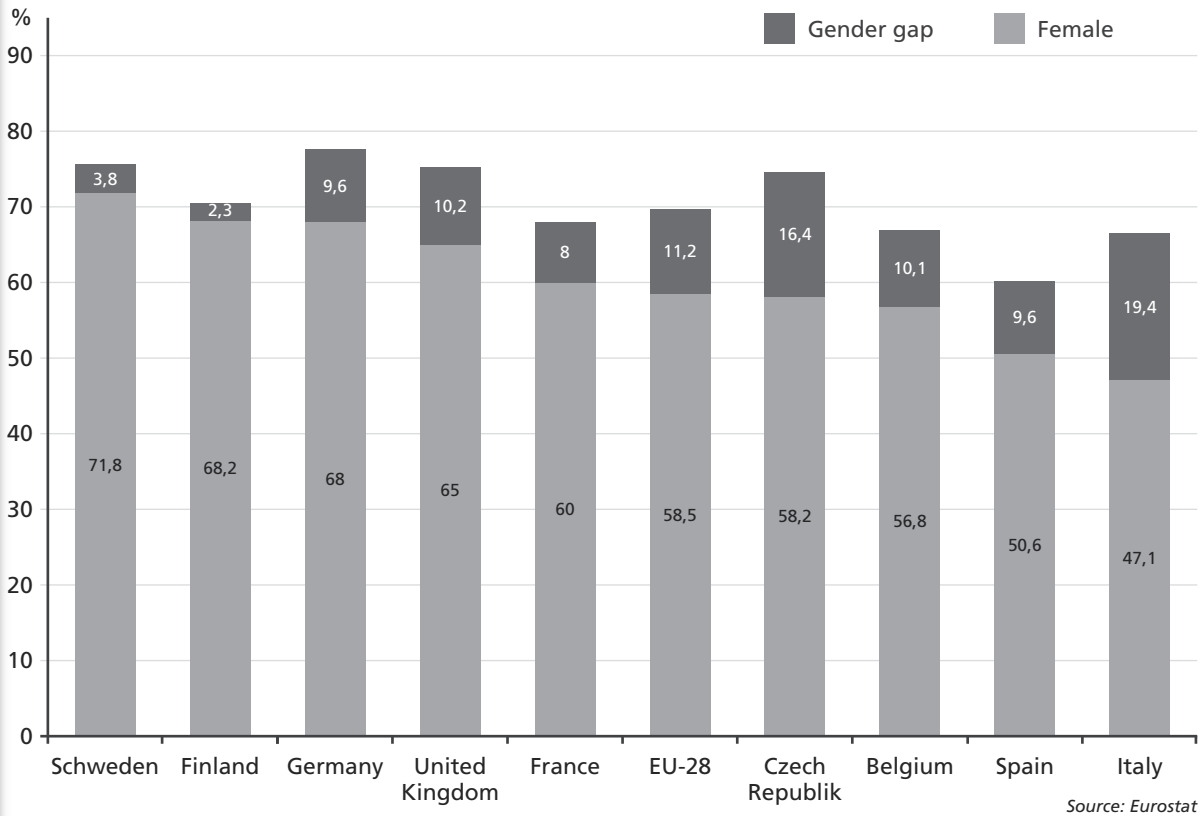
women's representation on boards in those countries which have implemented targets or quotas (Fagan et al 2012), the most recent figures from April 2013 show that women still account for around one in six board members of the largest publicly listed companies in the EU-27. Moreover, nearly one in four large listed companies has no female representation at board level at all (European Union, 2013).

While legal barriers to women's entry or restrictive practices have been long outlawed, covert biases and obstacles continue to operate, such as discretionary managerial practices for selection, hiring and promotions that favour men, or closer rungs on ladders in feminised jobs' career tracks for example. This can hinder career paths and career prospects for women within many occupations. Gender segregation pervades the European labour market where women continue to be over represented, for example, in clerical and service roles and under-represented in many professions, particularly industrial science-related ones, and in managerial positions (Bettio and Verashchagina 2009).

Figure 2.1 presents the female employment rate for the nine countries. The blue bars show the female employment rate and the red bars show the employment rate gender gap (i.e. the male employment rate – the female employment rate). Thus, the red and blue bars combined show the male employment rate.

The Nordic countries have the highest female employment rate. In Sweden, almost 72 per cent of women aged 15-64 are in employment as are 68 per cent of women in Finland. These rates are 13.3 and 9.7 percentage points higher than the EU-28 average respectively. Both countries have the narrowest

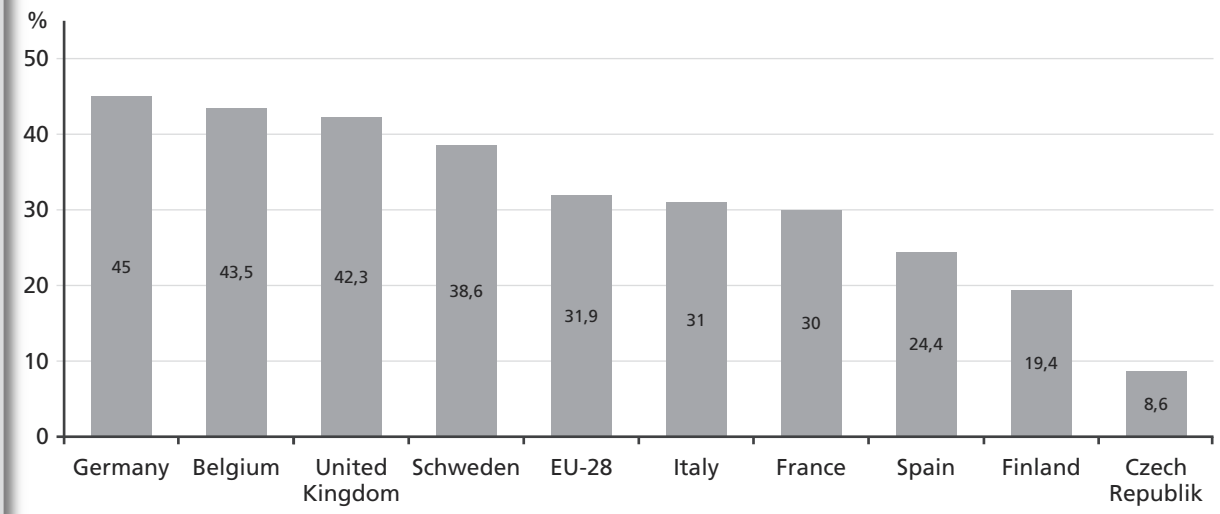
FIGURE 2.1 | The female employment rate (age 15-64) in the EU-28 and for the countries in this study, 2012)



Source: Eurostat

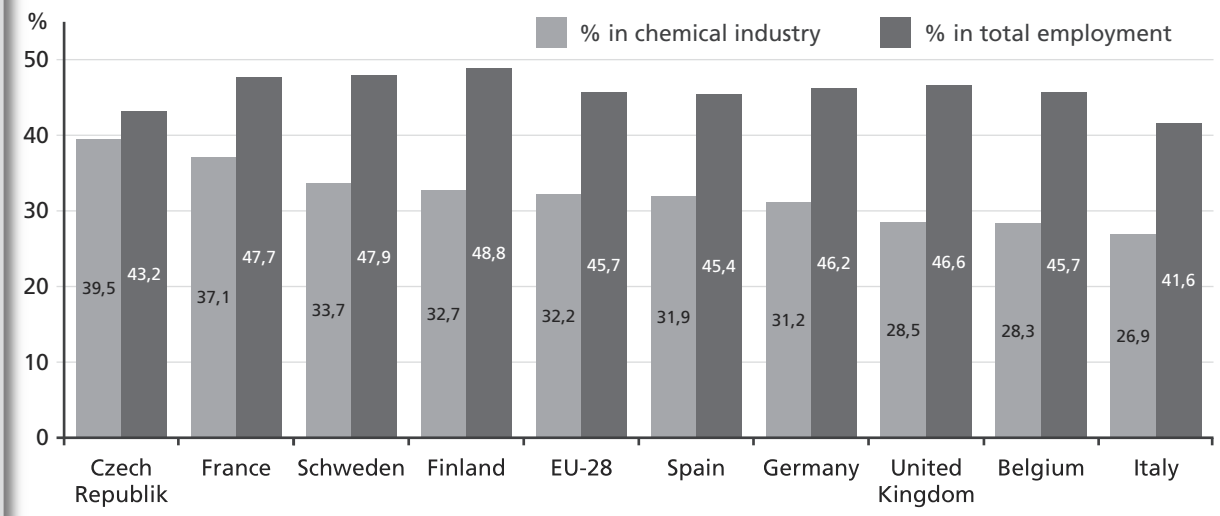
employment gender gaps at 3.8 and 2.3 percentage points respectively. In contrast, the lowest female employment rates are in Italy and Spain where only 47 per cent and 51 per cent of women aged 15-64 are in employment. Italy also has a particularly wide gender employment gender gap at 19.4 percentage points – at least double that of any other country with the exception of the Czech Republic.

FIGURE 2.2 | The proportion of employed women in part-time employment (age 15-64), 2012



Source: Eurostat

FIGURE 2.3 | The share of women in the chemical industry compared to the share of women in total employment[1] (age 15-64), 2012



1 *The chemical industry includes the following NACE Rev.2 classifications (i.e. the standard Statistical classification of economic activities in the European Community): i) manufacture of coke and refined petroleum products, ii) manufacture of chemicals and chemical products, iii) manufacture of basic pharmaceutical products and pharmaceutical preparations and iv) manufacture of rubber and plastic products (see Eurostat, 2008 for more information).*

Source: Eurostat

A considerable proportion of female employment is part-time, although it varies markedly across countries. Figure 2.2 shows that 32 per cent of employed women in the EU-28 are employed part-time, and there is considerable variation in the rate for the countries in this study. More than 40 per cent of employed women have part-time contracts in Germany, Belgium and the UK, while at the other end of the distribution is the Czech Republic where only 8.6 per cent of employed women work part-time.

Figure 2.3 presents the share of women employed in the chemical industry (blue bars) alongside the share of women in total employment (red bars) for the nine countries. This shows that the proportion of women working in the chemical industry is far lower than the proportion of women in the workforce in each of the countries in this study.

Women generally make up 40 per cent or more of those employed in each country but only around a third of employees working in the chemical industry. Of the eight countries in this study the Czech Republic has the highest share of women employed in the chemical industry at 39.5 per cent, but this sits alongside the lowest representation of women in employment overall (43.2 per cent). The Nordic countries (Sweden and Finland) and France have the highest share of women in employment, and also have a relatively higher share of women working in the chemical industry. Less than 30% of the chemical industry workforce is female in Italy, Belgium and the UK.

2.4 THE CONTRIBUTION THAT RECONCILIATION MEASURES CAN MAKE TO PROMOTING GENDER EQUALITY

Reconciliation measures play an important role in facilitating women's employment and career progression, but other complementary policy measures are needed in an action plan to promote gender equality and the full use of women's skills within organisations.

The European Commission (2008) follows the approach of gender mainstreaming where the gender perspective is integrated into every stage of policy processes from design to implementation to monitoring and evaluation. This involves assessing how policies impact on the life and position of both men and women, and taking responsibility to re-address them if necessary. As well as reconciliation policies, the other types of policy include:

1. **Recruitment and training programmes** to promote gender equality, equal opportunities principles should be embedded within the design and operation of recruitment and training measures, including positive action initiatives for under-represented groups where appropriate. The appointment of a specific equal opportunities officer with the requisite expertise may help in this respect.

2. **Gender equality in pay and in career ladders.** The gender pay gap is perpetuated by direct discrimination against women and structural inequalities, such as segregation in sectors, occupations, and work patterns, access to education and training, biased evaluation and pay systems and stereotypes. Equal pay policies that aim to tackle direct or indirect gender wage discrimination contribute to a reduction of the gender pay gap. Given that an uninterrupted career is still a significant factor contributing to the overall gender pay gap, it is extremely important to enable women to have more continuous employment patterns. Good childcare, leave facilities and measures aimed at desegregation of the labour market, horizontally as well as vertically, will help in this respect in addition to policies to reduce wage inequality and improve the remuneration of low-paid and/or female-dominated jobs.

3. **Flexicurity policies** have become an important frame of reference in the debate about modernizing European labour markets. Flexicurity attempts to enhance the flexibility of labour markets, the work organization and labour relations at the same time as enhancing security

(employment security and social security) notably for the more vulnerable groups in the labour market. A gender mainstream approach to flexicurity policies would recognize the role of gender in reinforcing inequalities associated with flexible working and in shaping flexible working patterns; address the reconciliation needs of employees with care commitments while recognizing the risks of extending working hours or unsocial hours scheduling; and support pathways out of non-standard work and working times to avoid the risks of long term traps and segmentation of women in to disadvantaged employment forms.

The next chapter of the report summarises and evaluates the statutory maternity, paternity and parental leave provisions, other working-time reconciliation measures and the child- and eldercare provisions that are available in each of the nine countries. A companion appendix report presents the full detail of these policy measures for reference. The final chapter provides a summary of the particular issues identified for some of the countries as well as the conclusions and recommendations for best practice in the European chemical industry.

2 Introduction

The reconciliation of employment, childcare and older family members in nine countries

This chapter details the national framework of legal regulations and policies to support reconciliation in each country.

3.1 BELGIUM

Table 3.1 summarises the statutory maternity, paternity and parental leave provisions, other working-time reconciliation measures and the child- and eldercare provisions available in Belgium. It also presents the coverage rates for formal child and elder care services.

3.1.1 Maternity leave provisions

Employed mothers are entitled to fifteen weeks of maternity leave, which can be taken up to six weeks before the baby is due. It is mandatory to take at least one week before the baby is due and nine weeks after delivery. In the case of multiple births, the length of leave increases by two weeks. Mothers who are self-employed are entitled to eight weeks of maternity leave. Mothers who need to take the full six weeks of pre-natal leave, are allowed to take an extra week of post-natal leave, i.e. their Maternity

TABLE 3.1 | Leave provisions and coverage rates for child and elder care services in Belgium

PROVISION	DETAIL
Maternity leave	15 weeks (17 for multiple births). Leave is paid at 82% of salary for 30 days; then 75% of salary with a ceiling of €98.70 a day.
Paternity leave	10 days to be taken 30 days after the birth. Leave paid at 100% of salary for the first 3 days; then paid at 82% up to a max of €107.91 a day.
Parental leave	Taken at full-time rate for 4 months; half-time rate for 6 months; or 1 day a week for 15 months to be taken up to the child's third birthday or child's eighth birthday if child is disabled.
	Leave is paid at €707.08 per month net of taxes
Other working-time reconciliation provisions	The Time Credit System – jobs can be interupted for up to a year (full-time) or two years (part-time)
	10 days of leave for emergency care of dependents.
	1-12 months (full-time) or 24 months (part-time) leave for a severely ill family member
	2 months of palliative care leave (full- or part-time)
	Right to request an adapted work schedule for 6 months following parental leave
Part-time formal childcare[a]	19% (aged 0-3); 32% (aged 3+) [b]
Full-time formal childcare[c]	20% (aged 0-3); 66% (aged 3+) [b]
Availability of eldercare services[d]	Home care: 6.7%
	Residential care: 6.5%

a Part-time (i.e. 1-29 hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
b Age 3+ = from age 3 to compulsory school age (usually 5 or 6 years old) (source: Eurostat, 2011).
c Full-time (i.e. 30+ hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
d Defined as the share of beneficiaries of long-term care provisions in the population of elderly people (aged over 65 years old). Residential care is typified by nursing homes and old-age homes, home care includes home help, personal care and nursing care at home, and semi-residential services are typified by day care centres and respite care facilities (source: Bettio and Verashchagina, 2012).

leave is extended to 16 weeks. Up to two weeks of postnatal leave can be taken as 'free days' thereby spreading Maternity leave over a longer period and facilitating a more gradual re-entry into paid employment. Mothers are entitled to return to the same or equivalent job after the maternity leave period.

Statutory civil servants in the private sector receive full salary whereas employees in the private sector are paid 82 per cent of their earnings during the first month of maternity leave, followed by 75 per cent for the remaining weeks with a ceiling of €98.70 per day. In the public sector, statutory civil servants also receive full salary but contractual civil servants are paid the same rates as employees in the private sector. Pay is funded from Federal Health Insurance and financed by employer and employee contributions as well as general taxation (Merla and Deven, 2013).

Given ten weeks of Maternity leave are obligatory, it can be assumed take up is universal although there is no information on the average length of maternity leave taken.

3.1.2 Paternity leave provisions

Fathers who are employed are entitled to ten working days of paternity leave, where three days are mandatory, and this can be taken at any point and in blocks during the first four months following the birth of the child. The first three days are paid at

100 per cent of salary and the remaining period is paid at 82 per cent of earnings by Health Insurance up to a ceiling of €107.91 per day. Self-employed fathers have no entitlement.

Take up is high and has been increasing in recent years. For example, approximately 68 per cent of fathers took paternity leave in 2008 according to Merla and Deven (2013) and 80 per cent of fathers took leave in 2012 according to Meulders, 2013). Only a low proportion (5 per cent) of fathers just use the first three days with full pay, which suggests that fathers will take up paternity leave providing there is a relatively high replacement rate.

3.1.3 Parental leave provisions

Parental leave is an individual, non-transferable entitlement so each parent is entitled to take four months of leave per child[5] provided the child is under twelve years old on the day the leave starts, and the parent has been with their current employer for at least 12 of the 15 months preceding the start of parental leave. The length of leave is increased for multiple births so, for example, each parent of twins is entitled to eight months of leave. Self-employed parents are not eligible. Leave can be taken full-time, part-time over eight months or one a day a week over twenty months. If leave is taken part-time (combined with a part-time reduction in hours), the total duration of eight months can be split into blocks of time, where the minimum block is two months. If leave is taken as one day a week (i.e. 1/5 parental leave, equivalent to 20 per cent of full-time employment) over twenty months, it can also be split into blocks of a minimum of five months.

Leave is paid at €707.08 per month net of taxes and is funded from Federal Health Insurance and financed by employer and employee contributions as well as general taxation (Merla and Deven, 2013). In 2012, the Belgian government also introduced the career state interruption allowance to further encourage employees to take parental leave. This is paid by the National Employment Office for the fourth month of parental leave taken, but is only paid to parents whose children were born on or after 8 March 2012 (Robert, 2012).

The government in the Flanders areas of Belgium pays an additional benefit bonus for a maximum of one year with the amount of the payment dependent on the sector of employment (i.e. private, social profit or public) and the reduction of employment whilst taking leave. This additional benefit is largest for employees in the social profit sector, especially when their time credit[6] relates to care (€475.20 net per month for a full-time break). Employees in the private sector receive €169.30 net per month additional to their time credit bonus.

Employers may postpone granting leave for up to six months 'where business cannot cope'. In addition, the request for leave must be addressed to the employer a minimum of two months and a maximum of three months in advance. Workers on leave are protected against dismissal (Merla and Deven, 2013).

Take up of parental leave is low. It is higher amongst women although the proportion of fathers taking parental leave has been increasing slowly. From 2007 to 2011, the total number of beneficiaries increased by 54%. This means that in 2011 2.1% of all female workers and 0.7% of all male workers took some period of parental leave. The proportion of fathers among all takers of parental leave increased from 9% in 2002 to 28% in 2011. Part-time leave options are the most popular, especially among men (Meulders, 2013). Almost three quarters of leave takers use the one-fifth time option, suggesting that it is predominantly used as a flexibility measure (Merla and Deven, 2013).

In 2012, 50,766 employees used Parental leave: 65 per cent in the Flemish region, 25 per cent in the Walloon region and 10 per cent in the Brussels region, implying that Parental leave use is higher in the Flemish region than elsewhere in Belgium (Merla and Deven, 2013).

5 Prior to June 2012, parental leave was three months.
6 The Time Credit system allows employees to interrupt their career full- or part-time (see section 3.1.4)

3.1.4 Other working-time reconciliation provisions

Since 2002, employees have had the right to interrupt their career full- or part-time. The interruption can be for up to one year for full-time workers, two years for part-timers, or five years for those working one fifth of a usual working week. This is what is known as the Time Credit system (Tijdskrediet / Crédit temps) in the private sector and the 'career breaks' scheme in the public sector. The government plans to harmonise the career leave system in the public sector with the time credit system with completion expected by 2020 (EirOnline, 2012).

This period can be extended up to 36 months by collective agreement negotiated at sectoral or company level, but only for leave taken to care for a child younger than eight years, to provide palliative care, to care for a severely ill relative and/or to do a training course (Merla and Deven, 2013).

From 2012 onwards, the career leave system in the public sector will be limited to a maximum of 60 months. In 2011, the qualifying criteria was restricted to employees who have been in paid work for more than five years, and with their current employer for at least two years[7] (EirOnline, 2012). In each company however, there is a five per cent threshold of employees who can use the time credit system at any one time. This decision is made within the company according to certain rules (e.g. priority in the case of care for a severely ill family member) (Merla and Deven, 2013).

During this period of reduced hours or no work, the employee remains under the same employment contract and receives compensation from the National Employment Office in the form of a career break allowance funded by the Federal social security system (Vanhille, Maes and Spiritus, 2012). Payment varies according to age, civil status and years of employment (i.e. it is higher for those employed for five years or more). The maximum payment for a full-time break is approximately €641 per month. The bonus paid to residents of the Flemish Community who take Parental leave is also paid to those taking this type of leave (see section 3.1.3) (Merla and Deven, 2013).

In addition to the Time Credit system, employees can take up to ten days of leave a year 'for urgent reasons' to deal with unexpected or sudden circumstances in relation to the care of dependents. The legislation defines 'urgent' as making it 'obligatory and necessary' to be present at home instead of being at work (e.g. such as illness, accident or hospitalisation of a member of the household). There is no entitlement to payment.

For a severely ill family member, an employee can take full-time leave ranging from one to 12 months (and up to 24 months if leave is taken part-time). It must, however, be taken in blocks of one to three months. Benefits paid are the same conditions as for Parental leave.

Employees may also take up to two months of leave, full time or part time, for palliative care (to be taken in blocks of one month). Benefits paid are the same as for Parental leave (Merla and Deven, 2013).

In order to facilitate their return after taking parental leave, employees can request an adapted work schedule for a period of 6 months maximum. The request must be notified at least three weeks before the parental leave period ends and must have work-life balance as an underlying reason (Robert, 2012).

In 2009, users of time credit represented 2.5 per cent of the workforce; 3.4 per cent of women in the workforce and 1.8 per cent of men in the workforce. People aged 50 and over represent the majority of users, accounting for 66.8 per cent of expenditure, mostly using the scheme to adapt their working time by taking part-time leave. Time credit users in this age group are predominantly male, suggesting that

7 Prior to 2011, the qualifying period was one year

men tend to use the time credit system as a form of flexible early retirement. By contrast, women tend to use it more to balance paid work and (child)care. In 2010, 61 per cent of all users were women (Merla and Deven, 2013).

3.1.5 Childcare services

In Belgium, child day care can take many different forms that can be grouped into two broad categories: collective and individual child care. Collective provisions include mostly day care centres of different kinds recognised and subsidised by an overarching authority at the Community level (Kind en Gezin for Flanders and O.N.E. for the French Community). Individual care is mostly provided by professional childminders. The various types of day care means there are differences in statuses, degrees of control and guidance by the Community office in charge, childcare ratios, opening hours, and so on. In the French Community services are mainly crèches whereas family day care predominates in the Flemish Community (Meulders and O'Dorchai, 2008).

There are fewer facilities for children aged 0-2 and coverage rates are lower compared to those for older children. The proportion enrolled in formal childcare aged under three was 39 per cent (full and part-time provision) according to EU-SILC data for 2011 (Table 3.1). However, there is regional variation. According to national data, coverage rates stood at 43.8 per cent in the French-speaking community in 2011 (this figure takes into account subsidised and non-subsidised care facilities) and 38.5 per cent in the Flemish-speaking community (this figure accounts only for accredited services) (Meulders, 2013).

Parental fees for children aged 0-2 are income-related and tax deductible (up to a fixed ceiling) until the child reaches 12 years of age (Meulders, 2013). Thus, the cost of childcare is fairly low at approximately 5.8 per cent of the average wage (The Guardian, 21 May 2012). Crèches are one type of facility available for children up to three years old and are usually open throughout the year from 7am until 6pm except on weekends and national holidays. However, there is often a waiting list and parents have to apply for a place at least four months into pregnancy. Priority is usually given to parents who work full-time (Expatica.com, 2011a). Thus, formal child care for 0-2 years olds is generally insufficient to meet demand and so around a third of children are cared for by the informal sector where there is no guarantee of quality provision. The 2006 Kind & Gezin (Flemish government agency) survey shows that 34.5 per cent of all dependent children using care are in informal arrangements (Meulders and O'Dorchai, 2008).

For children aged between 2.5-3 years and 6, access to publicly funded pre-primary education for 31.5 hours per week during term time is free. Most parents make use of this entitlement with 90 per cent of 2.5 year olds and almost 100 per of children aged three enrolled in pre-school (Merla and Deven, 2013).

The main problem for working parents in Belgium is after-school care because opening hours and days of pre-school are limited (usually 8.30 a.m. until 3.30 p.m.) and pre-schools often close on Wednesday afternoons and during the holidays (Meulders and O'Dorchai, 2008). There are a limited supply of out-of-school services for children aged between 2.5 and 12 years of age. Although the system of out-of-school care is very different from one region to another, there is generally a high unmet demand (Plantenga and Remery, 2013; Meulders 2013). Almost all existing services have to refuse children because of a lack of places and means (waiting lists). For example, for children aged 3-6, just over half (55 per cent) used services before or after school (Meulders and O'Dorchai, 2008). In terms of affordability, the number of income-related places in out-of-school care services is very small. It tends to be a free service and the regulatory framework at best sets out minimum and maximum parent fees (Meulders, 2013).

Given the lack of financial support for out-of-school care structures, organisers of such care services often turn to subsidised forms of employment. The employment status of carers in this system is very precarious and wages are low. Many carers also work part-time hours. The sector of out-of-school care is characterized by a high level of staff turnover and

relies heavily on voluntary workers. All of these elements are obstacles towards the sector's professionalization and the improvement of the quality of out-of-school care. Moreover, specific needs are not adequately addressed such as the care for school-going children during the lunch break, care for 2.5 to 4 year olds during school holidays, care for sick children, and so on. Transport from school to the out-of-school services is also an issue that has not been addressed in Beligum (Meulders, 2013).

Parents can claim child benefit, which is paid on a monthly basis until 31 August of the year in which the child turns 18. However, parents can also get child benefit for a child ages 18 to 25 if he or she is in education or only has small income from work or receives a social security benefit. In 2011, child benefit was €86.77 a month, €160.55 for the second child and €239.72 for the subsequent child (Expatica.com, 2011a).

3.1.6 Eldercare services

Formal long-term care (LTC) services for the elderly are fairly well developed in Belgium with residential, semi-residential, home nursing and home care services organised at the federal, regional and municipal levels. Subject to a personal contribution, the majority of LTC services are provided as part of the public, compulsory health-insurance system at the federal level, which is financed by social security contributions and general taxes. As public health insurance practically covers the entire population, LTC coverage is almost universal. Different measures exist to minimise personal payments. One of the main measures is the MAF (maximum à facturer/ Maximumfactuur), which prescribes an upper limit on out-of-pocket payments associated with medical and nursing care for those with low-income or high chronic care needs (OECD, 2011a).

There are also two major cash benefits targeted to individuals with Activities of Daily Living (ADL) restrictions. At the federal level, the Allowance of the Elderly (Allocation d'aide aux Personnes Agées / Tegemoetkoming Hulp aan Bejaarden) provides a monthly benefit especially for low- and modest-income individuals 65 years or older with a given level of ADL and Instrumental Activities of Daily Living (IADL) restrictions. At the regional level, care insurance (Zorgverzekering) is a compulsory dependence insurance scheme, implemented by the Flemish government. It provides a flat monthly allowance of €130 to all eligible individuals who are assessed as having severely reduced or no ability to function independently.

In 2006, close to 50% of LTC recipients received care in an institution. Both rest homes and nursing homes can be public, private non-profit or private-for-profit. Institutional care is provided in two types of institution, rest homes (maison de repos pour personnes agees/Rustoorden voor Bejaarden) and nursing homes (Rust-en Verzorgingstehuizen/Maisons de repos et de soins). Rest homes target people with low to moderate ADL restrictions while nursing homes target people with moderate to severe ADL restrictions (OECD, 2011a).

Institutional costs are typically divided between "care costs" and the accommodation cost ("hotel costs"). "Care costs" are covered by the public health insurance system while the "hotel costs" (board, basic assistance and lodging) are generally covered by the users (around €1,185 a month on average). Some users may be entitled to lower accommodation costs and access to these centres is dependent on both a means test and the level of need for care. In addition to rest homes and nursing homes, trans-mural care services (semi-residential care settings), such as day care centres and short stay care centers provides nursing care to individuals with moderate to severe ADL restrictions who remain in their own homes, but have limited or temporarily restricted access to informal care (OECD, 2011a).

Home nursing care is available to all individuals with mild to severe limitations. The level of care provided is determined according to the level of ADL restrictions. Eligibility for home care services and the number of hours provided generally depends on the severity of the patient's limitations as well as their financial situation. The federal government subsidizes the purchase of in-house activities through 'service cheques' for the whole population (OECD,

2011a). These are vouchers that can be purchased to pay for domestic services provided by public bodies or private firms who employ (usually low-skilled) personnel. The services provided under this scheme are paid mainly by government subsidies (around €13 per hour), with the remaining balance paid by the user (€7.5 per hour in 2010). This amount covers the hourly wage of the employee, including social security contributions, and a profit for the employer. The money spent on service cheques is tax-deductible by users up to a certain limit (implying that the government intervention is even greater than the subsidy) (Willeme, 2010).

According to the European Commission (2009), approximately 55 per cent of dependent older persons received formal care at home or in an institutions while 45 per cent relied only on informal (or no) care. For family caregivers, there are several ways to combine work and care with regulations mandating various forms of leave for carers such as the time credit and the 'interruption of career system' (section 3.1.5).

Thus, the Belgian LTC system can be characterised as a mixed system with extensive, publicly financed formal care services that are complemented by significant informal care provided mainly within the family (Willemé, 2010; OECD 2011a). Informal care is mainly provided by relatives, particularly spouses and children with estimates that almost 10% of persons aged 15 or over provide informal care in Belgium (Census, 2001). The care burden is distributed unevenly over gender and age groups, with women between 45 and 64 years old having the highest probability of providing informal care (Willemé, 2010).

3.1.7 Summary

The Belgian system is characterized by

- Relatively short periods of maternity and paternity leave with a relatively high earnings replacement rate and high take-up rates;
- A flexible parental leave system with a moderate length of leave that can be taken by both parents until the child is twelve years old but with a low, flat rate payment. Take up rates are low, particularly amongst fathers;
- A publicly financed, childcare system that is well-developed for children aged over three but a shortage of places for children under three resulting in a high unmet demand. There is also a shortage of flexible, after-school facilities for all age groups.
- Eldercare services are extensive with all citizens entitled to long-term care under the health insurance system, and several cash benefits to support elderly people although most receive a mix of formal and informal care (provided mainly by female relatives) in their own homes.

In addition, there are other reconciliation working-time adjustments such as:

- The Time Credit System, which allows employees to interrupt their career full-time for a up to a year, part-time for up to two years or 1/5 time (i.e. one fifth of a usual working week) for up to five years compensated with a (fairly low) monthly allowance.
- Full-time leave of up to a year (full-time) or two years (part-time) to care for an ill family member as well as two months of leave for palliative care with a fairly low, monthly flat rate payment.
- The right to request an adapted or reduced work schedule for a period of up to six months in order to facilitate a return to work following parental leave.

The key issues to address for the chemical industry are:

- The maternity leave payment in the private sector is lower than the public sector.
- The low replacement rate for parental leave, which discourages men from taking it up given they tend to earn more than women and so would incur a greater loss of earnings.
- The shortages in childcare facilities for very young children (aged under three), as well as flexible after-school services, which constrains women's work-family reconciliation given they tend to assume most responsibility for childcare.
- The reliance on informal care for the elderly. Although the Time Credit system allows employees to take a period out of work, this is low paid and so ultimately reduces women's earnings given they are more likely to be informal family carers.

3.2 CZECH REPUBLIC

Table 3.2 summarises the statutory maternity, paternity and parental leave provisions, other working-time reconciliation measures and the child- and eldercare provisions available in the Czech Republic. It also presents the coverage rates for formal child and elder care services.

3.2.1 Maternity leave provisions

All employed mothers are entitled to twenty-eight weeks of maternity provided they have contributed to sickness insurance for at least 270 days during the last two years. The same condition applies to mothers who are self-employed although they must have contributed to sickness insurance for at least 180 days during the last year. Six to eight weeks must be taken before the birth, and 20 to 22 weeks must be taken after the birth. It is mandatory to take at least 14 weeks, including at least six weeks immediately after the child's birth.

Maternity allowance is related to income and is paid at 70 per cent of daily earnings, up to a maximum payment of CZK 32,789 (€1,263) per month, and is financed from sickness insurance contributions by employers and employees.

From the start of the seventh week after childbirth, either parent is permitted to use the leave, that is, the mother may alternate with the father of the child, with no restriction on the frequency of alteration. However, if the father uses the leave, he must do so for at least seven days.

Nearly all mothers take up their maternity leave entitlement (Kocourková, 2013).

3.2.2 Paternity leave provisions

There are no paternity leave provisions in the Czech Republic[8]. However, fathers are entitled to paid time-off to take a mother to the hospital when the birth is imminent, and to unpaid time off to attend the

TABLE 3.2 | Leave provisions and coverage rates for child and elder care services in the Czech Republic

PROVISION	DETAIL
Maternity leave	28 weeks (37 for multiple births). Leave is paid at 69% up to CZK 31,837 (€1,235) a month
Paternity leave	No allowance
Parental leave	156 weeks to be taken up to the child's third birthday. Leave is paid at a maximum of CZK 11,500 per month €445 and 70% of previous monthly earnings until child is 24-48 months old.
Other working-time reconciliation provisions	Up to nine days of leave in one block of time to care for a sick relative at home paid at 60 per cent of earnings up to a ceiling of CZK855 (€33) per day for six days.
Part-time formal childcare[a]	4% (aged 0-3); 29% (aged 3+) [b]
Full-time formal childcare[c]	1% (aged 0-3); 45% (aged 3+) [b]
Availability of eldercare services[d]	Home care: 7.2% Residential care: 3.5%

a Part-time (i.e. 1-29 hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
b Age 3+ = from age 3 to compulsory school age (usually 5 or 6 years old) (source: Eurostat, 2011).
c Full-time (i.e. 30+ hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
d Defined as the share of beneficiaries of long-term care provisions in the population of elderly people (aged over 65 years old). Residential care is typified by nursing homes and old-age homes, home care includes home help, personal care and nursing care at home, and semi-residential services are typified by day care centres and respite care facilities (source: Bettio and Verashchagina, 2012).

8 In 2008, the then government planned to introduce one week of statutory paternity leave but this was abolished when the next government took office.

birth. As discussed in section 3.2.1, the mother is also allowed to transfer part of her maternity leave entitlement to the father. There is no data about the proportion of fathers who use these provisions however (ILO, 2011).

3.2.3 Parental leave provisions

Following the period of maternity leave, both parents are entitled to take parental leave up to the child's third birthday, and leave can be taken simultaneously. After parental leave there is no guaranteed return to exactly the same job although the employer is legally obliged to offer a position corresponding to the parent's qualifications after or at any time during the leave period. This employment guarantee is only in place up to the child's third birthday. Parents can take up temporary or fixed term paid work during parental leave as long as it is not with their current employer (European Union, 2012).

The non-means tested parental allowance ('rodicovsky prispevek') is funded from general taxation and paid to parents regardless of whether or not they take up Parental leave. Thus, parents can work whilst receiving the parental allowance although this carries certain restrictions on their access to institutional childcare: children under the age of two years can attend a nursery or other facility for pre-school children for a maximum of 45 hours in a month. Children over the age of two can attend a nursery or similar facility without any limitation. The allowance is therefore treated as a benefit to subsidise care costs, as well as a home care benefit for stay-at-home parents. Only one parent is entitled to it but it can be transferred to grandparents or others who care for the child (European Union 2012; Kocourková, 2013).

The period and amount of Parental allowance can be chosen by the parents. From 2008, a three-tier system was introduced where parents can draw the allowance for a period of up to two, three or four years from the child's birth. It is paid at a maximum amount of 70 per cent of previous monthly earnings with a ceiling of CZK 11,500 (€443) per month. The maximum amount payable for the whole period is CZK 220,000 (€8,476). For a disabled child, the benefit is paid at the basic rate of CZK 7,600 (€293) per month until the child is seven years of age but if the child is suffering from a long-term disability, the benefit is paid at the lower rate of CZK3,000 (€116) from 7 to 15 years of child' age.

According to 2011 data from the Ministry of Labour and Social Affairs of the Czech Republic, only 1.8 per cent of Czech fathers take parental leave. Equivalent data for mothers is not available although older data indicates they are more likely to use this option than fathers. For example, the proportion of women staying on a parental leave for more than two years after childbirth has increased from 22 per cent among women giving birth between 1970-79 to 78 per cent among those who gave birth after 1990 (Hašková, 2005).

Data also shows that women are much more likely to be in receipt of the parental allowance. In 2001, men accounted for 0.8 per cent of recipients and since then, this proportion has only increased very slightly to 1.5 per cent in 2010 when 4,986 men received Parental benefit compared with 328,777 women (Kocourková, 2013).

Most women eventually return to work after parental leave and the proportion of stay-at-home mothers remains low in the Czech Republic. However, given the protection of the parent's workplace is fixed at three years, many mothers are encouraged to stay at home for a longer period with the child making a return to work more difficult. A long continuous period spent out of the labour market (for example, a mother with two children can stay on parental leave for eight years) leads to a depreciation of their skills and qualifications, and limits their career progression and employment prospects (Sobotka et al, 2008).

3.2.4 Other working-time reconciliation provisions

There are no provisions for flexible working in the Czech Republic although a significant proportion of parents with dependent children (mainly women) would like to work part-time during or after taking

parental leave (Křížková and Vohlídalová, 2009 cited in Křížková, 2013).

Employees are entitled to take leave to care for a sick relative at home. This applies to all cases of illness for a child under ten years old but only to cases of serious illness for other relatives such as elder dependents for example. Leave is paid at 60 per cent of earnings up to a ceiling of CZK 855 (€33) per day for six days. A parent can take no more than nine days in one block of time, but there is no limit regarding the frequency of taking leave; parents are allowed to alternate with each other during the course of taking leave to care for a sick child (Kocourková, 2013).

3.2.5 Childcare services

An extensive network of subsidised childcare facilities had been established in the Czech Republic between the 1950s and 1980s, which helped to support the full employment of women and facilitate an earlier return to the labour market following childbirth. However, childcare centres that provide care for children aged 0-3 (nationally referred to as crèches) were drastically reduced from the 1990s due to a combination of the extended parental leave, shifts in public spending priorities and the abolishment of enterprise-provided care facilities (ILO, 2011). This has led to a considerable rise in fees and the transfer of responsibility for childcare to municipalities. This means the proportion of children aged under three who are enrolled in formal childcare is low: less than 1 per cent of children aged under three were enrolled in public nurseries in 2000 (down from 14 per cent in 1989) (Sobotka et al, 2008). More recent EU-SILC data shows little improvement with less than 5 per cent of children aged 0-3 enrolled in part or full-time formal childcare in 2011 (Table 3.2).

Children aged from three to six years of age (i.e. mandatory school age) can attend nursery school for pre-school education and is mainly provided by municipalities although a small number are provided by the private sector. Nursery schools are established with full-day operation (more than 6.5 hours a day, but at most 12 hours a day), half-day operation (at most 6.5 hours a day) and boarding operation (full-day and night care). Preschool education can be provided for a fee with the exception of the final year of nursery school founded by the state, region, municipality or confederation of municipalities and of preparatory classes of elementary schools, where it is provided free of charge (where children are educated who have had their sixth birthday in the given school year and children who have been given permission to postpone compulsory school attendance) (Ministry of Education, Youth and Sports, 2013). The coverage rate is higher with EU-SILC data indicating 74 per cent of children aged 3-6 years old in formal (part- or full-time) provision.

Children reaching mandatory school age up to the age of twelve usually attend school followed by after-school childcare such as school clubs provided by the schools themselves.

The Czech government have focussed on increasing the availability of private rather than public childcare services, which are not affordable for most parents. According to the OECD, childcare costs in the Czech Republic are equal to 10.5 per cent of the average wage (The Guardian, 21 May 2012). Monthly fees in private nurseries or kindergartens start at CZK 10,000 (about €400)(Křížková, 2013). The lack of early public childcare and options limits mainly mothers' options for an early return to the labour market, whilst the availability of parental leave for up to three years encourages them to stay at home. This, along with the cost of placing young children into private formal childcare will create a disincentive for women to return to employment following childbirth.

3.2.6 Eldercare services

Responsibilities for long-term elderly care are divided across social services, the health-care sector and between local, provincial and national government. The ministry of Labour and Social Affairs is responsible for home care and care provided by health institutions, such as establishments for long-term care patients. The Ministry of Labour and Social Affairs is responsible for social services provided in social care facilities. Municipalities and regions are responsible for "community planning" of social

services and for the availability of social domiciliary and residential services. Publicly funded benefits provided in the Czech Republic include home care, day care, and institutional care. Services in the health sector are available for all eligible citizens (in practice they depend on available budgets and regulations by insurance funds); and services in the social sector depend on the regional availability of social facilities and services (OECD, 2011b).

Institutional care can be in the form of aftercare in hospital departments and specialised medical institutions and in long-term care homes, which are located near public hospitals or managed by private institutions (OECD, 2011b). **Pensioner homes** provide care to the elderly who have suffered a permanent change in their health condition, require comprehensive care, and cannot be self-sufficient. They provide care to elderly persons who have limited capabilities and are used when formal or informal home care cannot be provided or is insufficient. According to the Czech Statistical Office, at the end of 2006 there were 390 pensioner homes, with an average occupancy rate of 97.1 per cent. However, in 2005, the Ministry of Labour and Social Affairs had already announced that the number of facilities was insufficient and that waiting times for pensioner homes differed between regions from several months to several years (MoLSA, 2005). Studies have also found that the supply of care is unequal between urban and rural areas, with access to care easier in urban settings (Potůček, 2006) (both cited in Sowa, 2010).

Semi-institutional care is provided by **daily and weekly care centres,** which are open for more than eight hours a day, and intended for individuals with limited capabilities in the area of personal and household care who cannot live without assistance on a daily basis. These centres only operate in a few communities, so their number is considered to be insufficient but the Ministry of Labour and Social Affairs plans to expand and promote this type of institutional care (Sowa, 2010). Centres provide meals and involve the elderly in specific programmes to encourage social participation. They can also provide care when the informal carer is away for several days. Overall, these centres are thought to be an important source of support for informal care providers, however, they have beem criticized for not always being able to provide adequate care or a sufficient number of activities. Although the number of day care centres increased by 16% between 1995 and 2003, the number of rejected applicants more than doubled. In fact, the number of rejected applicants was more than twice the number of available beds in the day care centres in 2003. In 2008, services at the day care centres were provided to 36,000 clients, while a further 1,300 clients used the services of weekly care centres. (MoLSA, 2009 cited in Sowa, 2010).

Home-based care is provided by nursing staff in the health care system in cooperation with the primary care doctor and the system of social services covering services in-kind and cash benefits. Services in-kind include personal assistance and community care to individuals whose capabilities are limited due to age, disability or chronic illness. Personal assistance, such as shopping, meal preparation, washing, paying bills and taking medicines, is provided to individuals in their homes (Sowa, 2010). The OECD (2011b) reports there were 475 home care agencies in 2007 providing personal care to more than 145,000 patients in the Czech Republic.

Benefits in cash are granted to individuals who are provided with personal, full-time care by a family member, relative or other informal cargiver. Prior to 2007, benefits were provided to the persons who provided assistance but after the social services reform of 2006, the individual in need became the one in receipt of the allowance. Although this benefit was not targeted specifically towards the elderly, 67 per cent of recipients are aged 65+ (Wija, 2008 cited in Sowa, 2010) and 57% constitute older seniors (75+) (MoLSA, 2009 cited in Sowa, 2010). The allowance takes the form of a personal budget benefit and can be used to cover the costs of arranging assistance for the dependent, care provided within social services, or costs incurred by the carer (MoLSA, 2009 cited in Sowa, 2010). The amount received is determined by a doctor and social worker's assessment of the person's health and social

situation. There are four levels of dependency on care, with a sliding scale of benefits, ranging from €32 per month for those in the first and lowest category (slight dependency), to €471 per month for those in the fourth and highest category (total dependency) (OECD, 2011b).

Informal care is by far, the most common type of care in the Czech Republic. A 2007 Eurobarometer survey indicated 66 per cent of the survey respondents felt that the elderly should be provided with help by a family member who either lives in the same household or visits the person in need and provides care on a regular basis (European Commission, 2007). The OECD (2011b) estimates there are 200,000 informal carers (FTE) in the Czech Republic, equivalent to approximately 2% of the population. Approximately 80 per cent of care for elderly people is provided by the family, mostly by children, but also spouses. These are mostly women (63%) of working age, most of whom (80%) also have a regular full-time job. Informal care within the family is estimated to last four to five years on average (Sowa, 2010). As previously mentioned, no direct benefits are granted to the informal carers but support is provided through pension credits and provision of health insurance. Respite services are also available for informal carers. Recipients of care allowance can also use the allowance to pay their family or other informal carers (OECD, 2011b).

3.2.7 Summary

The Czech Republic system is characterized by:

- A relatively long period of maternity leave with a low replacement rate and a high take up rate.
- No paternity leave provisions for fathers.
- A parental leave system that entitles both parents to a long period of leave up until the child is aged three with a moderate replacement rate. Take up is high amongst mothers but low amongst fathers. Parents are allowed to undertake temporary paid work during this period.
- A severe shortage of public childcare facilities for children under three, which has led to a rise in the cost of childcare provided by the private sector. There are more publicly, financed day and after-school facilities for children aged over three but this can be expensive if provided by the private sector.
- Several types of eldercare services but there is a mismatch between supply and demand in some areas, which means most elderly persons are cared for on an informal basis, by (female) family members. There are benefits to support the elderly choose and arrange their own care but these are low paid.

There are no other reconciliation working-time adjustments with the exception of leave to care for a sick relative with a low replacement rate.

The key issues to address for the chemical industry are:

- The low replacement rate for maternity leave;
- The absence of paternity leave provisions;
- The low take up of parental leave amongst fathers;
- The absence of flexible work-time options;
- The shortages in childcare facilities for very young children (aged under three) as well as the affordability of childcare in the private sector;
- The shortage of eldercare services in some areas of the country, which leads to women shouldering the most responsibility for informal elderly care.

3.3 FINLAND

Table 3.3 summarises the statutory maternity, paternity and parental leave provisions, other working-time reconciliation measures and the child- and eldercare provisions available in Finland. It also presents the coverage rates for formal child and elder care services.

3.3.1 Maternity leave provisions

All mothers are entitled to 105 working days (approximately 18 weeks) of maternity leave regardless of their employment status. This can begin eight weeks before childbirth although at least two weeks must be taken before and after childbirth. Working days are weekdays from Monday to Saturday excluding weekday holidays.

During this time, mothers are entitled to an earnings-related maternity allowance, paid by the Social Insurance Institution of Finland, to which both

TABLE 3.3 | Leave provisions and coverage rates for child and elder care services in Finland

PROVISION	DETAIL
Maternity leave	105 working days (about 17.5 weeks). Leave is paid at 90% of salary for 56 days up to a ceiling of €53,072; then 70% up to a ceiling of €34,495
Paternity leave	54 days to be taken before child is 2 years old. Leave is paid at 70% of salary
Parental leave	6 months (+ option of homecare allowance until child is 3) to be taken up to the child's first birthday
	Leave is paid at 75% of income for the first 30 days for each parent; 70% after that
Other working-time reconciliation provisions	Four days of leave when a child falls ill, often paid at 100% of salary.
	Reduced work hours from the end of Parental leave until the end of the child's second year at school.
	'Home care' leave can be taken from the end of Parental leave up until a child's third birthday paid at €336.67 a month.
Part-time formal childcare[a]	6% (aged 0-3); 20% (aged 3+) [b]
Full-time formal childcare[c]	20% (aged 0-3); 57% (aged 3+) [b]
Availability of eldercare services[d]	Home care: 6.3% (male: 4.5%; female: 7.5%)
	Residential care: 3.1% (male: 2.1%; female: 3.9%)

a Part-time (i.e. 1-29 hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
b Age 3+ = from age 3 to compulsory school age (usually 5 or 6 years old) (source: Eurostat, 2011).
c Full-time (i.e. 30+ hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
d Defined as the share of beneficiaries of long-term care provisions in the population of elderly people (aged over 65 years old). Residential care is typified by nursing homes and old-age homes, home care includes home help, personal care and nursing care at home, and semi-residential services are typified by day care centres and respite care facilities (source: Bettio and Verashchagina, 2012).

employers and employees contribute. During the first 56 days of leave, the allowance is paid up to 90 per cent of annual earnings up to a ceiling of €54,552, with a lower percentage for earnings for earnings above this level. For the remaining 49 days of leave, the allowance is paid at 70 per cent of earnings up to a ceiling of €35,457, but again with a lower percentage for higher earnings. For mothers who are not employed, and for those whose annual earnings are less than €10,189 before the birth, are entitled to a minimum flat-rate allowance of €23.77 per working day (€594 per month).

Earnings-based benefits are funded by the sickness insurance scheme, financed by contributions from employers (73 per cent of the total cost) and employees (27 per cent). In 2013, employers paid 2.09 per cent of their total salary bill and employees 0.79 per cent of their taxable earnings; these percentages are subject to change in the state budget. The minimum flat-rate allowances and 0.1 per cent of the benefit expenditure are funded from state taxation.

According to a recent report, 96 per cent of employees in the private sector are covered by collective agreements that guarantee full pay for part of the Maternity leave; in most cases (66 per cent) the full pay is for three months. In public sector collective agreements, coverage is also high. During periods of full pay, the daily benefit is paid to the employer. However, due to the high prevalence of fixed-term contracts for women of child-bearing age, a high proportion of women giving birth do not have an effective employment contract; so only 42 per cent of mothers on Maternity leave receive pay from the employer (Salmi and Lammi-Taskula, 2013).

Almost all mothers use the leave as four weeks are obligatory.

3.3.2 Paternity leave provisions

From January 2013, fathers have been entitled to fifty-four working days (nine weeks) of paternity leave, which can be taken up until the child is two years of age. Out of this allowance, the father can take between one and 18 days in a maximum of four periods whilst the mother is also on Maternity or Parental leave. The remaining 36 days can be taken in a maximum of two periods with a minimum length of twelve days. Prior to this, Paternity leave was 18 working days, plus a further 24 'bonus' days (four weeks) if the father took the last two weeks of Parental leave. The bonus days plus the two Parental leave weeks were called the 'father's month' in the legislation from 2007 to 2012.

All fathers are eligible, regardless of their employment status provided they are living with the mother and they have been covered by the Finnish social security for at least 180 days just before the estimated date of delivery. Paternity leave is child-specific so the father's unused leave entitlement is not cancelled if a child is born before the leave period has elapsed for the previous child; he is entitled to take 24 leave days based on the previous child during the Maternity or Parental leave period for the next child (Salmi and Lammi-Taskula, 2013). Paternity leave is paid at 70 per cent of annual earnings up to a ceiling of €35,457, with a lower percentage for higher earnings. The minimum allowance is €23,77 per working day (Monday to Saturday excluding weekdays) (Salmi and Lammi-Taskula, 2013; Kela, 2013).

As a result of collective agreements, 60 per cent of all fathers with an employment contract in the private sector, as well as all fathers employed by the state, receive full pay during the five or six first days of the Paternity leave (Salmi and Lammi-Taskula, 2013).

The majority of fathers take between one and three weeks of Paternity leave and this proportion has been increasing over the last two decades. In 1990, 40 per cent of fathers took between one and three weeks of paternity leave but this increased to 76 per cent in 2000 and then to 82 per cent in 2011, when the average length of the leave taken was 15 working days.

However, only 27 per cent of all fathers took the father's month in 2011 i.e. the bonus Paternity leave days plus the last two weeks of the preceding Parental leave, which was an allowance available for fathers between 2003 and 2012 (Salmi and Lammi-Taskula, 2013).

3.3.3 Parental leave provisions

Parental leave lasts for 158 weekdays (i.e. just over six months) and can be taken following the maternity leave period by either the mother or father for each child. In the case of multiple births, the length of leave is extended by 60 days for each additional child. The first 30 days of leave are paid at 75 per cent of annual earnings up to a ceiling of €54,552, with a lower percentage for higher earnings. After this initial period of leave, the payment is 70 per cent of earnings up to a ceiling of €35,457, with a lower percentage for higher earnings. The minimum allowance is €23,77 per working day. The entitlement to this parental benefit ends if a new entitlement to parental benefit starts due to a next child (Salmi and Lammi-Taskula, 2013).

Parents can alternate the leave, but cannot take it at the same time (with the exception of multiple birth families). If the leave is divided, both parents can take a maximum of two separate periods, which must last at least twelve working days. The father and mother are allowed to take partial parental leave at the same time, in which case both of them work part time and receive partial parental allowance (Kela, 2013). The father is entitled to parental leave even if he does not live with the mother; in such cases the father's parental leave period begins 75 days after the child's day of birth (Salmi and Lammi-Taskula, 2013).

The mother is allowed to work during parental leave but the parental allowance is paid at the minimum rate for the working days. Working on Sundays has no effect on the allowance. In contrast, the father is not allowed to work during his leave, except on Sundays. If the father works during the leave, no parental allowance is paid for the working days (Kela, 2013).

The full Parental leave entitlement of 158 days is mostly taken up by mothers. Almost all take Parental leave whereas only 2 to 3 per cent of fathers took a longer Parental leave than the two weeks of the father's month over the years it was available (i.e. 2003-2012) (section 3.3.2). Between 2004 and 2007, less than one per cent of mothers entitled to Parental leave did not take the whole leave period even if the father did not take Parental leave. Less than 4 per cent of mothers work to some extent during the leave period.

The father's month, under which there were bonus days of Paternity leave for fathers who took the last two weeks of Parental leave increased the number of men taking Parental leave from 1,700 men in 2002 to 5,700 in 2005, 12,156 in 2009 and 17,625 in 2011 – 29.6 per cent of fathers in Finland. However, only 2.5 per cent of fathers took a longer period of Parental leave in 2011. The average length of leave of fathers who take Parental leave has fallen; from 64 working days in 2002 to only 19 in 2011. Three-quarters of fathers taking leave use a month or less, while only 1.5 per cent use at least four months. The most common length of leave taken by fathers overall is 42 days, which means that men take all days earmarked for fathers – but no more (National Insurance Institution, 2012 cited in Salmi and Lammi-Taskula, 2013).

Although the father's month has slowly become more popular, its contribution towards equalising parental responsibilities is doubtful given, in a clear majority of families, the mother stayed at home during the father's month because she planned to continue to care for the child at home supported by the Home care allowance, and the father had to take his leave within six months of the end of the Parental leave.

Unlike Paternity leave, the length of Parental leave taken by men has been connected to their level of education and socio-economic position. Men with a high level of education, in skilled jobs or in superior positions are more likely to take parental leave but also more likely to take shorter periods of leave than men with a lower level of education and in blue-collar or less skilled white-collar positions.

The part-time option for taking Parental leave has not been popular. In 2003, the first year that it was available, 37 parents received the partial parental allowance, rising to 84 in 2004 and 117 in 2007. This means that about 0.1 per cent of families with a new-born child used the new arrangement in its first five years. The use has not increased subsequently: only 85 parents took this option in 2011.

3.3.4 Other working-time reconciliation provisions

Parents of children under ten years can take temporary childcare leave of up to four days when a child falls ill. There are no limits on how often parents can take leave for this purpose during the course of a year. Payment is dependent on collective agreements, but is often at full earnings for three or four days at a time. A parent with joint custody who does not live with a child is also entitled to the leave.

Parents can work reduced working hours in what is referred to as 'partial childcare leave' from the end of Parental leave until the end of the child's second year at school. The employee is eligible to partial childcare leave if s/he has been working for the same employer for at least six months during the past 12 months. The employee should negotiate the reduction in hours with the employer, and the employer can refuse only on strong business grounds – in which case, working hours must be a maximum of 30 hours a week. Both parents can take partial childcare leave during the same period, but cannot take leave during the same time in the day. Employees who take partial childcare leave before the child's third birthday or during the child's first and second year at school are entitled to a partial home care allowance of €96.41 a month (Salmi and Lammi-Taskula, 2013).

Childcare or 'Home care' leave can be taken from the end of Parental leave up until a child's third birthday. It can be taken in two parts, the minimum length being one month. While taking leave, a parent can receive a home care allowance consisting of a basic payment of €336.67 a month, with an additional €100.79 for every other child under three years, and €64.77 for every other pre-school child over three

years and a means-tested supplement (up to €180.17 a month); this home care allowance can be paid to any parent – whether or not they are on 'home care leave' from their job – as long as their child is not in a childcare service provided or funded by the local authority. The average home care allowance per family in 2011 was €385 a month. Home care allowance is financed from municipal taxation with a state subsidy of 33 per cent of the costs.

In 2012, thirty per cent of local authorities paid a municipal supplement to the home care allowance; these supplements averaged €148 a month per child, with a range from €50 to €264. The local authorities usually impose specific conditions on paying the supplement, the most usual being that all under-school-aged children in the family are taken care of at home (Salmi and Lammi-Taskula, 2013).

3.3.5 Childcare services

After the parental leave period, parents are entitled to place their child in public day care until the child starts school, usually at the age of seven, regardless of the income level of the parents or whether the parents are employed. Municipalities provide child day care services in day care centres, in family day care and in group family day care. It is available on either a full-time basis (for a maximum of 10 hours a day) and on a part-time basis (for a maximum of 5 hours a day). Municipal authorities also operate 24-hour daycare for the children of parents who do shift work. Private service providers, parishes and NGOs also offer alternative opportunities for child care (Ministry of Education and Culture, 2013; Ministry of social affairs and health, 2006).

Day care centres provide places in groups for children aged between one and six years old. Most centres are open on weekdays from 6.30am to 5pm. At a daycare centre, there may be four children under three per child nurse or kindergarten teacher, or seven children over three (Ministry of social affairs and health, 2006).

Supervised family day care is also provided to children under school age, at a childminder's home. Children can be looked after in a group of four, including any of the minder's own children who are under school age, although a child attending school or pre-school may be taken as a fifth child. **Group family day care** may be organised for between 8 and 12 children, looked after by two to three adults. In municipal family day care, the daycare nurse employed by the municipality looks after a group of children in her/his home. In special cases where no other alternatives are feasible, family day care may also be arranged in a child's home. Private day care is also approved and supervised by the municipal authorities (Päivähoito ja esiopetus, 2013). The fees for municipal child day care are based on the family's size and income and depend on the requested hours of day care.

There is a **private child care** allowance available from the municipality in order to provide care for a child under school age resident in Finland, either to a private carer chosen by the parents or to a private daycare centre. So, for example, a child can be looked after by a relative (e.g. grandparent) provided a contract of employment has been drawn up with them and the parent pays them wages. This allowance can be paid from the end of the parental allowance period until the child reaches school age. It is discontinued if the child is transferred to municipal daycare (Ministry of social affairs and health, 2006). The private child care allowance consists of a care allowance, €171,40 per child per month and a care supplement, eligibility for which depends on the size and income of the family. The maximum care supplement is €140.19 per child per month. If the child attends a municipal pre-school, the care allowance is €63,06 per month. The private child care allowance is paid directly to the carer and is taxable income (Kela, 2013).

Compulsory education starts in the year when a child becomes seven years of age. During the year before compulsory education begins, the child can participate in pre-primary education, for four hours a day, free-of-charge. Local authorities have a statutory duty to arrange pre-primary education, but for children participation is voluntary and decided by parents. About 96% of the six-year-olds go to pre-primary school. The local authority decides whether

pre-primary education takes place in a school or in a day-care center, a family day care place or other appropriate place. Pre-primary education may also be offered by private basic education providers (Ministry of Education and Culture, 2013).

The majority of school-going children do not attend an out-of-school service so this form of care is not yet well-developed and most children stay on their own. Most local authorities do provide before- and after-school services, mainly targeted at children in the first and second grade (7-8 year olds), but use is low. This is partly related to Finnish culture, which emphasises children's initiative and independence at an early age. There seems, however, an increasing need for out-of-school services as supply does not seem to cover demand (Platenga and Remery, 2013).

Day care costs are calculated according to the size of a family and income. They range between EUR 18 – 200 a month. The costs start to decline if you have a second child in day care. Day care services are free for low income families (Heinämäki, 2008). In Finland, childcare costs are 12.2 per cent of the average wage (The Guardian, 21 May 2012).

In 2011, 30 per cent of Finnish 1 year olds are in enrolled in childcare services, just over half (51 per cent) of Finnish 2 year olds have a place in municipal childcare services and 68–78 per cent of Finnish children aged 3–5 are in daycare (Ellingsater, 2012).

According to EU-SILC data for 2011 however, the proportion of children aged under three enrolled in formal childcare is slightly lower at about a quarter. This may suggest that parents make more use of the home care allowance to care for children at this age. The proportion of children aged over three is higher at 77 per cent, most of this being full-time provision.

3.3.6 Eldercare services

The long-term care system in Finland is a publicly funded, universal system open to every citizen. Once the older person's care needs have been assessed, several forms of LTC are available, which are classified according to the intensity and coverage of care. Services are provided by private or public service providers, or service vouchers are available for users to purchase services from a private provider. Long-term care is provided in older people's own homes (home care), in sheltered housing units, in institutions for older people and in the inpatient wards of health centres and support is also provided for informal care (OECD, 2013). During the last 10-15 years a new type of service that lies somewhere between nursing homes and the inpatient department at health care centres has been developed – sheltered housing (service homes). This type of service can in turn be divided into two categories, ordinary sheltered housing and sheltered housing with a 24-hour service. In 24-hour sheltered housing, care and medical facilities are available round the clock. There are also other types of services that lie in between those mentioned above. For instance, social services may provide a kind of day-care centre for elderly people, which offers meals and some care and/or medical services (Johansson, 2010).

Although the Finnish LTC system is mostly a system based on benefits in kind, there are also some benefits in cash. These benefits are not paid out by the municipalities, but by the Social Security Institution (KELA). The Care Allowance for Pensioners is intended to make it possible for pension recipients with an illness or disability to live at home, as well as to promote home care and to reimburse pension recipients for extra costs caused by illness or disability. The mean monthly allowance is around €100. There is also a special housing allowance for pensioners. However, it is not entirely clear whether this type of benefit should be accounted for as belonging to the LTC system.

Support for informal care also exists. There is also a special home care allowance, which is available to carers. Thus, someone who stays at home to take care of a relative can be eligible for a home care allowance. This allowance is given to the carer by the municipality and constitutes taxable income. The amount of support is normally €336 per month, but can be up to €637 per month if the work is particularly demanding. The home care allowance is

taxable income for the recipient. It is the local municipality that administers this type of support. The home care allowance can also be combined with various types of home care (Johansson, 2010).

Legislation governs the user fees that municipalities are allowed to charge for LTC services. For institutional care, fees depend on the ability to pay. The maximum user fee can be 82 per cent of the patient's monthly earnings. However, a minimum of €90 per month must always be left for the patient. Monthly earnings comprise any pensions or capital income that the person may have, such as dividends or rents. Also, the earnings of spouses will be taken into account. If a spouse is present, the maximum user fee is 41 per cent of the combined earnings of the spouses. Ability to pay is also the guiding principle for user fees in home care. User fees depend on income, the type of care to be provided, and size of household. Maximum user fees are always a percentage of income that exceeds a certain threshold.

According to Bettio and Verashchagina (2012), only 3.1 per cent of the elderly population (aged 65+) were in residential care and 6.3 per cent used home care services. There is no reliable data about informal care but this is likely to be prevalent. A rough estimation of 133,000 people as the number of individuals receiving informal care was provided in the Finnish report from the Euroframecare project, which would equal about 15 per cent of the population aged 65 or over.

Another way of quantifying informal care is to look at the number of individuals or carers who receive support for informal care. In 2006, some 20,400 persons received this kind of support. The Finnish Eurofamcare report also provides information on the characteristics of the informal carers. Some 75% of carers are women; 39% of carers are themselves older than 65 years, and 43% of carers were spouses of the dependent person. According to Stakes (2008), there has been a clear increase in service home living and home care compared with earlier years, and a clear decrease in residential home and health centre care (cited in Johansson, 2010).

3.3.7 Summary

The Finnish system is characterized by:

- A relatively short period of maternity leave with a relatively high replacement rate for the first half of the leave period, and a low replacement rate for the second half. Most private sector employees are, however, covered by collective agreements that guarantee full pay for almost the whole period.
- A long period of paternity leave with a fairly low replacement rate although most private sector employees are guaranteed full pay for the first few days. Take up is high although most fathers only take up part of their entitlement.
- A flexible parental leave system that entitles each parents to a moderate length of leave albeit with a fairly low replacement rate. During this period, mothers can undertake paid work but fathers cannot (if they want to receive payment). Take up is high amongst mothers but low amongst fathers and when they do take up leave, it is only for a short period.
- An extensive, publicly financed childcare system for all children from the age of one with most provision full-time. Private facilities are expensive but services are free for low-income families, and there is an allowance to help families with costs. Out-of-school childcare is not as well established despite an increase in the demand for such services.
- The eldercare system is well developed as most services are publicly funded or subsidized, with every citizen is entitled to support. Fees are high for residential care, so this option is rarely used. The system emphasises care at home through home care services and/or informal care by family. The latter is mainly taken on by women.

Other reconciliation working-time adjustments include:

- Partial childcare leave (i.e. reduced working hours), which can be taken up until the child's third birthday and in two parts if necessary. Parents are entitled to a small, monthly allowance.

The key issues to address for the chemical industry are:

- The low replacement rate for paternity leave, which has led to fathers only taking a small part of their entitlement.

- The low take up of parental leave amongst fathers, largely due to the low replacement rate, which would incur a loss of earnings;
- The shortage in after-school childcare facilities;
- The continued reliance on women's informal elderly care as a complement to more formal types of support at home.

3.4 FRANCE

Table 3.4 summarises the statutory maternity, paternity and parental leave provisions, other working-time reconciliation measures and the child- and eldercare provisions available in France. It also presents the coverage rates for formal child and elder care services.

3.4.1 Maternity leave provisions

In France, maternity leave is compulsory and lasts for sixteen weeks. At least two weeks must be taken before the birth and the remainder can be taken either before or after. Maternity leave can be extended in cases of multiple births or adoptions, or if the family has a total of at least three children. This means that when a mother already has two or more children, she is eligible to take 26 weeks of leave following the birth of her third child. There is an option to return to work sooner, however, a minimum of eight weeks must be taken with six weeks taken after the birth in order to receive maternity pay (Eydoux, 2013).

Leave is paid at 100 per cent of salary up to a ceiling of €3,086 a month. In the public sector, the leave is

TABLE 3.4 | Leave provisions and coverage rates for child and elder care services in France

PROVISION	DETAIL
Maternity leave	16 weeks (for first and second child) 26 weeks (for third child) + 3 weeks (for multiple births). Leave is paid at 100% of salary up to a maximum of €3,031 a month.
Paternity leave	2 weeks (or 3 weeks for multiple births) to be taken before child is 3 years old. Leave is paid at 100% of salary up to a ceiling of €3,086 a month
Parental leave	Three years per parent per child to be taken up to the child's third birthday. Leave is paid at €566 per month for 6 months if first child; or for 3 years if 2+ children
Other working-time reconciliation provisions	Unpaid leave (3-5 days) to care for a sick child under the age of sixteen. Leave of up to three years to care for a child under twenty with a serious disability or illness. A small allowance for a max of 310 days may be available. Unpaid family support leave to care for a dependent (elder, ill or disabled) relative for up to one year. Employees in the public sector are entitled to work part-time for family reasons.
Part-time formal childcare[a]	18% (aged 0-3); 43% (aged 3+) [b]
Full-time formal childcare[c]	26% (aged 0-3); 52% (aged 3+) [b]
Availability of eldercare services[d]	Home care: no data available Residential care: approximately 10%

a Part-time (i.e. 1-29 hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
b Age 3+ = from age 3 to compulsory school age (usually 5 or 6 years old) (source: Eurostat, 2011).
c Full-time (i.e. 30+ hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
d Defined as the share of beneficiaries of long-term care provisions in the population of elderly people (aged over 65 years old). Residential care is typified by nursing homes and old-age homes, home care includes home help, personal care and nursing care at home, and semi-residential services are typified by day care centres and respite care facilities (source: Bettio and Verashchagina, 2012).

fully paid (i.e. there is no ceiling) but in the private sector, some employers (particularly larger companies) pay in full, while others do not. Leave is paid by the social security fund for health and sickness and funded by employee's and employer's social contributions (respectively 2.35 per cent and 13.1 per cent of the total wage, including social contributions) (Fagnani et al, 2013). Social insurance is maintained throughout maternity leave, including statutory and supplementary pensions. Mothers are guaranteed the same job or equivalent job (no less favourable terms and conditions) when they return to work (Eurofound, 2004).

All employed and self-employed mothers are eligible to take paid leave provided they have been registered with social security for at least ten months before the birth, and have worked at least 200 hours over the three months preceding the date the maternity leave begins, or have earned at least €8,993 in the six months before the same date (The Connexion, 2010).

As maternity leave is obligatory, take up is universal although the length of leave taken varies, with women in higher status employment tending to take shorter periods of leave (Fagnani et al 2013).

3.4.2 Paternity leave provisions

Fathers are entitled to two weeks of statutory paternity leave, which must be taken within four months following the birth. Leave is paid at 100 per cent of salary up to a ceiling of €3,086 a month and all employed and self-employed fathers are eligible provided they have been registered with social security for at least ten months before the birth, and have worked at least 200 hours over the three months preceding the date the maternity leave begins, or have earned at least €8,993 in the six months before the same date (The Connexion, 2010).

In 2012, around two-thirds of eligible fathers (62 per cent) took up their paternity leave entitlement (Fagnani et al 2013).

In March 2013, the French government announced plans to allow fathers to take up to six months of paid paternity leave after the birth of a child, as well as financial incentives to encourage fathers to take their fair share of parental leave (see section 3.4.3). This initiative may help to facilitate a faster return to the labour market for many mothers given fathers will be encouraged to share some of the childcare burden by taking up paid leave. The changes are not expected to come into force until at least 2014 (The Telegraph, 8 March 2013).

3.4.3 Parental leave provisions

Following maternity leave, both parents are entitled to take parental leave up until the child is three years old provided they have been with their employer for at least a year before the birth. Parental leave can be extended by a year if the child is seriously ill or disabled. Leave can be taken as either a full interruption from employment or in the form of part time work. Employers are obliged to accept, but may decide the working time duration if the employee opts to work part-time, which can be between 16 and 32 hours per week. The parent is guaranteed the same job or equivalent job (with no less favourable terms and conditions) on their return (Eurofound, 2004).

Parental leave is not paid although there are separate benefits, which can be claimed. The complément libre choix d'activité (CLCA), or 'supplementary work choice benefit' was introduced in January 2004, replacing previous benefits for the birth and childraising[9]. The CLCA is a non-means tested, flat-rate payment of €566.01 per month available to all families who meet the eligibility condition regardless of whether they take Parental leave. Eligibility becomes more restrictive the fewer children a parent has: for example with three children the eligibility condition is to have worked for two out of the five years preceding birth (two out of the four years for parents with two children) but with only one child it is necessary to have worked without break for two years preceding birth.

9 Namely, the APE (allocation parentale d'éducation), which was introduced in 1994. Under this provision, parents were entitled to take parental leave for three years and could return to a guaranteed job with the same employer, but they did not receive any financial compensation.

It is paid out from the birth of a first child for a maximum period of six months at a full or a reduced rate if the recipient works part-time. This allows families to continue looking after the child following the maternity leave period.

There is a second benefit – Complément optionnel de libre choix d'activité (COLCA) – which is available to large families (with at least three children). This is a flat-rate payment of €801.39 per month, paid on the condition that one parent stops working completely. However the duration is only for one year. Large families can choose between COLCA and CLCA. Both allowances are paid by the social security system, financed by contributions from employers.

It is not possible to calculate the proportion of parents on Parental leave because employers are not required to provide information about take-up. Statistics are limited to CLCA, and it is not possible to find out how many recipients of CLCA are also on Parental leave (Fagnani et al 2013). The incentive for low paid mothers to stop working after having children is strong in France due to the savings that are made on childcare costs and other expenses. Research has also shown that mothers living in rural areas and small towns, where public childcare provision is scarce, claim benefits more frequently.

Research suggests that women make up 98-99 per cent of parents taking leave. Moreover, mothers who were in employment just before taking Maternity leave are more likely to claim CLCA if they are entitled to Parental leave because they have a job guarantee; with high unemployment, most working mothers who are not entitled to Parental leave cannot take the risk of losing their job unless their partner has secure employment. Mothers are also more likely to claim Parental leave and CLCA when they face demanding working conditions, for example atypical/non-standard working hours imposed by employers. Research by Boyer et al (2013) indicates that fathers represent only 3.5 per cent of the CLCA allowance recipients (cited in Eydoux, 2013).

Several factors help to explain why fathers are so reluctant to claim Parental leave, including: the unequal gender distribution of domestic and child-raising tasks within the family; traditional value systems; the man earning more than the woman in most couples; and a workplace culture in the private sector that makes it difficult for a man, in particular at management level, to take Parental leave. The small number of fathers who take CLCA at full time are mostly blue-collar workers or employees with a stable job. Compared to fathers who do not take parental leave, they are more likely to work in female-dominated sectors and to have partners with a higher level of education, a higher status job and higher earnings. However, the majority of fathers on parental leave take it part-time. The number of parents receiving CLCA has been decreasing since 2007 (670,000), reaching 538,200 by the end of December 2011. Additionally, the proportion of parents who receive the CLCA to work part-time during the leave has increased (albeit this proportion is still lower than the amount paid to those who stop working completely).

A proposal has been made by the government to reduce the length of parental leave and to reserve six months of leave for the exclusive use of father in order to encourage their participation in childcare (section 3.4.2). The reform is still pending, however (Fagnani et al 2013).

Although the long period of parental leave with fairly high benefits is attractive for employees reconciling work and family, the provision is mainly taken up by mothers. This interruption to a career can have a negative impact on earnings and career progression perpetuating occupational segregation in the labour market. The value of flat-rate CLCA benefit, with no upper limit imposed, is worth almost 50 per cent of the SMIC (minimum wage), and so makes the option very attractive to low-waged workers (Joseph et al 2013).

3.4.4 Other working-time reconciliation provisions

Every employee is eligible for an unpaid leave (Congé de présence parentale) to care for a sick child under the age of sixteen. Periods of leave cannot exceed three days (or five days in specific cases),

although this is a minimum and most collective agreements have special arrangements; for example, in the public sector employees can take 14 days a year to care for a sick child.

In cases where a child (aged under twenty) has a serious disability or illness, employees are entitled to paid leave to care for her/his child, or to work part time, for a period of up to three years provided they have been with their current employer for at least one year. An allowance is paid for a maximum of 310 days over the three year period, and the amount depends on the length of service in the company and on the family structure. For example, the amount is €42.20 per day for couples if one parent stops work completely; and €50.14 for a lone parent. A similar period of leave is available for the palliative care of a relative nearing the end of his/her life (Fagnani et al 2013).

Employees who have been with their current employer for at least two years are entitled to take unpaid family support leave (Congé de soutien familial) to care for a dependent (elder, ill or disabled) relative for up to one year. Another 3 to 6 months unpaid Family solidarity leave (Congé de solidarité familial) exists if the dependant relative suffers from a life-threatening illness (Eydoux, 2013).

Although there is no statutory entitlement to flexible working hours, employees in the public sector are entitled to work part-time for family reasons. The 'family tax credit' (Crédit d'impôt famille, CIF), introduced in 2004, is a financial incentive provided to companies to encourage them to develop family-friendly initiatives for their employees. The CIF stipulates that 25 per cent of related expenses are deductible from taxes paid by the company up to a ceiling of €500,000 per year and per company. As of January 2010 eligible expenses can no longer include training programmes for employees on Parental leave and supplements paid to employees taking various forms of child-related leave (Fagnani et al 2013).

3.4.5 Childcare services

There is an entitlement to free, full-time nursery education for children aged three to six years old. Children aged two to three year olds can also attend but due to a restrictive policy, coverage rates for this age group have declined in recent years. Only 13 per cent of two-year-olds now attend nursery school compared to around 30 per cent a decade ago (Fagnani and Lloyd, 2013).

For children aged 0-3 years, the system of formal childcare is less developed and demand is not met (Plantenga and Remery, 2009). Care responsibilities are shared between the state, which provides for collective childcare services or funds some individual services, and households, who either look after their children by themselves or pay for a subsidized service (collective childcare, registered child-minder or someone to come into their house). Some companies have introduced measures for helping employees find or pay for childcare services and, in a few cases, have even set up their own childcare facilities (Eydoux, 2013).

In some multi-accueil centres (which care for children from aged two months to four years old), flexible forms of childcare are grouped together in one place, such as crèches, halte-garderies providing sessional care, and jardins d'enfants for occasional and out-of-school care for children aged two to six. Up to 18 per cent of children whose parents both work now attend these centres, which stay open weekdays throughout the year for up to eleven hours a day. Since 2003, for-profit daycare centres also play a state-subsidised role within this system and charge income-related parental fees. This includes workplace crèches, although their market share remains small, at around 3 per cent of places in all centre-based childcare. More than a third of children aged under three are cared for by registered childminders and in 2012, the ratios of children per childminder was increased from three to four in an effort to increase the number of formal childcare places (Fagnani and Lloyd, 2013).

Developing collective childcare and nursery schools from the age of 2 was among the 30 priorities of François Hollande as a candidate for the presidential elections in 2012. However the priorities of the French family policy have not been detailed yet (Eydoux, 2013). According to EU-SILC data for 2011,

over a half of children aged over three and just over a quarter of children aged 0-3 are cared for in full-time formal provision.

Parents pay an income-related fee, with the actual prices depending on the use of a crèche, home child carer or a childminder. If a family has an income above the equivalent of two times the minimum wage, the least onerous childcare solution is a registered childminder. When the household's income is equal to, or less than, two times the minimum wage, collective childcare establishments cost less (Plantenga and Remery, 2009: 50). According to OECD data, childcare costs amount to 16.5 per cent of the average wage (The Guardian, 21 May 2012). This means that the cost of childcare provision is a major obstacle for mainly female labour participation, despite existing financial help (Plantenga and Remery, 2005). Although public funding for early childhood provision has been significantly increased over recent years in an effort to improve the availability of childcare, many working families still do not have access to affordable childcare (Fagnani and Lloyd, 2013).

Primary schools (compulsory school for children aged 6 to 10 years) usually begin at 8:30 a.m. and ends at 4:30 p.m. on Monday, Tuesday, Thursday and Friday; extra-time schooling facilities or municipal care services are generally provided to cover a time slot that can be as long as from 7:00 a.m. to 7:00 p.m. According to the Care Services Survey (Modes de garde et d'accueil du jeune enfant, Drees) in 2007, only about 7 per cent of children aged 3-6 years old went to extra-schooling services (the so-called 'Centres de loisirs') on Wednesday and only 7 per cent went to extra-time schooling facilities before school (at 8:00 a.m.) or after (between 16:30 and 19:00 p.m.). A reform has been recently implemented in primary schools, which aims to reduce the duration of school days and compensate this reduction with an additional half-day school on Wednesday morning. However, the reform has been heavily criticized both by school teachers and municipalities because it does not provide the resources needed to improve schooling conditions and municipal services (Eydoux, 2013).

3.4.6 Eldercare services

The public health insurance system and the personal autonomy allowance (allocation personalisee d'autonomie (APA) discussed below) provide support for the provision of long-term care, either at home or in an institution. The public health insurance system also plays a major role in financing services to support provided to the elderly for activities of daily living (ADL) or instrumental activities of daily living (IADL) (OECD, 2011c).

In 2010, the cost of care for the elderly in France was estimated at €34bn, 77% of which was covered by the public sector. However, this has since been cut by over a half – 55% – and is estimated that up to 15,000 beneficiaries would have lost their care services in 2011. With numbers of the over 80s set to rise by 104% by 2035, the situation is likely to worsen, with many of the elderly already falling below the poverty line – particularly as the average cost of care is around €1500 to €2000 per month (Kandalaft, 2012).

Home nursing care is fully covered by the public health insurance system. This includes support for ADL such as personal hygiene, and eating. In 2008, there were about 106,000 home nursing care places, with 95 per cent of the places targeted to dependant individuals aged 60 years and over. It has been estimated that home nursing care capacity is expected to increase to 232,000 places in 2025 (OECD, 2011c).

In 2007, there were about 657 000 individuals living in institutional care. This includes about 6,500 traditional homes for the elderly (for those dependent on others for daily care), about 2,800 sheltered housing facilities (for more able elderly people) and about 900 nursing homes (for those in need of continuous care). Fifty-seven per cent of institutional care facilities are public facilities, which usually come under the direction of a hospital or the local council who set the fees for the retirement homes in their district, about 27 per cent are private not-for-profit facilities and about 16 per cent are private for-profit facilities. The cost of nursing and residential care facilities is split into three

components: the health cost (tarif de soins), the dependence cost (le tarif dependance) and the hotel cost (tarif d'hebergement). The health cost is covered by the health insurance system and a portion of the dependence cost is offset by the APA (see below). Residents are responsible for hotel costs although those who cannot afford to pay the full-cost of long term residential care may be eligible to public social assistance for housing (l'aide sociale à l'hébergement) (OECD, 2011c; Joel et al, 2010).

The personal autonomy allowance (APA) was set up in 2002 and is a complement to the support provided by public health insurance. It is an income and need-adjusted cash benefit that provides individuals aged 60+ who have ADL restrictions with additional cash towards the cost of their care. Assessment of disability distinguishes six levels of dependency, with APA being allocated up to the fourth level. Recipients must either live at home or in a retirement centre. APA is administered by local departments, which leads to some differences in the level of APA benefits that is provided (OECD, 2011c; Bettio and Verashchagina, 2012). In 2009, APA was granted upon first application for 76% of people asking for home assistance and 90% of people seeking institutional care (Alzheimer Europe, 2009).

For those living at home, APA provides support towards any expenses incurred in line with a personalised support plan identified by a social-medical team. Plans generally include support for both ADL and IADL services through the employment of a caregiver (except for their spouse or partner). For those living in a retirement centre, APA offset a portion of the dependence cost while the remaining is paid by the resident (about 33% of the dependence costs on average).

The monthly cash allowance varies according to the assessed level of dependence and is limited to national ceilings (in 2010: GIR 1: 1,235 Euros, GIR 2: 1,059 Euros, GIR 3: 794 Euros and GIR 4: 530 Euros). Depending on their level of income, beneficiaries are required to forgo a certain percentage of the assessed level of APA down to a prescribed floor (up to a 90 per cent reduction). In 2009, close to 1.2 million individuals received a total 5.1 billion Euros in APA benefits, of these, about 40% of APA beneficiaries were living in institutions. On average, the proposed level of APA benefits is equivalent to 70% of the national ceilings.

In 2009-10, as part of the government's stimulus package, APA beneficiaries were eligible to an additional 200 Euros through a 'Chèques emploi service universel (Cesu)'. The Cesu could be used to reduce the amount of co-payment that APA beneficiaries had to pay.

Dependent individuals are also entitled to complementary tax deductions. This includes an income tax reduction (up to 10 000 Euros annually) in recognition of the costs (net of public support) incurred to hire an individual to support them with eligible IADL or ADL activities (OECD, 2011c). However, this does mean payments for personal services will be significantly cheaper for those on a higher income (Bettio and Verashchagina, 2012). Individuals above the age of 70 who hire an individual to support them with either IADL or ADL activities are also exempted from paying compulsory employer-contributions. Furthermore, an income tax reduction (up to 2,500 Euro annually) is provided to individuals living in care institutions.

A large share of the population is covered by private LTC insurance (15 per cent of the population aged over 40 years old in 2010). Indemnity policies are the prominent model of private coverage arrangements in France, under which an individual typically pays annual premiums in exchange of a determined future stream of income (rente) once the individuals is deemed to have become dependent.

In 2003, about 75 per cent of APA beneficiaries received care from a family member. The majority of caregivers are women (62 per cent, average age of 58 years old). Only about 10% of informal (family) caregivers are paid in the context of APA.

As for combining care and work activities, employed family caregivers can take three months of unpaid leave (up to 1 year over one's career) to care for a

dependent or a person with disabilities. Specific tax reductions are also available to individuals who care for a dependent person (OECD, 2011c). It is estimated that 15% of the caregivers in employment resort to part-time in order to meet their care commitment towards the elderly with around 15% of women in employment resorting to part-time hours in order to meet their care commitment (Bettio and Verashchagina, 2012).

3.4.7 Summary

The French system is characterized by:

- Relatively short periods of maternity and paternity leave paid at full salary and with high take-up rates;
- A long and flexible period of parental leave, which is unpaid although users are entitled to a small allowance. Take is high amongst women but low amongst men;
- Childcare provision is well developed for children over three with all children entitled to a full-time publicly funded place. There is a shortage of places for younger children and facilities are expensive where they do exist.
- The eldercare system is fairly good with public health insurance covering home nursing costs and partially covering residential care costs. This is also complemented by a personal autonomy allowance available to some eligible elderly people, which can be used to fund home and intuitional care costs. However, funding is being cut and reports suggest many elderly recipients will lose their care services. This means increasing numbers of elderly people will be living below the poverty line in future years, which will increase the reliance on informal family care, mainly provided by women.

Other reconciliation working-time adjustments include:

- Public sector employees have the right to work part-time for family reasons.
- Employees can take a very long period of leave, or work part-time hours, if their child is seriously ill. A very small, flat-rate payment is available for only part of this period.

The key issues to address for the chemical industry are:

- The low take up of parental leave amongst fathers, which is most likely due to the low replacement rate and the loss of earnings this would incur;
- Employees in the private sector do not have the right to work part-time for family reasons;
- Leave to care for a sick child or relative is unpaid;
- The shortage of childcare facilities for young children (under three years old);
- The increasing reliance on women's informal elderly care as government funds for eldercare are being cut.

3.5 GERMANY

Table 3.5 summarises the statutory maternity, paternity and parental leave provisions, other working-time reconciliation measures and the child- and eldercare provisions available in Germany. It also presents the coverage rates for formal child and elder care services.

3.5.1 Maternity leave provisions

All female employees are entitled to fourteen weeks of maternity leave (or eighteen weeks if multiple births), at least eight of which must be taken immediately after childbirth. Self-employed women are not eligible.

It is paid at 100 per cent of earnings with no ceiling on payments provided they are employed and affiliated to the statutory sickness insurance[10]. This allowance (Mutterschaftsgeld) is provided to pregnant women, 6 weeks prior and 8 weeks following delivery and is usually paid by the mother's health insurance (capped at €13 per day) and the mother's employer who covers the difference between the money provided by the health insurance and the mother's previous earnings. This means that employers bear most of the maternity leave costs and the amount received varies from case to case because it is based on existing employment pay. However, benefits for mothers with an income below €390 are paid by the mother's health insurance alone and match their prior income (Blum

10 With the exception of a few professions (for example, civil servants, judges and soldiers), all workers are subject to this compulsory insurance.

TABLE 3.5 | Leave provisions and coverage rates for child and elder care services in Germany

PROVISION	DETAIL
Maternity leave	14 weeks (18 for multiple births) paid at 100% of salary with no ceiling.
Paternity leave	No allowance.
Parental leave	Up to three years (family entitlement) to be taken up to the child's third birthday.
	Replacement rate of 67% of parent's average earnings during 12 months preceding childbirth up to €1800.
Other working-time reconciliation provisions	Up to ten days of leave for a sick child (below 12 years old) paid at 80 per cent of earnings with no ceiling.
	Ten days of unpaid, short-term leave for a sick relative and/or six months of unpaid, long-term care leave.
	Familienpflegezeit (family caring time) – employees can reduce their working time to a minimum of 15 hours a week for a up to two years, if they need to care for a dependent relative with a reduction in earnings
Part-time formal childcare[a]	9% (aged 0-3); 46% (aged 3+) [b]
Full-time formal childcare[c]	15% (aged 0-3); 44% (aged 3+) [b]
Availability of eldercare services[d]	Home care: 6.6%
	Residential care: 3.5%

a Part-time (i.e. 1-29 hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
b Age 3+ = from age 3 to compulsory school age (usually 5 or 6 years old) (source: Eurostat, 2011).
c Full-time (i.e. 30+ hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
d Defined as the share of beneficiaries of long-term care provisions in the population of elderly people (aged over 65 years old). Residential care is typified by nursing homes and old-age homes, home care includes home help, personal care and nursing care at home, and semi-residential services are typified by day care centres and respite care facilities (source: Bettio and Verashchagina, 2012).

and Erler, 2013). Women insured through a private health insurance company or who work Mini-Jobs without health insurance receive a maximum one-time payment of €210 (How to Germany, 2013).

Women are well protected from loss of employment due to dismissal from the beginning of pregnancy until four months following childbirth through a 'Kündigungsverbot' (Dismissal Ban). Only in extremely rare exceptions are employers permitted to dismiss a pregnant employee during this period (How to Germany, 2013).

There is a 100 per cent take-up of maternity leave as it is prohibited to work for eight weeks following birth (Blum and Erler, 2013).

3.5.2 Paternity leave provisions

There is no statutory paternity leave entitlement.

3.5.3 Parental leave provisions

Parental leave is a family entitlement that can be taken up to three years after childbirth. The first two years must be taken immediately after the child's birth, but the third year may be postponed until any time before the child's eighth birthday with the employer's agreement (Ray, 2008)[11]. Both parents are entitled to take leave at the same time and are allowed to take up to two leave intervals. Grandparents are also entitled to unpaid Parental leave if their child, i.e. the parent of their grandchild, is younger than 18 years or if the parent is still in education or vocational training (Blum and Erler, 2013).

11 Although many collective and individual company agreements allow parents to utilise their Parental leave entitlement within 12 years or, in the public sector, within 18 years after childbirth.

An income-related parental benefit (Elterngard), funded by the federal government through general taxation, is paid for twelve months at a replacement rate of 67 per cent of a parent's average earnings during the twelve months preceding childbirth. Parents are eligible provided they do not work for more than 30 hours per week during the time the benefit is issued (How to Germany, 2013). Prior to 2007, this was a childcare benefit (Erziehungsgeld) but was renamed in an attempt to emphasise the shared parental responsibility of bringing up children, including that of fathers (Blum and Erler, 2013).

Both parents are equally entitled to the parental benefit but if both parents take at least two months of leave, the overall length of benefit payment is extended to 14 months, i.e. a bonus of two months is paid (Blum and Erler, 2013). This effectively means that two months of benefits are available exclusively for the father's use and if he does not use them, they are deducted from the family's twelve month benefit (Ray, 2008). However, the benefits paid during the two months of obligatory Maternity leave following childbirth are included in the 12 (+2) parental benefit period, effectively reducing the actual benefit period available to both parents to 10 (+2) months. Parents can choose to spread the benefit over 24 (+2) months.

The Parental benefit is paid to all families who meet the eligibility conditions, whether or not parents take Parental leave. There is a ceiling of €1,800 per month on the benefit payment and the minimum payment, which is also available for parents without prior income, is €300. Since 2011, the long-term unemployed are no longer eligible for parental benefits, as it is now credited against social assistance payments. Parents with low average earnings of less than €1,000 per month receive an increased benefit: For every €2 their monthly earnings are below €1,000, their parental benefit increases by 0.1 per cent. For parents with high incomes, on the other hand, the income replacement rate is reduced: for every €2 their monthly earnings exceed €1,200, their parental benefit decreases by 0.1 per cent to a minimum rate of 65 per cent. In addition to this, there is a supplementary payment for parents with several young children (Geschwisterbonus): If there are two children under the age of three, or three or more children under the age of six in the household, the parental benefit is increased by 10 percent (or a minimum of €75) (Blum and Erler, 2013).

Recipients of parental benefit may work up to 30 hours a week. Then, however, they only receive parental benefit for the lost income: That is, if a parent worked 40 hours weekly before taking parental leave, and continues working 30 hours thereafter, he or she only receives 67 per cent of the margin between the present and the former income. Parents have a legal right to part-time work since 2001, but if their company has less than 15 employees, the employer's consent is required (Blum and Erler, 2013).

Parental leave legislation is federal but four federal states (Bavaria, Baden-Württemberg, Thuringia, Saxony) pay a means-tested parental benefit extended to the third year of Parental leave, ranging from €200 to €350 per month and child (Blum and Erler, 2013).

Since January 2013, it is no longer the net income but the gross income that serves as the basis for the calculation of the Elterngeld. This technical change was justified as a means to simplify the calculation of the parental benefit, rendering the process more transparent and faster. However, various tax experts have pointed out that this new calculation mode may lead to modest benefit decreases for average households (Blum and Erler 2013).

Plantenga and Remery (2005) report that 85% of all eligible households in Germany take up their parental leave. The vast majority of mothers take parental leave as full-time out of employment for substantial periods of time (29% of women who return to employment take between 25 and 36 months). Most women stay at home during the first year of the child's life and return to part-time employment afterwards. Fathers' take-up of parental leave has increased following the 2007 Parental leave reform Data from the Federal Statistics Office show that the proportion of fathers taking leave has risen more than eight-fold from 3.3 per cent in 2006 to

27.8 per cent for children born in the third quarter of 2011 (i.e. recipients from July 2011 to December 2012). While slightly more than every fourth father takes parental benefit, there are regional variations amongst the federal states, ranging from 18.6 per cent in the Saarland to 36.5 per cent in Bavaria (cited in Blum and Erler, 2013).

Thus, the reforms to Parental leave have successfully raised take-up amongst fathers, although a large majority i.e. 82.5 per cent (July 2011-December 2012), took no more than their individual two month entitlement (partner's months). The reform has also reduced the number of people taking more than one year of paid leave, which was a declared goal of the new law. In fact, from July 2011 to December 2012, just 11 per cent of Parental leave takers made use of the option to prolong their paid leave to two years at 33.5 per cent of prior income (Blum and Erler, 2013).

3.5.4 Other working-time reconciliation provisions

Parents may be entitled to take up to ten days of leave, if their child (below 12 years old) is sick, receiving 80 per cent of earnings from their health insurer with no ceiling. The maximum annual leave period that may be taken per family is 25 days.

A relative of a care-dependent person is entitled to ten days of unpaid, short-term leave if that person has an unexpected illness, as well as six months of unpaid, long-term care leave.

German employees have a statutory right to make a permanent switch from full-time to part-time hours. In addition to this, Familienpflegezeit (family caring time) permits employees, for a period of up to two years, to reduce their working time to a minimum of 15 hours, if they need to care for a dependent relative. During this period employees are paid a lower income, though the reduction in income is less than the reduction in hours; employees repay the difference by receiving the same amount of reduced earnings for an equivalent period after returning to full-time employment. For example, if employees reduce their working time from 100 to 50 per cent for two years, they will receive 75 per cent of their income during that time and for a further two years after returning to full-time work again. The compulsory long-term care insurance covers additional pension contributions during the caring time if care is given for at least 14 hours and employment is limited to a maximum of 30 hours per week. Familienpflegezeit is not a legal entitlement, but an optional provision that is available if covered by an individual contract or collective agreement. Although no comprehensive data on the take-up of family caring time is available yet, some conclusions may be drawn from data on employers' applications for loans and admittance to group insurance foreseen by the Familienpflegezeit-law. Until February 2013 there were only 147 such applications made, with an average duration of caring time of about 15 months (Blum and Erler, 2013).

In October 2010, the Federal Government in partnership with the Association of German Chambers of Industry and Commerce (DIHK) launched the 'Family Success Factor' programme in an effort to improve the reconciliation between family and career for employees. The initiative is ongoing and encourages companies to introduce flexible work times for employees in order to attract qualified applicants and retain skilled staff (European Union, 2013a).

3.5.5 Childcare services

The availability of formal childcare services varies across Germany as responsibility for Early Childhood Education and Care (ECEC) is divided between the local and the Laender's (i.e. Federal States) for children under school age and for school-age children. The allocation of subsidised childcare is the communes' responsibility and has to be organised and financed by local authorities within the framework of the Laender (Scheele, 2013).

All children have an entitlement to ECEC from 3 years of age, however, the hours per day or per week of this entitlement are not specified by law. Thus, many childcare services in Western Germany only offer part-time hours, while full-time opening is more prevalent in Eastern Germany. From August 2013, an entitlement to ECEC from the age of one year was put in place, which means parents now

have the option of taking paid parental leave for a year and then using the ECEC entitlement immediately after this period, which will help facilitate a return to work, although this may be part-time (Blum and Erler, 2013).

The 2008 Children's Assistance Act (Kinderfördergesetz) also stipulated that federal, state and local governments are obliged to create childcare spaces for an average of 35 per cent of all children nationwide under the age of three by 2013. According to the most recent evaluation on the level of childcare facilities, there should be 750,000 new places in 2013 (BMSFJ, 2012 cited in Scheele, 2013). Since the enactment of this Act, efforts have been made to increase the low supply of ECEC for children under three years old in West Germany. According to National data for Germany as a whole, ECEC for children under three years has increased from 9.5 per cent in 2000 (to 24 per cent in 2011 according to EU-SILC data in Table 3.5) to 27.6 per cent in 2012. Overall the increase constitutes a major improvement for West Germany. However, there is still a large difference between Western Germany (not including Berlin) and Eastern Germany, particularly regarding provision for children under three years old (22.3 per cent of children under three were in ECEC compared to 49 per cent in March 2012 respectively) (National Statistical Office, cited in Blum and Erler, 2013) and levels of provision still fall far short of the 35 percent level anticipated by the KiföG-law for 2013. According to estimates from the National Statistics Office, there is still a shortage of approximately 220,000 places for children below the age of three years. This estimate merely refers to the official goal of 35 percent – the actual demand is most likely higher (Blum and Erler, 2013).

Nursery schools (for children under three) and pre-schools (for children aged over three) are run by private and public agencies as well as churches. Prices vary considerably and in part depend on the parents' income and region (Federal Ministry of Economics and Technology, undated).

From 1st August 2013, parents with children under three who do not want to make use of public childcare but want to care for their children privately (either by staying at home or arranging childcare with family, friends or using childcare services that are not publicly funded) are entitled to claim a monthly childcare allowance from the German State (Betreuungsgeld) of €100 (increasing to €150 in August 2014). This childcare allowance starts when Elterngeld ends (typically when the child is 15 months old) and is paid out until the child turns three or attends a publicly-funded childcare institution. To claim, parents must not have a household income that exceeds €500,000 if in a couple, and €250,000 if a single parent (Care Monetary Aktuell, 2013). However, this measure has been highly disputed in the political arena and in light of national elections in September 2013, the future of the home-care benefit remains uncertain, as opposition parties as well as parts of the coalition government have vowed to abolish the provision (Blum and Erler, 2013).

The all-day school programme is one of the largest federal and state initiatives in the area of education in Germany. The creation of all-day schools, which stay open until about 5pm, has been supported with a funding volume of EUR 4 billion between 2003 and 2009 and about 8,200 schools nationwide have been promoted to 'all day' within this period. The Federal Ministry for Education and Research (BMBF) is funding an additional programme on the development of further concepts for additional out-of-school activities with EUR 4.5m annually until 2014, whilst the Ministry is funding a research project on the development of all-day schools with a total of EUR 6m over 2012-15. According to the Federal Government-Länder administrative agreement, the funding could be used for the development and follow-up development of new all-day schools, increasing the capacity of existing all-day schools, and improving the quality provided at all-day schools (Federal Ministry for Education and Research, 2013). However, given schooling is organised by the Laender governments, there is no coherent policy measure at state level to improve the number or quality of all-day schools (Scheele, 2013). The establishment of all-day schools in Germany would be beneficial for work-family reconciliation,

particularly for women by increasing the likelihood of them being able to return to the workplace after having children.

3.5.6 Eldercare services

Long-term care insurance (LTCI) was established by the German welfare state in 1996. This provides care services or cash benefits to pay for a private caregiver, such as a family member, to elderly persons in need of care. All those who have been covered by statutory or private sickness insurance are automatically covered by statutory or private LTCI. Employees who are not covered by the social insurance system, such as civil-servants and the self-employed, are usually members of a private health and pension insurance. Around 90 per cent of the German population is covered by the LTCI scheme and around 9 per cent have private LTCI cover (Arntz et al. 2007).

The amount of benefit received under LTCI is based on the extent of care needs as determined by the Health Insurance's Medical Service Department, as well as the type of care arrangement chosen (i.e. care by family members, care providers or in a nursing home) (European Commission, 2012). There are three levels of care: care level I is designed for people with considerable need of care at least once a day; care level II is specified as severe need of care that has to be provided at least three times a day; and care level III is applied to patients in need of round-the-clock help on a daily basis (Eurofound, 2013).

People in need of care at home can receive benefits in cash for informal carers at home or benefits in-kind for professional home care services, or a combination of both (Schultz, 2010). In 2012, benefits in cash for **informal care giving** were paid up to: €235 per month for care level I, €440 for care level II and €700 for care level III. Benefits for reimbursing professional **home care services** were higher – up to: €450 per month for care level I, €1100 for care level II, €1550 for care level III, and €1918 for hardship cases (i.e. when intensive care that exceeds the assistance reserved for care level III is required). Home care is provided by professional staff and encompasses assistance in basic care (personal hygiene, food, mobility) and household help.

The benefits for **part-time institutional care** are the same as those reimbursed for home care services. For **full-time institutional care,** which is provided if domestic or day/night care is not sufficient, a lump sum is provided: for care level I this amounts to €1,023 per month, care level II is €1279, and care level III is €1550; for hardship cases, the lump sum is €1918 (Schultz, 2010; Arntz et al, 2007).

The LTCI requires beneficiaries to take over part of the costs themselves – at least 25 per cent of the costs have to be borne by the claimant. Once a person is entitled to assistance, the payments are provided regardless of their current financial situation. If the patient does not have sufficient means to cover the co-payment, family members are obliged to stand in and provide the money needed (within legally defined limits). In order to prevent such financial gaps, a private additional insurance policy can be adopted. The German federal government requests its citizens to deal with these additional risks privately (Eurofound, 2013). In 2007, 11.3% of the elderly population (aged 65+) in Germany received benefits for long-term care (Schultz, 2010).

In Germany informal care giving plays a significant role and this is supported by German legislation, which gives priority to home care over nursing home care with the LTCI expected to continue supporting patients being cared for at home for as long as possible (Arntz et al 2007). Care by informal care givers is given priority and is supported by benefits from the LTCI funds. These benefits include respite care if the informal care provider is unable to provide the care (in case of illness or vacation), contributions to social security insurance for informal carer who provide care at least 14 hours a week and are not employed or work less than 30 hours a week, training courses and counselling (Schultz, 2010).

According the European Community Household Panel (ECHP), on average 5% of the population provided help and care to elderly people in Germany

in 2001 (Schulz 2004). In most cases the spouse, daughters or daughters in law are responsible for personal care. Informal care giving is a hard burden for family carers in particular if they are employed. Thus, a growing part of recipients of informal care engage additional private financed home helpers to disburden the family carer. The number of private financed home helpers is estimated to amount to 100,000 persons in 2008. In particular persons aged 80 and older with substantial impairments in ADL who are living alone engage additional home helpers (Schultz, 2010).

The reliance on informal care for the elderly population is also illustrated by the low coverage rates of professional care services. According to 2008 data, only 3.5 per cent of the elderly population were in residential and semi-residential care, and 6.6 per cent were recipients of home care services (Bettio and Verashchagina, 2012). Schultz (2010) also notes that although the number of nursing homes has increased in Germany – by almost a quarter between 1999 and 2007, this has been in private settings. Over this period, the number of private nursing homes increased by 40 per cent, while the number of public nursing homes decreased by 15 per cent. This also puts pressure on women to provide informal care to elderly relatives in order to avoid the high costs associated with private, formal elder care services.

3.5.7 Summary

The German system is characterized by:

- A short period of maternity leave paid at full salary and with a high take-up rate
- A long period of parental leave, which can be taken by both parents simultaneously, but with a fairly low replacement rate for the first year. Parents are allowed to work part-time during this period. Two months are reserved specifically for the father and are deducted from the total family allowance if they are not taken up. Take up rates are high although fathers only tend to take their two month entitlement.
- A fairly extensive childcare system for children aged three and over with all entitled to a free place although most are part-time. In August 2013, this entitlement was extended to children aged one and over with all federal, state and local governments now obliged to create places for an average of 35 per cent of all children aged under three, nationwide, by 2013. There is considerable regional variation however, with provisions falling short of this target in some areas, particularly in Western Germany. The all-day school programme is being developed in some parts of Germany, which stay open for school-age children until 5pm.
- The eldercare system is fairly well developed with all those who have been covered by statutory or private sickness insurance entitled to long-term care. Cash or in-kind benefits are the main way of funding and arranging eldercare and recipients can pay for an informal carer, homecare service or nursing home. Most eldercare is, however, informal and this type of care is actively encouraged under the LTCI system.

Other reconciliation working-time adjustments include:

- Familienpflegezeit (family caring time) can be taken for a period of up to two years, where employees have the right to reduce their working time to a minimum of 15 hours, if they need to care for a dependent relative with a reduction in income.

The key issues to address for the chemical industry are:

- No paternity leave provisions for fathers;
- Some regions have a shortage of childcare facilities for very young children (under three years old) and most childcare places are part-time;
- Informal eldercare is actively encouraged under the LTCI system, which increases the burden on women to reduce their hours and pay given they are more likely to be informal caregivers.

3.6 ITALY

Table 3.6 summarises the statutory maternity, paternity and parental leave provisions, other working-time reconciliation measures and the child- and eldercare provisions available in Italy. It also presents the coverage rates for formal child and elder care services.

TABLE 3.6 | Leave provisions and coverage rates for child and elder care services in Italy

PROVISION	DETAIL
Maternity leave	20 weeks. Leave is paid at 80% of salary
Paternity leave	3 consecutive days to be taken within 5 months of child's birth (3 months in exceptional circumstances). 3 days of leave is paid at 100% of salary. And 3 days leave is paid at 80% by health insurance
Parental leave	6 months per parent to be taken up to the child's eighth birthday. Leave is paid at 30% of salary only if income is below 2 times the minimum earnings up only if child is under 3: leave taken when child is aged 3-8 is unpaid.
Other working-time reconciliation provisions	Unlimited, unpaid leave to care for a sick child under three years old, or up to five days of unpaid leave per year for a child aged 3-8 years old.
	Two years of leave at three days per month in cases where a family member is in serious need
	Mothers are entitled to work reduced hours with full earnings compensation until a child is twelve months old.
	The right to reduce working hours when a child is under six years or 18 if disabled.
Part-time formal childcare[a]	9% (aged 0-3); 20% (aged 3+) [b]
Full-time formal childcare[c]	17% (aged 0-3); 75% (aged 3+) [b]
Availability of eldercare services[d]	Home care: 4.9%
	Residential care: 3%

a Part-time (i.e. 1-29 hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
b Age 3+ = from age 3 to compulsory school age (usually 5 or 6 years old) (source: Eurostat, 2011).
c Full-time (i.e. 30+ hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
d Defined as the share of beneficiaries of long-term care provisions in the population of elderly people (aged over 65 years old). Residential care is typified by nursing homes and old-age homes, home care includes home help, personal care and nursing care at home, and semi-residential services are typified by day care centres and respite care facilities (source: Bettio and Verashchagina, 2012).

3.6.1 Maternity leave provisions

Maternity leave lasts for twenty weeks (increased by twelve weeks for multiple births) and is compulsory for all employees and self-employed women with social security membership. At least four weeks must be taken before the birth. The twenty week period is also compulsory for fixed-term or temporary employees who are enrolled in 'Gestione separate' (separate administration) by the National Department for Social Welfare (INPS) but there are two options for taking this leave: four weeks before the birth and sixteen weeks after; or eight weeks before the birth and twelve weeks after (Addabbo and Giovannini, 2013). With permission from their doctors, healthy pregnant women can postpone maternity leave by one month, and therefore have four months of leave after their child's birth. Less healthy women may take their full pregnancy terms as maternity leave if their doctors feel that their medical histories put their pregnancies in risk. Women with hazardous working conditions may begin prenatal leave one month early. Regardless of the length or timing of maternity leave, women are guaranteed the right to return to their previous post upon return to work (Ray, 2008).

Leave is paid at 80 per cent of earnings with no ceiling for salaried workers, or 100 per cent of earnings for employees in the public sector. However, national collective agreements generally guarantee 100 per cent of earnings, with employers paying the additional 20 per cent. This is funded by the National Department for Social Welfare (INPS) and is financed by contributions from employers and employees at a

rate that is related to the sector and to the type of contract (for example, in manufacturing it is 0.46 per cent of earnings for employers and 0.28 per cent for employees). Workers on Maternity leave may be paid directly by INPS or they are paid by their employer, who is recompensed by INPS.

As maternity leave is mandatory, take up is universal. In 2011, according to administrative data of the National Department for Social Welfare, about 380,000 employees used compulsory Maternity leave: 9 per cent were temporary workers and 91 per cent permanent workers.

3.6.2 Paternity leave provisions

From January 2013, all employed fathers, including those who are self-employed and enrolled in Gestione separata are given one of mandatory paternity leave. An additional two days are available if the mother agrees to transfer these days from her maternity leave allocation. Leave can be taken at any point until five months after childbirth and it is paid at 100 per cent of earnings.

Fathers are entitled to take three months of paid, paternity leave only when the mother is severely ill (or dies), the child has been left by the mother or the child is in the sole care of the father. There is also the possibility for fathers to take paternity leave, paid at 80 per cent of earnings, two months before childbirth. This effectively means the father can take the entire period of maternity leave under certain conditions, namely, if the mother is a housewife or ill, or if she is a self-employed worker who is unable to use the leave for various reasons.

There is no information on take-up of leave as the provision was only introduced earlier this year but take of a day is likely to be universal given it is mandatory.

3.6.3 Parental leave provisions

Each parent is entitled to six months of parental leave (doubled for multiple births), which can be taken up until the child is eight years old in a single period or in shorter leave periods amounting to six months. Leave is an individual and non-transferable entitlement that can be taken simultaneously or separately but the total amount of parental leave taken by two parents is limited to ten months per child unless the father takes at least three months of leave, in which case, fathers are entitled to one month of additional leave. Single parents are a special case as they can take up to 10 months of leave. Parents must be employed although the self-employed and those enrolled with Gestione separata are usually entitled to three months, which can only be taken during the first year after childbirth.

Leave is paid at 30 per cent of earnings when it is taken for a child under three years old but is unpaid if it is taken when a child is aged three to eight years old unless annual earnings are under approximately 2.5 times the amount of minimum earnings (€14,891.50 in 2009), in which case parents are entitled to 30 per cent of earnings. Leave is paid at 100 per cent of earnings for the first thirty days for public sector employees. It is funded by the National Department for Social Welfare (INPS) and is financed by contributions from employers and employees.

In order to promote female employment, a voucher system was introduced in January 2013 to be used for childcare by new mothers. Mothers now have the right to claim these vouchers in place of Parental leave from the end of compulsory Maternity leave up to eleven months after childbirth i.e. during the period of non-compulsory leave. The measure is operating on a trial basis in 2013-14.

The law on Parental leave is due to be revised according to financial legislation passed in 2008 (Legge finanziaria 2008) with the aim of increasing payment and flexibility. A review is currently underway.

In 2011, Parental leave was used by 296,000 employees (6.4 per cent with temporary contracts and 93.6 per cent with permanent contracts); as with Maternity leave, the type of contracts varied regionally. According to the INPS data used for this analysis, 89 per cent of employees using Parental leave were women and 11 per cent were men (Addabbo and Giovannini, 2013).

3.6.4 Other working-time reconciliation policies

Each parent is entitled to unlimited, unpaid leave per year to care for a sick child under three years old, or up to five days of unpaid leave per year for a child aged three to eight years old.

All employees are also entitled to two years of leave over the course of their working life at three days per month in cases where a family member is in serious need – for example the disability of a child or other relative, even if not co-resident. This leave is fully paid by INPS but fathers and mothers are not permitted to take leave at the same time.

Mothers who are employees are entitled to work reduced hours (one hour less per day if working six hours a day or less or two hours less per day if working longer) with full earnings compensation until a child is twelve months old. Fathers are only entitled to use this benefit under certain conditions, for example: if the mother is self-employed or freelance; if the mother opts not to use it; if the mother is not employed; or if the father has sole custody of the child. Home helps, domestic workers and autonomous workers are not entitled to reduced hours, but in this case too the father can work reduced hours.

Both parents have a legal right to apply to their employers to work flexibly (e.g. to reduce their working hours) when they have a child under six years or a disabled child under 18 years. Employers have a legal duty to consider these requests and may refuse them only 'where there is a clear business ground for doing so.

3.6.5 Childcare services

Public childcare services are provided by local municipalities but the number of places available is very limited with no automatic entitlement to an ECEC place. Funding for childcare services comes mainly from local taxes with support from regions and national governments, which has led to a wide variability on supply across and within the different regions. For example, coverage tends to be higher in the Northern regions. Despite this, nearly all children attend ECEC from three years of age (95 per cent according to EU-SILC data in 2011) (Crepaldi and Pesce, 2013). Children aged 3-5 years old can attend an infant or nursery school (scuola per l'infanzia), which can either be public or privately run. Most public or state-run schools are free (although a fee is required for the meals provided, depending on family income) although a considerable number are concessional and charge modest fees. In general nursery schools operate from Monday to Friday, usually for eight hours a day, with flexible timetables (Euraxess, 2012).

There is a shortage of childcare services for children under three years old and so coverage is low (26 per cent in 2011 according to EU-SILC data, although other data indicates coverage is even lower e.g. ISTAT 2010 found only 12.7 per cent of children under three were in formal childcare) (Addabbo and Giovannini, 2013). There is also considerable regional variability with around 25 per cent of children enrolled in public childcare in some areas in the North to just 5 per cent of children in most of the South (Brilli et al, 2011). For this age group, childcare services include Daycare centres (asili nido), 'Baby Parking' (i.e. Crèches) or baby sitters. Daycare Centres can either be public (run by the Municipality) or private. Attendance requires a monthly payment depending on the selected timetable and the household income. Baby parking facilities provide occasional care for children and usually charge on an hourly/daily basis (Euraxess, 2012).

Childcare for preschool children is expensive in Italy unless parents are in receipt of means-tested benefits[12]. There is a strong reliance on informal care by parents, relatives or friends, particularly for children aged 0-2 years old (OECD, 2007). The traditional role of mothers is still highly valued in Italy and so mothers are considered the best caregivers for their children hence the little state support for childcare services (Brilli et al, 2011;

12 We were not able to find any up-to-date data on the average cost of formal childcare in Italy.

Plantenga and Remery, 2013). Nearly 30 percent of mothers leave their jobs after the birth of the first child and the probability of leaving the labor market after childbirth is higher for low educated mothers and in areas with limited childcare (Bratti et al., 2005; Pronzato, 2009 cited in Brilli et al, 2011).

The scarce supply of childcare for this age group has been at the centre of policy debates in recent years. Starting in 2007, a three-year plan for childcare services was launched by the government with the aim of increasing the coverage rate, particularly in Southern Italy up to 14-15% from the initial coverage rate of 11.7% in 2006. In addition, the "Italia 2020" plan launched in 2009 to support female labour market participation, proposes five lines of action with a small budget of EUR 40million. The largest part of the funding (EUR 24million) is allocated to the development of childcare services for small children (micro-crèches, tagesmutter, vouchers for childcare services), whilst the remaining EUR 16 million are devoted to labour market policies such as teleworking and training for women re-entering the job market.

On 26 September 2012, a new monitoring report on formal childcare services was published. The monitoring report shows that the total number of seats available increased in absolute terms to over 55,000 units with a percentage of municipalities covered by the service rising from 38.4% in 2004 to 55.2% in 2010, which indicates an increase of the geographical distribution of services, now available in more than half of Italian municipalities (Crepaldi and Pesce, 2013).

In Italy there is no national provision on out-of-school care facilities and on extra-time schooling activities. They fall under the regional and local legislation and are managed at municipal level, but every school may be organised differently. Recent financial cuts have dramatically reduced extra time schooling activities in many parts of the country municipalities (Crepaldi and Pesce, 2013). There is therefore a high unmet demand for out-of-school care in Italy and where they do exist, the majority close early i.e. 4.30pm (Plantenga and Remery, 2013)

3.6.6 Eldercare services

Funding, governance and management responsibility for elderly long-term care services is divided between local and regional authorities. The organisation of LTC services is determined by the municipalities, local health authorities (managed by the Italian National Health Service (Servizio Sanitario Nazionale – SSN)), nursing homes and the National Institute of Social Security (INPS). This means that Italy has many regional LTC systems, rather than one national LTC system (Tediosi and Gabriele, 2010; OECD, 2011d).

Thus, there is regional variation in the structure of LTC services. In general, the culture of public service in LTC is widespread in northern Italy, partly due to the high level of female labour market participation. These regions – and municipalities – have been making an effort to improve their LTC system through developed management capabilities and larger economic resources. In the south, the care burden rests mostly on families because there are fewer public services (Tediosi and Gabriele, 2010).

In Italy, LTC services are delivered by both public and accredited private providers of health and personal social care. Health care services are provided by the SSN free of charge and are funded from general taxation. This covers elderly (and disabled) people and includes outpatient and home-based care services, semi-residential and residential services. Social care services are provided at the local level and are means-tested. Some users can pay up to the full cost. Social care is provided in institutions, such as nursing homes for the elderly or semi-residential institutions, or as home-based care services. Eligibility criteria for these regional and local care services are quite heterogeneous. Evaluation Units, which comprise of members of the Municipality in charge of social services, are usually responsible for carrying out a needs' assessment. An income assessment also takes place, based on an Equivalent Economic Situation Indicator. This is a tool that combines income and assets, and is used to assess the economic household condition of the beneficiaries. The eligibility criteria may be set at the local level, or fixed by the Regions, or sometimes they may be mixed (Tediosi and Gabriele, 2010; OECD, 2011d).

Coverage rates for formal eldercare services are low: only 3 per cent of the 65+ population are in residential care and 3.9 per cent are in home care services (Bettio and Verashchagina, 2012).

Along with in-kind interventions there are some limited cash benefits provided by municipalities. There is a national disability cash-benefit scheme provided by INPS, which is funded by the central government from general taxation. This is a monthly, universal benefit that has no age restrictions. It is non-means tested and is not linked to the recipient's social security contribution payments. There are no restrictions in the use of the cash benefit for the purchasing of LTC services, which can be used as income support, to pay a home-based LTC worker, or to compensate family caregivers. To receive the cash benefit, beneficiaries must be assessed by the local health authority and the Italian National Health Service as being completely disabled and non self-sufficient, and must not reside in institutions with costs charged to the public administration. However, the need severity is assessed differently across regions, resulting in a different number of recipients across regions. According to IRCCS-INRCA (2009), nearly half of total spending for LTC was accounted for by this universal cash benefit in 2008 (cited in OECD, 2011d).

There are also means-tested care benefits (assegni di cura), which have no restrictions in the use. The monthly amount of this benefit varies from €240 to €515 depending on the region. The share of over 65 years old receiving this allowance is low (i.e. generally below 2 per cent).

Finally, INPS provide invalidity pensions as an income support to non self-sufficient individuals. These are not social benefits, but rather they belong to the pension system (OECD, 2011d). Cash benefits are an important part of the LTC system. According to the latest available data, 9.5% of persons aged 65 and older received cash benefits in 2008 (Tediosi and Gabriele, 2010).

A significant part of LTC is provided by family caregivers, particularly in regions where public LTC services are less developed and families cannot afford the cost of private services. A 2006 survey of 2,000 adults (aged 50-89) in Italy showed that 11% of people over 50 years (about 2.3 million) provide care to an older dependent relative (see Tediosi and Gabrielle, 2010). Italy does not have any national legislation concerning cash benefits to households in order to support the care of relatives.

There is no official data on private expenditure (i.e. user payments for institutional care, the costs of private insurance and those paid by users for privately purchased home care and co-payments). According to estimates of both the total and private expenditures for residential care (using National Institute for Statistics (ISTAT) data) by Tediosi and Gabriele (2010), almost half the cost is borne by users. On average, in 200413, the monthly expenditure per person admitted in residential institutions was estimated at €2,260, ranging from €1,528 for residential care institutions to €2,454 and €2,702 for the two types of nursing homes present in Italy. Users pay €1,065 per month on average (with a range of €929-1,194, depending on the type of institution), which is around 47.1% of the total costs (with a range of 60.8% to 39.6% by type of institution). Moreover, 56.7% of elderly persons in residential care pay the entire costs of it, 35.5% pay only part of the costs and 8% do not pay because cannot afford it.

3.6.7 Summary

The Italian system is characterized by:

- A relatively long period of maternity leave with a high replacement rate and high take up rates;
- A very short period of paternity leave (of one day) with a high replacement rate and high take up;
- Flexible and moderate length of parental leave for each parent that can be taken at the same time until the child is eight years old but with a very low replacement rate. Take up is high amongst mothers and low amongst fathers;

13 More recent data is not available.

- A shortage of childcare places for young children under three years old so most are cared for on an informal basis. There are more facilities for children over three years old so coverage is almost universal despite there being no ECEC entitlement. However, the supply of publicly funded places is limited and private places are expensive. There is also a shortage of out-of-school care services with most facilities closing in the afternoon.
- The eldercare system is fairly poor with significant variation between regions. There is a heavy emphasis on cash benefits for elderly people which can be used to support their care needs but long-term care services are expensive and so a significant proportion of eldercare is funded by the recipients themselves. There is a heavy reliance on informal family care, which is mainly taken on by women.

Other reconciliation working-time adjustments include:

- Mothers are entitled to work reduced hours with full earnings compensation until a child is twelve months old. Fathers are only allowed to use this provision in exceptional circumstances.
- A voucher system, which can be used by mothers instead of Parental leave, to help pay for the costs of childcare – from the end of compulsory Maternity leave up to eleven months after childbirth.

The key issues to address for the chemical industry are:

- Very limited paternity leave provisions;
- The low take up of parental leave amongst fathers, most likely due to the very low replacement rate;
- Leave to care for a sick child is unpaid;
- Fathers do not have the right to reduce work hours for a child under twelve months old;
- The shortage of childcare facilities for children under three and the affordability of private childcare facilities as well as the short opening hours;
- The affordability of eldercare facilities, which puts pressure on women to reduce their hours to take on more informal care.

3.7 SPAIN

Table 3.7 summarises the statutory maternity, paternity and parental leave provisions, other working-time reconciliation measures and the child- and eldercare provisions available in Spain. It also presents the coverage rates for formal child and elder care services.

3.7.1 Maternity leave provisions

All employed women are entitled to sixteen weeks of maternity leave in Spain (extended by an additional two weeks for every child if there are multiple births, or by two weeks if the child is disabled). Six weeks are mandatory and must be taken following the birth, while the remaining ten weeks can be taken before or after the birth. In practice, mothers can extend maternity leave by two to four weeks by consolidating an entitlement to reduced working hours (permiso de lactancia) – see section 3.7.4. Leave can also be taken part time except for the six weeks following birth.

Leave is paid at 100 per cent of earnings up to a ceiling of €3,262.50 a month. To qualify, women must be currently employed, self-employed, or receiving unemployment benefits, and must have made Social Security contributions for at least 180 days in the seven years prior to taking leave, or 360 days over their entire working life. There are some circumstances, which alter the eligibility requirements. Young mothers aged under 21 are exempt from the social security contribution period and mothers aged between 21 and 26 must meet half of the usual tenure requirement. Mothers who do not meet job tenure requirements for maternity leave may still take the six postpartum weeks, and receive a flat-rate benefit of €532.51 per month (i.e. €17.75 per day). The benefit is financed by social insurance contributions from employers and employees with employers generally paying about 23.6 per cent of gross earnings and employees paying 4.7 per cent to cover common contingencies including pensions, sickness and leave (Ray, 2008; Escobedo and Meil, 2013).

Employed mothers also have the right to transfer up to ten of their 16 paid weeks of Maternity leave to the father provided they take the mandatory six

TABLE 3.7 | Leave provisions and coverage rates for child and elder care services in Spain

PROVISION	DETAIL
Maternity leave	16 weeks (18 if 3 or more children). Leave is paid at 100% of salary up to a ceiling of €3230 per month
Paternity leave	15 days (+2 days if multiple births). 10 weeks of maternity leave may be transferred to father if eligible. Leave is paid at 100% with ceiling of €3230 per month
Parental leave	3 years of unpaid leave per parent per child, which can be taken up to the child's third birthday.
Other working-time reconciliation provisions	Unpaid career breaks are recognised as voluntary leave.
	Two days of paid leave to care for a seriously ill child or for other family reasons (extended to three days for public sector employees).
	Full- or part-time leave (with a minimum reduction of 50 per cent of working time) to take care of a seriously ill child under 18 years old paid at 100 per cent of regulatory basis from sickness insurance.
	Leave for caring elder dependants (relatives up to the second degree of consanguinity or kinship) of up to two years (or three years for public sector employees), or a reduction in working hours by between an eighth and a half with a low montly allowance for cases of chronic dependency.
	Mothers are entitled to one hour of absence during the first nine months after the child's birth (twelve months in the public sector) without loss of earnings
	A reduction to the working day by between an eighth and half of its normal duration to care for a child until the eighth year (or twelve if the employee works in the public sector), or to look after a disabled child.
Part-time formal childcare[a]	20% (aged 0-3); 45% (aged 3+) [b]
Full-time formal childcare[c]	19% (aged 0-3); 41% (aged 3+) [b]
Availability of eldercare services[d]	Home care: 4.7%
	Residential care: 4.4%

a Part-time (i.e. 1-29 hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
b Age 3+ = from age 3 to compulsory school age (usually 5 or 6 years old) (source: Eurostat, 2011).
c Full-time (i.e. 30+ hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
d Defined as the share of beneficiaries of long-term care provisions in the population of elderly people (aged over 65 years old). Residential care is typified by nursing homes and old-age homes, home care includes home help, personal care and nursing care at home, and semi-residential services are typified by day care centres and respite care facilities (source: Bettio and Verashchagina, 2012).

weeks following childbirth, that their partner fulfils contributory requirements, and that the transfer does not endanger their health. Leave can be completely transferred or partly transferred, so both parents share full or part-time leave simultaneously (Escobedo and Meil, 2013).

According to a 2012 survey[14], 80 per cent of mothers aged 25 to 60 who were in paid employment when pregnant used Maternity leave. Only 1.8 per cent of fathers in Spain shared some Maternity leave in 2012. The maternity leave benefit covered 67 per cent of the 471,999 births in 2011[15] (Escobedo and Meil, 2013).

14 The social use of Parental leave is a representative telephone survey of 4,000 people of working age (25 to 60) living in Spain, conducted during the first quarter of 2012.
15 Calculations based on data provided by the Social Security Institute and the Spanish Statistical Institute.

3.7.2 Paternity leave provisions

Since 2007, fathers have been entitled to a total of fifteen calendar days of paternity leave provided they have made Social Security contributions for at least 180 days in the seven years prior to taking leave, or 360 days over their entire working life. This is extended by two weeks for multiple births or if the child is disabled, and by five days for large families or households with a disabled person. The first two days must be used at the time of birth (permiso por nacimiento i.e. birth leave) and the remaining thirteen days can be used during or immediately after the end of maternity leave. In the public sector, the fifteen days are considered as a whole to be taken at birth time as a general rule except when the regional government or institution regulates differently. Fathers who work in the private sector and need to travel in their work are also entitled to an additional two days, paid by the employer. Fathers can also take leave on a part-time basis with the employer's agreement. The entitlement is framed in gender neutral terms so that a same-sex partner who did not use maternity leave can take up the paternity provision[16].

Leave is paid at 100 per cent of earnings by the Social Security Fund with the same ceiling as maternity leave. It is financed by social insurance contributions from employers and employees with the exception of the first two days that are paid by employers in the private sector, or the self-employed. There is some regional variation in entitlements with some governments making improvements to paternity leave. For example, public sector workers in Catalonia receive five days at birth (as birth leave), and a month of Paternity leave that has to be taken at the end of Maternity leave. A mother is entitled to use this month if she is a lone parent (Escobedo and Meil, 2013).

According to a representative 2012 survey of 4,000 people of working age (25 to 60) living in Spain, 74 per cent of men who became fathers after the introduction of paternity leave and were working at that time took up their entitlement. Those who were working when they became a parent but did not take paternity leave were mainly men who work without a contract or are self-employed. Some evidence suggests that take up is decreasing. For example, according to Escobedo and Meil (2013), the proportion of fathers taking paternity leave has been declining due to a rise in unemployment, particularly amongst young people (the proportion of unemployed men aged 30 to 34 years increased from 9.2 per cent in 2008 to 25.9 percent in 2012).

3.7.3 Parental leave provisions

Each parent is entitled to unpaid parental leave, which can be taken up until three years after childbirth. Both parents can use this leave simultaneously, unless they are working for the same employer (in which case the employer may object). Eligibility rests on being employed for at least one year's service with their current employer. Employees on temporary contracts are also entitled to leave provided it is for shorter time than their contract period. The self-employed are not eligible. Full job protection covers the first year where employees have the right to return to their same job. After the first year, job protection is restricted to a job of the same category. In the public sector, the job position is protected for two years, and in the third year within the same municipality.

Although leave is unpaid, employees are credited with social security contributions, which affect pension accounts, health cover and new Maternity or Paternity leave entitlements, for the first two years in the private sector and for the whole period in the public sector. Social security contributions are credited for a longer period (from 30 to 36 months) in families with three or more children or with two children one of whom has a disability. Since 2000, a number of regional governments introduced flat-rate benefits, however, these have been either reduced or abolished since 2009 as a result of the fiscal crisis.

Take up of parental leave is very low, particularly amongst fathers, most likely because it is unpaid.

16 Since 2007, following the approval of the Equality Act, the government planned to extend paternity leave to four weeks but has been postponed as a result of the economic crisis.

According to a 2012 survey[17], only 0.5 per cent of men aged 25 to 59 who were working when they became fathers made use of parental leave, compared to 10.4 per cent of women. The same survey showed that after leave, all men returned to a full-time job, but only 55 per cent of women did so, while a third returned to part-time job or part-time leave (35 per cent) and seven per cent gave up paid work altogether and 3 per cent lost their jobs (Escobedo and Meil, 2013).

3.7.4 Other working-time reconciliation provisions

Unpaid career breaks are recognised in the labour and public employees' regulations as voluntary leave (excedencia voluntaria). However, the only employment protection offered is to be able to claim the right of return to an equivalent job before the end of the leave, once there is a vacancy. This job protection works much better in the public than in the private sector.

Employees are entitled to two days of paid leave to care for a seriously ill child or for other family reasons such as serious illness, hospitalisation, or death of a relative up to the degree of consanguinity or kinship). The entitlement is extended to four days if travelling is required for work (i.e. the workplace is in a different municipality). For public sector employees this entitlement is extended to three days (five days if travelling is required) for the care of first relatives (e.g. partner, children or parents, including in-laws). However there is no set agreement on the definition of what constitutes a 'serious illness'.

Employed parents are also entitled to full- or part-time leave (with a minimum reduction of 50 per cent of working time) to take care of a seriously ill child under 18 years old during the period the child is in hospital or in need of continuous treatment at home (with certification by the public health service); 109 types of illness are included. The scheme is paid at 100 per cent of regulatory basis from sickness insurance, with previous contributory requirements as for Maternity and Paternity leave. This entitlement is extended to parents working part time, in which case leave must be at least equivalent to 25 per cent of full-time hours. The leave is an individual right, but only one of the parents is entitled to take leave at any one time although parents can alternate the use of it on a monthly basis.

Leave for caring elder dependants (relatives up to the second degree of consanguinity or kinship) of up to two years, or a reduction in working hours by between an eighth and a half is also available to employees. During the first year, employees are entitled to return to the same job. In cases of chronic dependency, the informal carer on leave may receive a payment, between €180 and €520.69 per month in case of co-residence. The payment is claimed by the dependent relative, and its amount depends on the relative's level of dependency, which is determined by a public agency. For the first year of full-time or part-time leave, employees are credited with social security contributions, which contribute towards pension accounts, health cover and new leave entitlements, otherwise informal carers of recognised chronic dependents are credited with the equivalent of €162.49 as social security and training contributions. These amounts were fixed in 2010, and have not been updated since.

Employees in the public sector can extend the unpaid leave to care for an elderly relative for up to three years, with the whole period credited with social security contributions and related social protection benefits. Moreover, they can work half-time for up to one month without loss of earnings in the case of a very serious illness of a first degree relative (child, partner or parent including in-laws); they can also benefit from extra flexibility in working time as do parents of children under 12 years.

During the first nine months after the child's birth (twelve months in the public sector), employed mothers are entitled to one hour of absence during the working day without loss of earnings, which is

17 The social use of Parental leave is a representative telephone survey of 4,000 people of working age (25 to 60) living in Spain, conducted during the first quarter of 2012.

paid by the employers (permiso de lactancia) originally introduced to support breastfeeding. This absence is paid for by the employer. The period can be divided into two half-hours or be replaced by a half-hour shortening of the normal working day; the public sector and many collective agreements allow the full hour shortening of the normal working day. If both parents are working, the mother can transfer this right to the father or partner. All employed mothers can consolidate this reduction in working time as full-time leave, thus in practice extending their Maternity leave between two to four weeks.

A working parent can reduce their working day by between an eighth and half of its normal duration to care for a child until the eighth year, or to look after a disabled child. Employees may decide, within their usual work schedule, the extent and period of the working time reduction. It is defined as an individual right, and there is no payment, but workers taking this 'part-time leave' are credited with up to two years full-time social security contributions (which affect pension accounts, and new leave entitlements). Public employees can benefit from this working time reduction until the child is 12 years, and have guaranteed some working time flexibility to adapt, for example to school hours.

Several regional governments have introduced payments to parents reducing their working hours but most abolished these payments in 2012. In Catalonia however, public sector employees are allowed to reduce their working hours by a third with a 20 per cent earnings reduction or by a half with a 40 per cent earnings reduction if they have a child under six years or care for a disabled relative. They can consolidate this reduction in working time during the first year as full-time leave to extend, in practice, their maternity or paternity leave.

3.7.5 Childcare services

In Spain, public childcare services are mainly provided at institutions (infant schools for children aged 0 to 3, 3 to 6 or 0 to 6 years old) and mostly take the form of full-time day care benefits (nursery school places) all year round. Public centres are supplemented by privately managed nursery schools that may or may not be receipt of some form of public subsidy or support (Garcia Diez, 2012).

From the age of three, children are entitled to a pre-school (escuela infantile) place, free-of-charge, from the age of three until they start compulsory education at the age of six. According to EU-SILC data for 2011 (Table 3.7), there is a high coverage rate with 86 per cent of children in this age group enrolled in formal childcare. However, this masks a significant shortfall in care provision because as many as 45 per cent of all children aged between three and six are only enrolled in formal childcare on a part-time basis.

Childcare for children under three is more limited because it falls into the domain of social services and not of the education system. Nurseries can be either state or privately run with private facilities usually more expensive. The distribution between public and private nursery schools for children under the age of three is 42 per cent in the public sector and 58 per cent in the private sector. However, there is variation among the different regions with school rates for children aged under three highest in Catalonia, the Autonomous Community of Madrid and the Basque Country (51, 31 and 61 per cent respectively). In Catalonia the majority of the provision is private (65 per cent), the Basque Country has a majority of public provision (61 per cent) whereas Madrid is more evenly distributed between public and private provision; 51 per cent is public and 49 per cent is private (MEC 2003 cited in Leon 2007). Many nurseries stay open into the evenings all year round. Typical hours are from 7am to 9pm (Expatica.com, 2011b).

The cost for a state nursery is approximately 25O euros a month with the main criteria for a child to be accepted being proximity between home and institution. Obtaining a nursery place that is subsidised by the state usually means applying to the Comunidad (regional authority) and providing evidence of low income. Given coverage varies widely, there are a insufficient number of places and private places remain very expensive (Gonzalez Gago, 2013). There is usually a 400 EUR annual fee for private nursery in addition to an enrolment fee

to reserve a place. On top of this is the monthly fee, which varies between 400 and 600 EUR depending on time spent in the nursery, whether lunch is required and so on (Expatica.com, 2011b).

In the private sphere it is widespread practice to retain paid carers within the home setting or accept support from family members, generally grandparents (unpaid care). The INE Living Conditions Survey data from 2008 shows that although a higher proportion of children are cared for at centres by non-household members – 49.6% of children aged up to 3 attended some form of preschool or infant education for a weekly average of 27 hours – a significant proportion (22.7 per cent of children in that age range) were cared for by paid carers of non-household family members for a weekly average of 24 hours (Garcia Diez 2012).

After the age of six, children attend school, which are usually open 9am to 5pm (European Union, 2013).

Cutbacks on 2012 and 2013 education budgets (Plan Educa3) are putting at risk the creation of additional places and regional education departments cannot meet their payments to subsidise current childcare services. These cuts are also behind emerging difficulties to provide out-of-school services and basic extra time schooling activities (quality meals, transportation services, and extra time sporting and training courses run by the parent's associations, fundamentally, as stated in CEAPA, 2012), as well as assistance of disabled children, particularly those in public-funded social services and managed by private associations. As a consequence, reconciliation is seriously hampered, as one of the most frequently alleged reasons for the impossibility to work more hours is the difficulties to find flexible childcare services, whereas the high costs have led parents to make use of alternative possibilities such as the help of relatives, mostly grandparents (González Gago, 2013).

Indeed, a significant proportion of children aged under three are cared for on an informal basis at home and this is mainly done by women. According to a 2006 EU report, one third of women under the age of 30 with children or other persons in their care say they would not be able to work without the support of other relatives, mainly grandparents (European Union 2013). Time Use survey for 2002-3 shows that although 57 per cent of children under two were cared for by non-household members (nursery schools, family members), the remaining 43% of children under two were cared for at home by their mothers (Leon, 2007).

3.7.6 Eldercare services

Public funding of long-term care services in Spain has been limited, with marked regional differences. This has led to a significant expansion in privately provided services since the 1980s, however public administration has been slow to implement quality controls. From 2006, the government has aimed to establish a system of long-term care services with policy priorities focussing on encouraging formal care capacity and training of caregivers to reduce the burden on informal caregivers, increase the quality of care and distribute LTC financing across society as a whole. The LTC system now includes services and cash allowances with provisions for those with the severest levels of dependency (Degree III) (definition below). The aim is to now extend provisions to those with lower levels of dependency (Degree I) by the end of 2014. However, there have already been difficulties linked to the unequal implementation across regions, both in terms of service availability and dependency assessment.

Benefits are universal for all Spanish nationals or who have been residents for at least five years. Eligibility depends on an assessment of the degree of dependency: Degree I (Moderate Disability) is where the individual requires help for several basic activities of daily living at least once a day, or needs help on a sporadic basis or is limited to personal autonomy; Degree II (Severe Disability) is where the individual needs help for several activities of daily living, two or three times a day but does not need permanent help from a carer nor extensive help to ensure personal autonomy; and Degree III (High dependency) is where the individual needs help for several activities of daily living several times per day and needs permanent help from a carer to ensure personal autonomy.

Three types of allowances are available, which are tax-free but means-tested and depend on cost, or on hours of care for the allowance towards informal carers:

1) Allowance for the care recipient to hire services – for the care recipient to hire services through private centres (with accreditation) when public services are not available. In 2009, benefit levels range from €400 per month for degree II level 1, to €831 per month for degree III, level 2

2) Allowance for the care recipient receiving informal care – which is only given if the informal carer is a relative of the dependent person, except when services are unavailable in the area, in which case the informal carer must be a neighbour residing in the same municipality (or nearby). In 2009, benefit levels range from €300 per month for degree II level 1, to €519 per month for degree III, level 2.

3) Allowance for personal assistance – is for individuals who have a high degree of disability (level III) to hire personal help from a carer with professional qualifications. In 2009, benefit levels ranged from €609 per month for degree III level 1, to €812 per month for degree III level 2

Subsidies may also be received in-kind through prevention services, tele-assistance, home care, day or night care or institutional care. The decision between in-kind or cash is done in consultation with the family after the needs' evaluation by the region. In-kind services are also means and assets-tested. In the case of residential care, wealth is calculated using the value of the house owned if there are no other dependents residing in that house. The following in-kind benefits are available:

- Facility-Based (Institutional) Long-Term Care Services: Institutional care includes regional centres, municipal centres and privately provided institutions. Most institutions are private with only 24 per cent of residences publicly-owned. There are large regional disparities in the distribution of places, prices and services offered.
- Day care centres are also mostly private (65%) but publicly subsidised at 60% and have seen large increases (36,000 new places between 2002 and 2007). Different norms have so far been established throughout the regions for means-testing or co-payments for residential care, i.e. regions set the minimum guaranteed. Co-payment is required for food board and lodging services but cannot exceed 90% of the reference cost indicator, which is set in each region using the prices of private residences that have agreements with the social security.
- Home-care services include prevention and promotion of personal autonomy, help with personal care and with instrumental activities of daily living. All persons below minimum income are guaranteed home care. Co-payments cannot exceed 65% of the reference cost indicator.

According to cost projections for the implementation of the new system, recipients are expected to pay one-third of total costs of services. The system of LTC is tax-based and financed by funds from the central government and regions. Regions determine whether to set additional funds for additional services (OECD, 2011e). In 2009, 0.3% of the population over the age of 65 years received long-term care in institutional settings and medical facilities, while 1.2% of this population group received care at home (OECD, 2011e).

Given the system is limited, there has been a traditionally heavy reliance on family members to provide informal unpaid care. Data from 2011 indicates that Spain has one of the highest shares of the population providing informal care to old or disabled people across the OECD. Half of these carers provide more than 20 hours of care per week. However, there is no allowance directly directed to family carers directly as the allowance is directed to the care recipient although informal carers have special pension rights and other social contributions (OECD, 2011e).

3.7.7 Summary

The Spanish system is characterized by:

- Fairly short maternity and paternity leave provisions that are well paid at 100 per cent of salary with the opportunity to transfer part of the maternity leave period to the father;

- A flexible and long period of parental leave, which is unpaid but can be taken by both parents at the same time with social security credits. Take up rates are low, especially amongst fathers.
- The childcare system is not well developed although there have been some recent improvements. All children are entitled to a pre-school place from the age of three but most are part-time. There is a severe shortage of places for children under three with most nurseries privately run and expensive. This has been intensified by recent government cuts resulting in a mismatch between supply and demand, as well as a lack of out-of-school services.
- Public funding of long-term care for the elderly is limited. Privately provided services have expanded but these are often unaffordable and some are poor quality. There are cash allowances available for elderly citizens but these are means-tested and do not cover the full cost of formal eldercare with recipients expected to pay at least a third towards the the total costs of services. The limited provisions have increased the reliance on informal care by family members, again mainly women

Other reconciliation working-time adjustments include:

- Several forms of leave that can be taken to care for ill children or elderly dependents but most of this is either unpaid or low paid although employees are usually entitled to social security contribution credits and related social protection benefits

The key issues to address for the chemical industry are:

- Low take up of parental leave, particularly amongst fathers, most likely because it is unpaid.
- There are no provisions for employees to take leave for a sick child. (Provisions only exist for those with seriously ill children in hospital or in need to constant care at home).
- The shortage of childcare facilities for children, particularly under three and the affordability of facilities as well as the part-time opening hours
- The affordability of eldercare facilities, which puts pressure on women to reduce their hours to take on more informal care.

3.8 SWEDEN

Table 3.8 summarises the statutory maternity, paternity and parental leave provisions, other working-time reconciliation measures and the child- and eldercare provisions available in Sweden. It also presents the coverage rates for formal child and elder care services.

3.8.1 Maternity leave provisions

Mothers are entitled to fourteen weeks of maternity leave paid at 80 per cent of earnings up to a ceiling of SEK387,000 (€43,070) per year (OECD, 2012). Up to seven weeks can be taken before childbirth but it is mandatory for women to take at least two weeks of leave either before or after the birth. Part of the paid parental leave benefit (see section 3.8.3) can be taken during this period of leave.

Pregnant women are permitted to take an indefinite period of leave paid at 80 per cent of earnings if their job is a risk to the foetus and no other work can be made available. If a job is physically demanding and therefore difficult for a pregnant woman to perform, she is eligible to take up to 50 days of leave during the last 60 days of pregnancy paid at 80 per cent of income.

In 2010, 20 per cent of pregnant women took pre-birth leave for an average of 39 days (Duvander and Haas, 2013).

3.8.2 Paternity leave provisions

All employed fathers are entitled to ten days of leave in connection with the child's birth regardless of their length of service. This entitlement is framed in gender neutral terms so that any 'second parent' can take this up. The leave can be used at any time during the first sixty days after childbirth and is intended to allow the second parent to attend the delivery, care for other children whilst the mother is in hospital, stay over in the hospital in a family room after childbirth and/or participate in childcare when the mother returns home.

Leave is paid at 80 per cent of earnings[18], up to a ceiling of SEK333,700 (€39,277) per year, by the Swedish Social Insurance Agency (SSIA) so parents

TABLE 3.8 | Leave provisions and coverage rates for child and elder care services in Sweden

PROVISION	DETAIL
Maternity leave	14 weeks in total (+ 50 days for physical jobs). 2 weeks are mandatory. Mothers can opt to take part of the parental leave benefit during this time. Paid at 80% of earnings up to a ceiling of SEK387,000 (€43,070) a year
Paternity leave	10 days to be used during first 60 days and simulteneously with the mother. Leave is paid at 80% of salary up to a ceiling of SEK387,000 (€43,070) per year.
Parental leave	480 days to be shared between parents with 60 days reserved for each parent. Leave can be taken up to the child's eighth birthday. Leave is paid at 80% of salary up to a ceiling of SEK440,000 (€49,305) per year.
Other working-time reconciliation provisions	An allowance of up to SEK3,000 (€350) per month for parents with a child aged 1-3 years who do not use publicly-funded childcare.
	A temporary parental benefit of 120 days of paid leave per year for parents who stay at home to take care of a sick child, paid at 80% of salary, up to a ceiling of SEK333,700 (€39,277) per year.
	A care allowance for parents of children aged 0-19 who are sick or disabled for more than six months. The maximum payment is SEK111,250 (€12,966). The right to reduce normal working time by up to 25% until a child reaches the age of eight.
Part-time formal childcare[a]	19% (aged 0-3); 31% (aged 3+) [b]
Full-time formal childcare[c]	32% (aged 0-3); 64% (aged 3+) [b]
Availability of eldercare services[d]	Home care: 9.4% (male: 6.8%; female: 11.5%)
	Residential care: 5.8% (male: 3.9%; female: 7.2%)

a Part-time (i.e. 1-29 hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
b Age 3+ = from age 3 to compulsory school age (usually 5 or 6 years old) (source: Eurostat, 2011).
c Full-time (i.e. 30+ hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
d Defined as the share of beneficiaries of long-term care provisions in the population of elderly people (aged over 65 years old). Residential care is typified by nursing homes and old-age homes, home care includes home help, personal care and nursing care at home, and semi-residential services are typified by day care centres and respite care facilities (source: Bettio and Verashchagina, 2012).

must be registered with the SSIA to receive this benefit. Employers and the self-employed make contributions towards this: employers pay 31.4 per cent on all employees' earnings, of which 2.2 per cent is earmarked for 'parental insurance'. The government meets any shortfall.

For all children born in 2011, 75 per cent of fathers, same-sex partners or other designated person took this leave. There are no figures on the proportion of eligible fathers using this leave (Duvander and Haas, 2013).

3.8.3 Parental leave provisions

Each parent is entitled to take leave from work until their child is 18 months old. Parents have considerable timing flexibility as they may take their leave either full- or part-time, simultaneously or sequentially, and continuously or in up to three blocks of time per year.

The first 480 calendar days taken by a family are paid; if they have not taken all 480 of these days before their child is 18 months old, they may continue to take them until the child's eighth

18 Although a special formula reduces earnings by 3 per cent before calculating the 80 per cent payment so fathers are effectively entitled to 77.6 per cent of earnings.

birthday or until the end of the child's first year of school (whichever is sooner), but parents may not take more than those 480 calendar days (Ray, 2008). In two-parent households, sixty days are reserved for each parent and cannot be transferred (often called 'mammamånader' or a 'mother's quota'; and 'pappamånader' or a 'father's quota,'). Out of the remaining 360 days, half are reserved for each parent; if days are transferred from one parent to another, the parent giving up his or her days must sign a consent form.

For eligible parents, 390 days of leave are paid at 80 per cent of earnings up to an earnings ceiling of SEK445,000 (€51,864) per year; the remaining 90 days are paid as a flat-rate payment of SEK180 (€21) a day. Non-eligible parents receive SEK225 (€26) a day for 480 days (Duvander and Haas, 2013).
All parents are entitled to paid Parental leave, but for leave to be paid at 80 per cent of earnings, parents must have had an income of over SEK225 (€26) a day for 240 days before the expected date of delivery or adoption. A parent remains qualified to the same level of Parental leave if an additional child is born or adopted within 30 months of the birth. This is mainly beneficial to parents who reduce working hours (and income) after their first child because it keeps them at a higher benefit level.

Parental leave pay has been negotiated in collective bargaining agreements in the public sector and is commonplace in the private sector. A common collective agreement is that the employer pays 10 per cent extra under the ceiling (i.e. workers receive 90 per cent of earnings) and up to 90 per cent above the ceiling (Duvander and Haas, 2013). Indeed, for many parents, state-legislated benefits are complemented by extra benefits from the employer on the basis of collective agreements (Duvander and Johansson, 2012).

A 'Gender Equality Bonus' (jämställdhetsbonus) was also introduced in 2008 and offers an economic incentive for families to divide Parental leave more equally between the mother and father. Both parents receive 50 SEK (€6) each per day for every day they use the leave equally. The bonus applies to the 390 days of earnings-related leave after the two reserved months are used by each parent (i.e. 270 days). When parents share the leave equally the bonus is worth a maximum of SEK 13,500 (€1,573) (Duvander and Haas, 2013). In 2012, the Gender Equality Bonus was received for 151,138 children. In these cases both parents had used more than their 60 reserved days; this represents 56 per cent of parents eligible for the bonus, up slightly from 54 per cent in 2011. On average, women received SEK 3,600 (€420) compared to SEK 4,800 (€559) for men (www.forsakringskassan.se).

After parental leave, parents are guaranteed the right to return to their previous position or a similar one, unless they have taken a full-time leave of absence of over 18 months. Fathers must then contribute to the insurance scheme for another 240 days before receiving benefits for their next child; mothers must do so as well, unless they become pregnant again before their previous child is 21 months old (Ray, 2008).

Almost all families use paid Parental leave in Sweden. Most parents take the main part of the leave before their child reaches the age of two. In 2011, the vast majority of women (93 per cent) and men (98 per cent) who took Parental leave were entitled to benefits at the earnings-related compensation level, rather than the low flat-rate level. For children born in 2001, parents used 92 per cent of the 360 days that are paid at a high earnings-related rate, and 69 per cent of the days that are paid at a low flat-rate level (Duvander and Haas, 2013).

The majority of fathers of children born in 2004 (88.3 per cent) took Parental leave at some stage before their child's eighth birthday, mainly starting when their children were 13 to 15 months of age. Fathers to children born in 2003 took on average 91 days of Parental leave during the eight years they could use the leave, and mothers took 342 days. In 2011, 44 per cent of Parental leave benefit recipients were men, compared to 56 per cent of women, although on average mothers took 95 days and fathers took 37 days. Thus, mothers still take up most of the Parental leave entitlement, although the proportion of total

days used by men has been gradually increasing. In 1987, fathers took about seven per cent of all Parental leave days used in that year but by 2011, this had increased to 24 per cent. This is most likely due to the introduction of the father's quota in 1995 (one month) and its extension in 2002 (to two months). The percentage of couples sharing Parental leave fairly equally (i.e. 40-60 per cent) is very slowly increasing, with 12 per cent of couples whose children were born in 2008 equally sharing leave in this way (Duvander and Haas, 2013).

Duvander and Haas (2013) report that fathers with a higher level of education are more likely to take a longer period parental leave as are fathers whose partners have a higher level of education and a higher income. They also report that fathers in the public sector are more likely to take leave, probably because they tend to get extra compensation as a result of collective agreements.

3.8.4 Other working-time reconciliation provisions

Approximately a third of municipalities provide a child-raising allowance (vårdnadsbidrag) to parents who have a child aged one to three years old who is not in publicly-funded childcare and have already used 250 days of Parental leave. The allowance is up to SEK3,000 (€350) per month but cannot be used simultaneously with Parental leave and is conditional on the other adult in the household (not necessarily the other parent) working or studying. It is intended to be used after the parental leave period to enable parents to extend their time at home and delay the start of day-care. No previous work requirements are needed to qualify for the benefit, but it cannot be combined with other social transfers, such as unemployment or social assistance benefits for either of the parents (Duvander and Haas, 2013; Ellingsaeter, 2012).

Although formulated in gender-neutral terms, it tends to support more traditional family patterns where the mother stays at home to care for the child on a full- or part-time basis (Duvander and Ferrarini, 2013). For example, Ellingsaeter (2012) reports 92 per cent of those applying for the allowance were women and it has been estimated that almost 50 per cent of the women who receive the benefit are economically dependent on their partners (Kessel and Vinge 2010 cited in Ellingsaeter, 2012). The likelihood of taking the benefit declines with increasing income and education and so the benefit has been associated with female labour market exits, long-term increase in poverty and marginalization of already marginalized groups, such as women with a low education.

Relatively few parents take advantage of this benefit however. A study of 96 municipalities who introduced the allowance in 2009 found that parents received this allowance for 6,694 children in 2011, accounting for 1.9 per cent of all children aged one to three years old in these municipalities. Nearly all (92 per cent) of the parents applying for the allowance were women.

The Swedish parental insurance also includes a temporary parental benefit (tillfällig föräldrapenning), which is a family entitlement of 120 days of paid leave per year. This benefit is given to parents who stay at home to take care of a sick child up to 12 years old. This is paid at 80 per cent of earnings, up to a ceiling of SEK333,700 (€39,277) per year. This is most often used by mothers, who took 64 per cent of all days taken in 2011 (Nyberg, 2013).

Parents whose children are sick or functionally disabled for more than six months can elect to receive a care allowance (vårdbidrag) from the birth of the child until s/he reaches the 19 years old. The maximum amount that can be received per year is SEK111,250 (€12,966).

Until a child reaches the age of eight years or completes the first grade of school parents have the right to reduce their normal working time by up to 25 per cent; there is no payment for working reduced hours (Ray, 2008).

3.8.5 Childcare services

Sweden has one of the most generous Early Childhood Education and Care (ECEC) systems in the world, providing high-quality early years services to

all children at a low cost to parents. From the age of one up to school entry age (seven years old), children are entitled to an ECEC place on a full-time basis if their parents are employed, or a part-time basis if their parents are not employed, in centres or at licensed family day carers (Duvander and Haas, 2013). This means there is no 'care gap' between the end of the parental leave period and an ECEC entitlement. Moreover, public childcare is available across the whole of Sweden, which means the number of places available for pre-school children aged between two and six years old and for school-age children aged between seven and nine years old more or less corresponds with demand (Plantenga and Remery, 2009).

The main type of ECEC is the preschool (förskola). This is an 'age integrated' centre offering all-year and full-day provision for all children aged between one and six (with a separate preschool class for six year olds). The 'open preschool' (öppna förskolan) offers part-time playgroup activities to children mostly under three years old, accompanied by their parents/carers. They are intended for use by parents caring for children at home and for family day care providers (Naumann et al 2013; OECD, 2006). Family day care homes (familjedaghem) also offer full-time care for pre-school children (OECD, 2006). This is where a childminder can be hired for an all-year round full-day provision, usually for a small number of children in the carer's home. Since 2009 family day care has been renamed to 'pedagogical care' (pedagogisk verksamhet) to indicate and encourage a wider diversity of forms of pedagogical and care activities than the traditional family day care (Naumann et al 2013).

All three to five year olds are entitled to at least 525 hours of pre-school a year, free of charge. This entitlement is fully integrated into the full-time preschool centres and most children attend full-time. Nearly all six year olds (99 per cent) attend a (separate) preschool class (förskoleklass) before starting school at the age of seven (also available for 525 hours per year and free of charge), which is usually located in a school. Although the preschool class is not compulsory, it is considered to be part of the public school system and is meant to facilitate the transition towards primary school. The large majority of six year olds (84 per cent) top up this free part-time service with afterschool care (fritidshem), which is strongly state subsidised. Most after-school care is provided within the school (Naumann et al, 2013).

According to 2012 data from the Swedish National Agency for Education, 84 per cent of all children aged one to five were in publicly-financed day-care, ranging from 49 per cent[19] of one-year-olds to 95 per cent of five-year-olds (cited in Duvander and Haas, 2013). Around a third of children aged 0-3 and 64 per cent of children aged over three are in full-time provision according to 2011 EU-SILC data (Table 3.8).

From age seven, children attend compulsory comprehensive school followed by after school care. In 2011, 83 per cent of all children aged six to nine were enrolled in after-school care as were 17 per cent of all 10-12 year-olds (Swedish National Agency for Education (Skolverket), 2013).

Swedish ECEC is predominantly publicly funded with over 80 per cent of formal ECEC places provided by municipalities. In 2011, 7 per cent of the costs of a preschool place and 17 per cent of the costs of an after school care place were financed through parent fees with the remainder paid by the municipalities. Parent fees for preschools and after school care depend on income and the number of children in ECEC in the household. In addition, the maximum amount any parent pays is capped at a 'maximum fee', which is set annually and on a national level. Parents of children age one to five pay a maximum of 3 per cent of their household income, up to SEK 1,260 (€141) a month for the first child attending; 2 per cent for the second, up to SEK 840 (€94) and 1 per cent for the third child, up to SEK 420 (€47). For children age six to thirteen the maximum fee in after school care is SEK 840 (€94) for the first child, SEK

19 Note this is only slightly lower than EU-SILC data for 2011 (Table 3.8), which shows the proportion of children aged 0-3 in formal provision (full and part-time) was just over half (51 per cent).

420 (€47) for the second and SEK 420 (€47) for the third child (no fees for any subsequent child). In 2012, the monthly base income on which the maximum fee is constructed is SEK 42,000 (€4,715) (Naumann et al 2013).

Over half of all municipalities in Sweden offer childcare arrangements to parents who work nights (Plantenga and Remery 2009). However, in 2011, the Government announced that municipalities should further increase the supply of childcare during unsocial hours (i.e. evenings, nights and weekends) and a total of 108.5 million SEK (around €12.3 million) of funding has been allocated over 2013-2016. Since then, the number of municipalities supplying childcare at atypical times has increased, as has the number of children in such childcare. According to Nyberg (2013), around 4,550 children are in childcare in evenings, nights and weekends in Sweden.

3.8.6 Eldercare services

Out of all nine countries in this report, Sweden spends the most on long-term care (LTC) (OECD, 2011f). All elderly Swedish citizens who are in need of care have a statutory right to claim eldercare services from their municipality. Access is based on assessed need rather than an automatic entitlement. Public eldercare is almost completely financed by local municipal taxes (85 per cent of total LTC) and grants from the national government (11-12 per cent of total LTC). Recipients only pay 5 per cent towards the total cost of their care (OECD 2011f, Ulmanen, 2012).

There are two main types of public eldercare: home and residential care. In 2011, home-help staff assisted around 211,000 people aged 65 or over (Sweden.se, 2013). The most common services provide help for tasks such as shopping, laundry, cleaning, personal care, meals and emergency alarms (Government Offices of Sweden, 2012). Almost half of the country's municipalities also provide communal meals for the elderly at special day centers, while a few organise small groups of elderly people into teams that cook their own meals. Municipalities are increasingly choosing to privatise parts of their elderly care although all recipients can choose whether they want their home help or special housing to be provided by public or private operators, and the municipality always has overall responsibility for areas such as funding and allocating home help or a place in a special housing facility. In 2011, private care provided services for 18.6 per cent of all elderly people getting home help (Sweden.se, 2013).

The elderly and disabled also qualify for transportation services in taxis or specially adapted vehicles. This option is available to those who are unable to travel by regular public transport. In 2010, there were 11 million such journeys completed across the country, a national average of 34 per eligible person (Sweden.se, 2013).

Residential care is less common and only used if home care is not sufficient. Out of 1.7 million people aged 65+ years old in Sweden, most (approximately 93 per cent) live at home with or without home help services and more than 95,000 (5.6 per cent) live in special housing (Hellqvist and Lidbrink, 2010). Informal care by the family has increased, mainly among older people with fewer resources and this increase is largely in care provided by daughters. It has been estimated that 70 per cent of all care for frail, elderly people is provided by family, relatives and friends and approximately 30 per cent is provided by tax-funded care services (Sundstrom et al 2002 cited in Ulmanen, 2012).

The Swedish government recognizes the importance of informal caregivers and has made several benefits available to help these workers. The Care Leave Act of 1989 (revised in 1994 and 2010) entitles informal caregivers up to 100 days of paid leave from their work at 80% of their income to care for a family member who is terminally ill. State incentive grants have also been provided to municipalities to develop support for informal and family carers. Additional benefits include respite care (institutional, day care and in home respite) and group counselling services for caregivers. In some municipalities, informal caregivers are also entitled to an untaxed cash payment, or attendance allowance, which is given to the recipient of care to pay family members (OECD, 2011f). The attendance allowance is granted to those who need assistance for more than 20 hours a week

with basic needs such as washing, dressing, eating, communicating and mobility. The government sets a standard amount for attendance allowance every year. In 2013, the amount was SEK 275 (€30.63) per hour although recipients can apply for a higher amount (up to SEK 308 (€34.31) per hour) under special circumstances (e.g. paying for a specially trained carer)(Försäkringskassan, 2013).

3.8.7 Summary

The Swedish system is characterized by:

- Short maternity and paternity leave provisions with relatively high replacement rates and high take up rates.
- A generous parental leave system with each parent entitled to a long period of leave that can be taken up until the child is eight years old. The replacement rate is fairly high for part of this period. Two months are reserved for each parent so take up rates are very high amongst both mothers and fathers although most do not use the whole entitlement.
- The childcare system is one of the most generous in the world providing high-quality early years services to all children at a low cost to parents. From the age of one up to school entry age (seven years old), children are entitled to an ECEC place, available on either a full-time basis if their parents are employed, or a part-time basis if their parents are not employed. All three to five year olds are entitled to at least 525 hours of pre-school a year, free of charge. Almost all six year olds attend preschool before starting school at the age of seven. There are also cash-for-care benefits from some municipalities to enable parents to spend more time with their children and support flexibility in their reconciliation of employment and care. The government has also announced it is investing more money in expanding after-school and wraparound care.
- The eldercare system is extensive with all elderly people entitled to publicly funded care with any fees capped at 5 per cent of the total cost. However, the government places a strong emphasis on informal, home care with the majority of women shouldering the most responsibility for this.

Other reconciliation working-time adjustments include:

- A moderate child-raising allowance that some municipalities provide of up to SEK3,000 (€350) per month for parents with a child aged one to three years who do not use publicly-funded childcare services and who have already used 250 days of Parental leave.
- A temporary parental benefit providing families with 120 days of paid leave per year for a parents to stay at home to take care of a sick child up to 12 years old.
- A small care allowance for parents whose children are sick or functionally disabled for more than six months, available from the birth of the child until the child reaches the age of 19 years.
- The right to reduce normal working time by up to 25 per cent up until the age of eight years old.

The key issues to address for the chemical industry are:

- Utilizing the full parental leave entitlement means parents are spending a considerable period out of the labour market, which can lead to a depreciation of skills, loss of earnings and can limit career progression.
- Fathers are less likely to take parental leave when they work in the private sector.
- The long-term care system emphases the importance of informal care, which will have a disproportionate impact on women given they are more likely to be informal carers.

3.9 UNITED KINGDOM

Table 3.9 summarises the statutory maternity, paternity and parental leave provisions, other working-time reconciliation measures and the child- and eldercare provisions available in the United Kingdom. It also presents the coverage rates for formal child and elder care services.

3.9.1 Maternity leave provisions

All employed mothers are entitled to a year of statutory maternity leave made up of 26 weeks paid Ordinary Maternity Leave (OML) and 26 weeks of Additional Maternity Leave (AML). Mothers can choose to start leave at any point from eleven weeks

TABLE 3.9 | Leave provisions and coverage rates for child and elder care services in the United Kingdom

PROVISION	DETAIL
Maternity leave	52 weeks leave paid at 90% of salary for 6 weeks; followed by 33 weeks supported by a flate rate payment of £136.78 or 90% of average weekly earnings if that is lower . The remaining 13 weeks are unpaid.
Paternity leave	2 weeks to be taken by blocks of 1 week within 8 weeks of birth. Leave is paid at a flate rate of £136.78 (€160.53) or 90% of earnings if that is lower.
Parental leave	Up to 18 weeks per child to be taken up to the child's fifth birthday. Leave is unpaid.
Other working-time reconciliation provisions	Employees who have children aged 17 and under, a disabled child under 18 years or those who care for a spouse, partner, civil partner, relative or other adult have the right to request reduced or flexible hours. This will be extended to all employees in 2014.
Part-time formal childcare[a]	30% (aged 0-3); 66% (aged 3+) [b]
Full-time formal childcare[c]	5% (aged 0-3); 27% (aged 3+) [b]
Availability of eldercare services[d]	Home care: 6.9% Residential care: 4.2%

a Part-time (i.e. 1-29 hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
b Age 3+ = from age 3 to compulsory school age (usually 5 or 6 years old) (source: Eurostat, 2011).
c Full-time (i.e. 30+ hours per week) formal childcare by age group and duration – % over the population of each age group, 2011 (source: EU-SILC).
d Defined as the share of beneficiaries of long-term care provisions in the population of elderly people (aged over 65 years old). Residential care is typified by nursing homes and old-age homes, home care includes home help, personal care and nursing care at home, and semi-residential services are typified by day care centres and respite care facilities (source: Bettio and Verashchagina, 2012).

before the expected week of childbirth, and can return to employment from two weeks after childbirth (or four weeks, if they work in a factory).

Some mothers are entitled to Statutory Maternity Pay (SMP) for 39 weeks where the first 6 weeks are paid at 90% of average earnings with no ceiling (before tax), and the next 33 weeks are paid at £136.78 (€163.73) or 90% of average weekly earnings, whichever is the lowest. To qualify, mothers must have worked for their employer continuously for 26 weeks up to the 15th week before the expected week of childbirth and earn, on average, £109 (€130.58) a week. SMP is paid by the employer and refunded by public authorities. All paid maternity leave is treated as pensionable service, any unpaid leave is not. Mothers who are not eligible for SMP because they have recently left work, changed jobs, or are self-employed may be eligible for a Maternity Allowance (MA), which is also paid for 39 weeks at the flat rate of £136.78 (€160) or 90 per cent of average gross weekly earnings, whichever is the lowest. To qualify, they must have worked for 26 weeks out of the 66 preceding the expected week of childbirth and have earned at least £30 (€35.94) a week on 13 of these weeks. Up to ten 'Keep In Touch' days can be worked during the period of statutory maternity leave without it affecting Maternity leave or pay.

Take-up of maternity leave is fully used by mothers who are eligible although most women return to work before the end of the unpaid AML entitlement. According to the 2009/10 Maternity and Paternity Rights and Women Returners Survey[20], the mean length of Maternity leave taken by women was 39

20 Just over 2,000 face-to-face interviews were conducted with mothers whose children were aged between 12 and 18 months in autumn 2009 and who had worked at some point in the 12 months before the baby's birth and over 1,200 interviews were carried out with fathers in 2009 and 2010.

weeks. The remaining period of unpaid leave (i.e. weeks 40 to 52) is less popular amongst mothers with just under half (45 per cent) making use of this. Thus, the duration of maternity pay and the length of maternity leave that is taken are positively associated, particularly for economically disadvantaged women. Those taking the shortest 'paid' leaves (up to 39 weeks of Maternity Leave) are low-earners, part-time workers and the self-employed while those taking the longest periods of leave are high earners and those in full-time employment (O'Brien, Kowalski and Daly, 2013). Other research shows that mothers who have their pay or leave enhanced by their employer tend to take longer periods of leave (Hudson et al 2004). Thus any element of maternity leave that is unpaid is generally under-utilised by mothers due to the financial constraints in households (Fagan et al 2005). Mothers tend to return to work part-time following a period of maternity leave due to a combination of individual preferences and constraints on working time options.

3.9.2 Paternity leave provisions

Fathers are entitled to two consecutive weeks of statutory, paid Ordinary Paternity Leave (OPL), which is also treated as pensionable service. This is paid at a flate rate £136.78 (€163.73) or 90% of average weekly earnings if that is less. It cannot start until the baby is born, and must finish within 56 days of the baby's birth or within eight weeks of the due date if the baby is born prematurely. In 2011, Additional Paternity Leave (APL) was introduced where fathers are entitled to take a further 26 weeks of leave and 19 weeks of pay – at £136.78 (€163.73) per week or 90% of gross average weekly earnings, whichever is lowest – provided his partner has ended her maternity leave no earlier than 20 weeks after the birth of the baby. All employees are eligible for OPL and APL provided they are the biological father of the child or the mother's husband, partner or civil partner; they expect to have responsibility for the child's upbringing; they have worked continuously for their employer for 26 weeks ending with the fifteenth week before the baby is due, remain employed at the time of the child's birth and earn on average £109 (€130.58) a week. APL is to be replaced by a system of shared, flexible parental leave from 2015 (see section 3.9.3).

According to the 2009-10 Maternity and Paternity Rights and Women Returners Survey, 91 per cent of fathers took time off around the time of their baby's birth but out of those taking time off, only 49 per cent took statutory Paternity leave.[21] Take up of APL is very low with only 1 in 172 fathers (0.6%) taking up this entitlement in 2011-12 according to a report by the Trades Union Congress (13 June 2013). This is most likely because APL is low paid and fathers cannot afford to take time off work. Despite this, the government has recently legislated to impose a 1% cap on any rises to paternity pay for the next three years, which is likely to further discourage men from taking up longer periods of paternity leave.

Evidence shows that when paternity leave is taken up, it enhances fathers' involvement at home over the longer-term. For example, a 2008 survey of 2,261 fathers in Britain found that just over half (56 per cent) who took paternity leave when their last child was born said it allowed them to take a greater role in their care of their children while 69 per cent said it led to improvements in family life overall.

3.9.3 Parental leave provisions

Both parents have the right to up to 18 weeks', unpaid parental leave for each child up to their fifth birthday (or eighteenth if the child is disabled) provided they are employees who have completed one year's continuous employment with their present employer and who have, or expect to have, parental responsibility for a child. Leave may be taken in blocks or in multiples of one week up to and for no more than four weeks per year unless the employer agrees otherwise.

The Children and Families Bill was published on 5 February 2013, which sets out the government's plans to introduce flexible, shared parental leave

21 25 per cent statutory leave plus other paid leave, 18 per cent other paid leave only and 5 per cent unpaid leave (Chanfreau et al 2011).

(SPL) and statutory parental pay from 2015, which will replace the current system of APL described earlier (section 3.9.2). The SPL scheme will allow mothers to commit to end their maternity leave and pay at a future date, and share the untaken balance of leave and pay as shared parental leave with their partner. This means that after the first two weeks of Maternity leave, the mother will be able to transfer Maternity leave to her partner (husband, biological father, civil partner) so parents can effectively share 50 weeks of leave and 37 weeks of pay originally available to the mother. Unlike the current system of APL, leave can be taken more flexibly (in a minimum of) one-week blocks interspersed with periods of work, and parents can take leave at the same time.

Statutory Shared Parental Pay will be available for eligible employees meeting prescribed qualifying requirements, although income replacement levels would not be any greater than the current Maternity Leave provision. That is, partners taking Statutory Shared Parental Pay will be paid at the lesser of 90 per cent of earnings or the flat rate of £136.78 (€160). The remaining 13 weeks of the first year would be unpaid. In order to qualify for Shared parental leave, an individual will need to meet a length of service qualifying criterion (likely to be 26 weeks service with the same employer by the 15th week before the Expected Week of Childbirth), have a partner who meets an economic activity test (have worked for 26 weeks out of the 66 weeks before the EWC and have earned at least £30 per week for 13 of these weeks) and be working for the same employer when they want to take leave. These tests replicate existing ones (for paternity leave and maternity allowance) and the government expects them to be well-understood. Permission is not required from employers. If an employee meets the continuous employment test and the other parent or partner meets an economic activity test, the employee is entitled to SPL (O'Brien, Kowalski and Daly, 2013).

Take-up of parental leave is very low, particularly amongst fathers because they have to sacrifice their pay. The fourth Work-Life Balance Employee survey 2011 showed that only 11% of employees had taken up parental leave (out of 579 employees who were parents with dependent children aged under six years old) (Tipping, Chanfreau and Tait, 2012). Although the impending changes to the parental leave system are meant to help mothers maintain a stronger attachment to the labour market, and encourage fathers to take a greater role in their child's upbringing, the impact is likely to be limited given leave schemes are often taken by the mother when they are gender neutral and have family-based allocations that can be shared by either parent. The TUC (13 June 2013) have recently estimated only 2-8% of fathers will use the new SPL scheme once it is in place.

3.9.4 Other working-time reconciliation measures

All employees are allowed time off for the emergency care of dependents but there is no set statutory period. If, for example, a child falls ill, employees are usually permitted to take time off to go to the doctor and make care arrangements. However, if the employee needs to look after the child for a longer period, they may be required to take annual or parental leave.

The Right to Request flexible or reduced hours, first introduced in 2003[22], has been put in place to help employees who have children aged 17 and under, a disabled child under 18 years or those who care for a spouse, partner, civil partner, relative or other adult living with them to negotiate better working conditions in low paying sectors. Employees need to have worked for their employer continuously for 26 weeks in order to be eligible. Employers have a legal duty to consider these requests and may refuse them only where there is a clear business ground for doing so. The government recently legislated to extend the right to all employees from 2014.

The 2011 Fourth Work-life Balance Employee Survey shows that flexitime[23], working from home and part-time working are forms of flexible working most

22 The right to request flexible working was first introduced in April 2003 for employed parents of children under 5 or under 18 if the child is disabled. This was extended to carers of some adults in April 2007 and in April 2009 for parents of children under 17.
23 Working a set number of hours with the starting and finishing times chosen within agreed limits by the employee.

commonly taken up by employees (taken up by 49 per cent, 44 per cent and 40 per cent of those where it was available to them, respectively (Tipping, Chanfraeu, Perry and Tait, 2012). However, flexible working continues to be primarily taken up by women, particularly mothers – largely in the form of part-time work. In the UK, part-time employment tends to be poorly paid, lower skilled and with less opportunity for progression so this trajectory perpetuates occupational segregation. Indeed, the 2008 Labour Force survey shows a third of mothers compared to just under a fifth of fathers (18 per cent) used some sort of flexible working arrangement (Rake 2009). Although men are starting to make more use of flexible work, they are more likely to seek options which do not reduce earnings such as flexitime and occasional working from home (Fagan et al 2006).

Flexible working practice is difficult to separate from socially embedded beliefs associated with the roles that fathers and mothers are expected to play (Lewis et al 2007). Although policy developments in the right to request flexible working refers to 'parents' and are presented as gender neutral, they were initially conceived to support mothers and their labour market participation. Thus flexible working hours have become associated with the 'mummy track' with part-time work created explicitly to recruit or retain women (Fagan et al 2006). This means that flexible working schemes which leave too much to individual negotiations between the employee and employer are particularly difficult for men to take-up in a culture where these schemes are seen as mainly for women (Smithson et al 2004; The Guardian, 17th January 2011b). This is illustrated by evidence, which shows men are more likely to have their requests for flexible work rejected by their employer (14% of men compared to 10% of women in 2006) (Fagan et al 2006).

Finally, it is worth noting that although the right to request is in place to support work-family reconciliation, the efficacy of it is limited by the fact that many low paid employees are non-unionised, particularly in the private sector, and so do not have the support of collective bargaining.

3.9.5 Childcare services

Since the launch of the National Childcare Strategy (NCS) in 1998, several government initiatives have sought to increase the availability and affordability of childcare and early education services for all parents. This has mainly been achieved through an expansion of a variety of forms of pre-school and out-of-school childcare.

One of the main provisions to have expanded under the NCS is the free, part-time early years entitlement. All three and four year olds are now entitled to 15 hours of free, early years education for 33 weeks per year during the school term. Nearly all eligible children (98 per cent) take up their place (Daycare Trust 2006). This provisions was extended to 20% of the most disadvantaged two years old in September 2013, and there are plans to extend this to 40% of two years olds by September 2014.

There has also been some expansion of nursery and day-care centres which typically take children from the age of six months (sometimes earlier) until mandatory school age (five years old). The cost for privately purchased childcare is largely borne by private households. Childcare is very expensive in the UK. OECD data for 2012 shows that the cost of childcare accounts for 40.8 per cent of the average wage (The Guardian, 21 May 2012).

There are childcare tax credits and benefits for low-income employed families and some other state support targeted at low income/disadvantaged families. This includes the 'Sure Start' children centres – which provide services for children up to 14 years of age (16 years for those with disabilities and special education needs) – and municipal nurseries, which are financed from general taxation and offer subsidised places targeted at social services 'at risk' families, low-income families and municipal employees. The main out-of-school care facilities for school age children are childminders along with breakfast, after-school and holiday clubs, mainly run by third sector organisations or private companies.

The cost of out-of-school care is, however, expensive in the UK. The childcare Costs Survey 2012 shows that

childcare prices are rising significantly above the rate of inflation in England. Costs for after-school clubs, nursery and childminder places for the over-twos rose by more than 5 per cent over the last 12 months. A nursery place for a child under-2 rose by 5.2 per cent in England in the last year, with no region seeing a fall in price. This is particularly difficult for lone parents, most of whom are mothers who spend more of their household income on childcare compared to couples (Daycare Trust and Family and Parenting Institute, 2013). Thus, the cost of childcare reduces the benefit of the second earner working more hours.

There is also a mismatch between supply and demand with sizeable vacancies in daycare, out-of-school and childminder places in some areas. Yet this coexists with a large proportion of parents reporting shortages (Daycare Trust 2006). Moreover, childcare services are often not flexible enough to meet parent's working hours despite the increase in flexible working, which although positive, has not been matched by an increase in flexible childcare. Some organisations have therefore urged the government to take a more comprehensive approach to invest in more holiday and wraparound childcare so that quality and affordable childcare is available for all (BBC News, 9 February 2011).

3.9.6 Eldercare services

Three types of formal eldercare services exist in the UK:

1) Domiciliary care ('homecare') encompasses a range of support services to help people live as independently as possible in their homes when they are constrained due to poor health, disabilities or age-related frailties;

2) Non-residential care ('day care') provides a range of care services for people with different levels of disability;

3) Residential care caters for those with moderate through to the most severe levels of disability and can provide full-time nursing care to support elderly people or those with a specific disability or medical requirement. Care homes and nursing homes are the most common forms of residential care but other forms include sheltered and retirement housing for retired people (typically 65+ years) provided by housing associations and local authorities, and extra-care housing (self-contained accommodation with centrally provided personal care available for very frail or disabled people).

The state is the main funder of formal elder care services. Local authorities are responsible for providing home care services and their budget is allocated by central government and financed from general taxation. Care assessments are carried out to determine whether the individual's need is: 'Critical', 'Substantial', 'Moderate' or 'Low'. Local authorities can decide not to fund the lower levels of need, depending on the council's available budget. The result is that only a small number of local authorities fund care for those assessed as having a 'low' need for care and when budgets are stretched, the needs thresholds for other categories become more difficult to cross (Urwin and Rubery 2006). The Care Quality Commission reported 70% of councils as not providing publicly funded domiciliary care if the elder person was assessed as having 'Moderate' or 'Low' need (Collinson 2010). Following this, a financial assessment or 'means test' determines how much the elder person should pay for their 'care package'.

The thresholds for assessing capital for assistance with the costs of residential care fall into three bands. When the value of an elderly person's savings, shareholdings and property – including the home they live in – exceeds the 'upper limit' (i.e. £23,250 (€27,716))[24], the local authority will not contribute to the costs of the residential care. Most homeowners cross this upper threshold and so the full fee is charged to the elderly person. If an elderly person's capital assets are less than the lower limit (below

24 This amount varies for the different countries of the UK: it is £23,250 for Wales and Northern Ireland but £24,750 for Scotland.

£14,250 (€16,987)), the local authority will pay the full costs of care. If the value of their capital assets falls between the lower and upper thresholds (i.e. £14,250-23,250), the local authority will pay part of the costs. The same thresholds apply for domiciliary care, but with the important difference that an elderly person's home is not included in their capital assets (Urwin and Rubery 2006). Estimates cited in Urwin and Rubery (2006) indicate that the local authorities make a contribution to most of the domiciliary and residential care received: over 80% of home care hours are funded through local authorities (McClimont and Grove 2004: 32) and only one third of residents in care homes in England are entirely self-funded (CSCI 2005: 85).

Residential care is very expensive in the UK. In 2011-12, the average annual care home free varied from £24,076 in Yorkshire and Humber to £31,096 in London although some care homes charge considerably more (Laing & Buisson, 2011). This means that the proportion of elderly people in residential care is low. According to OECD data, 4.2% of the UK population aged over 65 years old were in residential care in 2004. The same data showed a slightly higher proportion of those aged 65+ received homecare (6.9%) (cited in Bettio and Verashchagina, 2012).

The main source of assistance for elders and other adults who need assistance with personal care and independent living is informal care provided by family members, and less commonly, by neighbours and friends. The 2001 census recorded that 10% of the adult population (11% of women and 9% of men) were informal carers for sick, disabled or elderly people, and the incidence has increased since then with the ageing of the population. One-third of all carers spend at least twenty hours a week on this activity (Fagan and Nixon 2000). The majority of informal carers are women and they are, on average, aged 55 years old and almost half of them are children of the older person (Glendinning et al 2009). Overall one in seven employed persons juggle paid work with caring for an adult (Smedley, 2012). Among those who are carers, women are more likely to provide care on a daily basis, to provide intensive amounts of care, and to provide care which is of an intimate, personal and/or emotionally demanding nature (Dahlberg et al 2007, Glendinning et al 2009, Mooney et al 2002). The contribution men make to informal care is increasing, primarily when there is no female relative available to provide care, particularly among older men caring for their spouses. (Himmelweit and Land 2008).

The state provides some cash benefits to support informal care but informal carers bear hidden financial costs though reduced earnings and pension contributions (as well as the emotional and psychological pressures of caring for elderly relatives). People aged 65 years or over may claim Attendance Allowance if they need help with personal care for a period of at least six months due to moderate or severe level of disability (physical or mental). This is a tax free payment of between £51.85 and £77.45 per week depending on the severity of the disability. Carers' allowance is also available to informal carers if they are providing an extensive amount of care – at least 35 hours a week – for an elder person in receipt of Attendance Allowance, or a younger person with moderate or severe disability and in receipt of the disability allowance. The allowance can be combined with part-time study and/or modest earnings: the earnings threshold is £95 per week. The basic rate is £53.10 per week, which is equivalent to what someone would earn doing just over nine hours of work at adult minimum wage rates.

3.9.7 Summary

The UK system is characterized by:

- A long period of statutory maternity leave entitlement but after six weeks supported at 90% of salary the remainder is at a low flat rate payment or unpaid.
- A two week paternity leave period. A recent innovation permits fathers to take longer periods of 'additional paternity leave' if the mother forgoes part of her maternity leave. Take up rates are moderate for the two week period but very low for the 'additional paternity leave' option.
- Parental leave that is of moderate length but unpaid, which has led to low take rates. From 2015, shared parental leave will be introduced to

encourage fathers to take up a longer period of leave to care for their children however, take up is expected to be low given leave options that can be taken by either parent are usually taken up by the mother in practice.
- Shortfalls in the availability, affordability and flexibility of childcare. Although the government has committed to improve the availability and financing of childcare services, primarily for low income families, shortfalls remain in availability, quality and affordability.
- Several types of formal eldercare services that are expensive with most homeowners' capital falling above the threshold which entitles them to full or partial state support. Thus informal care by family is the main form of eldercare used, which has a disproportionate impact on women's work-family reconciliation given they are more likely to be informal carers.

Other reconciliation working-time adjustments include:
- The Right to Request flexible or reduced hours to help parents reconcile work with family. This is to be extended to all employees from 2014.

The key issues to address for the chemical industry are:
- The low take up of parental leave amongst men and women, most likely due to it being unpaid;
- The shortage and affordability of childcare, particularly full-time provision, and the mismatch between supply and demand in some areas.
- The affordability of eldercare with the reliance on informal family care by women.

Summary and Conclusion

On average, women make up less than a third of employees in the European chemical industry in the EU-28, far lower than their presence in the workforce for the overall economy in each country. It is important to improve the representation and career progression of women in the European chemical industry to help offset the personnel and skill shortages which are forecast for the sector. By so doing the sector will contribute to meeting the European Union's policy objectives for employment and gender equality: the European 2020 strategic objective to get more women into employment and the gender equality strategic objectives to close gender gaps in employment, earnings and women's representation in leadership and decision-making.

Reconciliation measures which make it easier for employees to combine employment with caring for children and elders is an important part of the policy framework for raising women's integration into employment and improving their prospects for career progression. Care responsibilities continue to be undertaken primarily by women. When women have young children or elder parents to care for while contending with inadequate family leave

entitlements, rigid working-time schedules or shortfalls in childcare and eldercare services, this can drive women to quit their jobs or reduce their hours in order to meet their care responsibilities. Or they combine the demands of both spheres with negative effects on their well-being and health through heightened levels of stress, lack of sleep and recuperation and so forth. Men's care roles and work-family reconciliation also needs to be supported and encouraged to promote a more gender equitable sharing of care responsibilities for this will also support women's employment and career progression and meet the desire of many men to be more actively involved in caring for their children and elder parents (Norman, Elliot and Fagan, 2013; Fagan and Norman, 2012; Dex 2003; La Valle et al 2002).

In this report we have reviewed and evaluated the statutory provisions and national policies for work-family reconciliation in nine EU countries, selected because together they account for more than 80 per cent of production in the European chemical industry and they encompass a range of different national policy approaches to the reconciliation of employment and care responsibilities.

The Nordic countries have the most developed and established reconciliation policies in the world, and this is reflected in our nine country study, with Sweden and Finland possessing the most comprehensive policies for reconciling work and family life. One notable difference between them is the rate of part-time working among employed women, which is above the EU-28 average in Sweden but is much lower in Finland. Both countries have a generous and flexible system of parental leave, which can be taken following a moderate period of maternity or paternity leave, and an extensive, publicly financed, universal childcare system with almost all children enrolled into full-time, formal childcare. There are also several in kind and/or cash benefits available to support elderly persons and families with the costs of eldercare, which together form part of a well-developed and universal support system. Their reconciliation policies support high female employment rates – among the highest in Europe – and this is also reflected in a higher presence of women within the chemical industry workforce than many other countries in this study. However, even in these countries women are under-represented in this sector, for only one third of those employed in the chemical industry are female. This suggests that additional gender equality interventions are needed to improve the recruitment and retention of women in this sector in Sweden and Finland. This may include additional sector-specific recruitment, retention and career progression measures as well as considering enhancing the existing national reconciliation measures.

The Czech Republic and France have the highest percentage of women among the workforce in their chemical industry (39.5 and 37.1 per cent respectively) but these rates are below the national economy average (43.2 and 47.7 per cent respectively). This is in the context of pronounced differences in their national reconciliation measures. In the Czech Republic there are no statutory work-time policies to enable those with care responsibilities to adapt their working time aside from statutory maternity and parental leave schemes. Parental leave is long but supported by only a low payment, which makes it unaffordable for many families, and is an obstacle to fathers' take-up in particular. There is a shortage of childcare facilities, especially for very young children, and of eldercare services. France has a fairly comprehensive system of childcare but there is a shortage of facilities for very young children under three years old while there is an increasing reliance on women's informal elderly care as government funding for eldercare services are being cut. The parental leave arrangements are unpaid. In France working-time legislation has led to full-time hours being shorter on average than in many other parts of Europe, which facilitates work-family reconciliation. However, the opportunities to work reduced hours below full-time arrangements are less developed in the private than the public sector (Fagnani and Letablier, 2006).

The proportion of women among the workforce in the chemical industry is much lower in the UK and Germany, against a backdrop of relatively high

female employment rates across their economies. It is common for employed women to work part-time in both countries. In both countries employees have statutory rights to adjust their working hours for care responsibilities. In the UK the statutory right to request flexible or reduced hours is currently being extended to all employees. In Germany, employees have a statutory right to make a permanent switch from full-time to part-time hours and in addition some collective agreements and contracts provide employees with a (non-statutory) provision to reduce work-time for a period of up to two years to care for a relative in Germany through Familienflegezeit. However the exercise of these rights may be difficult in jobs where full-time employment is the norm, and this may inhibit take-up in some parts of the chemical industry. In both countries there are shortfalls in the supply of childcare and eldercare services. Parental leave is unpaid in the UK and very low paid in Germany.

Italy, Spain and Belgium have the lowest representation of women in the workforce of the chemical industry, even lower than the relatively low representation of women among the employed population. The national reconciliation measures in Belgium are, however, fairly well-developed, and have much in common with the French system. There are opportunities to reduce work-time through the Time Credit System and there is a flexible system of parental leave albeit with a fairly low, flat rate payment. There is an extensive, publicly financed childcare system for children over three, but shortages in childcare for younger children, as well as a comprehensive support system for the elderly.

In contrast, Italy and Spain have long periods of parental leave that are very low paid and unpaid. Italy has the minimal provisions for fathers as they are only entitled to three days of paternity leave. There is a shortage of childcare places for young children under three years old so most are cared for on an informal basis while facilities for older children are mainly located in the private sector and are expensive. Publicly funding for eldercare is also limited in both countries leading to a heavy reliance on informal care.

We now review the main contours and gaps in the different elements of the statutory provision of reconciliation measures across the countries in this study and identify the key issues for the European Chemical industry to address.

4.1 MATERNITY LEAVE

Across the nine countries in this study the statutory maternity leave entitlement ranges from 14 weeks in Germany and Sweden to 52 weeks in the UK. Leave is supported by a high earnings-related replacement rate – at 100 per cent of salary – in Germany, France and Spain, in contrast to the very low salary replacement rate of 69 per cent offered in the Czech Republic while in the UK most of the leave period is at a flat rate payment or unpaid. Of the nine countries in our study, particular issues were identified for some countries in relation to maternity leave:

- In Belgium the maternity leave payment is lower in the private sector than the public sector.
- The very low earnings replacement rate for maternity leave in the Czech Republic and the UK.

4.2 PATERNITY LEAVE

There is no dedicated statutory paternity leave in Germany or the Czech Republic although mothers in the Czech Republic can transfer part of their maternity leave. In the other seven countries the statutory paternity leave provisions for fathers to take time off at the time of the birth ranges from three days or less in Italy, ten days in Belgium and Sweden and two weeks in the UK and France, all supported by a high earnings-related replacement rate with the exception of the UK, which is paid at a low flat rate or 90 per cent of average weekly earnings if that is less. Finland has the longest period of paternity leave reserved for the father at 54 days; however most fathers do not use the full entitlement, probably due to the loss of earnings incurred from the lower replacement rate equal to 70 per cent of salary. Of the nine countries in our study, particular issues were identified for some countries in relation to paternity leave:

- The absence of statutory paternity leave in the Czech Republic and Germany.
- The low earnings replacement rate for paternity leave in Finland and the UK, which has led to fathers only taking a small part of their entitlement.
- The very limited paternity leave provisions in Italy.

4.3 PARENTAL LEAVE

Parental leave systems provide parents with flexibility to extend their leave to provide a bridge between maternity/paternity leave and the use of childcare services. The ability of parents to make use of this leave is enhanced if it includes a payment which provides a reasonable earnings replacement rate, and if there are flexible provisions for when and how the leave is taken.

Sweden has the most generous, flexible parental leave system, supported by a substantial earnings replacement rate, which has led to high take up amongst both mothers and fathers. The opportunity to take a fairly generous period of well remunerated maternity and/or parental leave following the birth of a child is important for supporting a continuous employment profile for women with child and/or elder care responsibilities.

This contrasts with parental leave schemes offered in Belgium, the Czech Republic, France, Italy and Germany which are very low paid and the UK and Spain where leave is unpaid. Thus, parental leave is rarely taken up by men in all seven of these countries.

Relatively prompt labour market re-entry is crucial for maintaining wage levels and momentum within career trajectories (Oliver and Mätzke, 2012) so this should be limited to a maximum of a year. A longer, continuous period spent out of the labour market, which is possible in countries such as the Czech Republic, France and Germany is likely to lead to a depreciation of skills and qualifications, limit career progression and employment prospects, and in some cases be interpreted by employers as a 'signal' of a lower commitment to a career.

Supporting women's reconciliation by encouraging men to take up parental leave is important given parental leave has been associated with an increased involvement in domestic work and childcare; this potentially relieves some of the care burden from women (e.g. Tanaka and Woldfogel, 2007; O'Brien, 2009). Sweden is the only country in which there is a period of parental leave reserved specifically for the father on a 'use it or lose it' basis, which has resulted in some of the highest take up rates of parental leave amongst men in Europe. This has increased their participation in childcare – more so than in any other Western welfare state (Bergman and Hobson, 2002; Johansson and Klinth 2008). Having a targeted period of leave for fathers also underlines the importance of men's involvement in childcare, and promotes parental leave as an acceptable and important option for both parents to take. This contrasts with the very low take up of parental leave amongst men in Belgium and the Czech Republic where leave schemes are gender neutral, low paid and have family based allocations that can be taken by either parent.

Of the nine countries in our study, particular issues were identified for some countries in relation to parental leave:

- The low earnings replacement rate for parental leave in Belgium, the Czech Republic, Finland, France and Italy, which has led to low take up, particularly amongst fathers.
- Parental leave is unpaid in Spain and the UK, which has led to low take up, particularly amongst fathers.
- Utilizing the full parental leave entitlement in Sweden means parents are spending a considerable period out of the labour market, which can potentially lead to a depreciation of skills, loss of earnings and can limit career progression.

4.4 LEAVE TO CARE FOR A SICK CHILD OR OTHER RELATIVE

There is a statutory right to take leave for a sick child or relative in all nine countries except for the UK where employees only have the right to take

immediate time off to attend to an emergency, followed by annual or parental leave if they need to take a longer period.

The most generous provision is in Sweden where employees are entitled to 120 days of leave per year supported by a moderate earnings-related payment. Although Italy has unlimited leave available to care for a sick child, this is unpaid. In the other countries, the leave period to care for a sick child or relative ranges from four days in Finland, usually paid at 100 per cent of salary, to ten days in Belgium and the Czech Republic paid at a lower earnings-related replacement rate.

In Spain, employees are entitled to full or part-time leave paid at 100 per cent of salary but only for a child who is seriously ill in hospital or in need of continuous treatment at home. Employees can also take up to two years of leave to care for a seriously elderly dependent but this is only compensated by a very low monthly allowance. Belgium and France also have long leave provisions of between two and three years that are only for employees who have seriously ill relatives. Of the nine countries in our study, particular issues were identified for some countries in relation to leave to care for a sick child or relative:

- Leave to care for a sick child and/or other relative is unpaid in France and Italy.
- In Spain, there are no provisions for employees to take leave for a sick child. (Provisions only exist for those with seriously ill children in hospital or in need to constant care at home).

4.5 OTHER WORK-TIME ADJUSTMENTS FOR THOSE WITH CARE RESPONSIBILITIES

The right to work flexible and/or reduced hours is an important way of attracting and retaining women who have child and/or elder care responsibilities in the chemical industry. For example, the right to request flexible or reduce working hours in the UK and Italy, the Time Credit system in Belgium, and the right to reduce work-time to care for an elderly dependent in Germany are effective ways in to support employees with child and/or eldercare responsibilities. Opportunities to reduce employment hours are also available in Finland, Sweden and Spain. The Czech Republic is the only country with no flexible work-time provisions.

Research conducted in the UK finds that mothers are more likely to return to employment if their employer offers flexible and family-oriented employment practices (e.g. Callender 2000), while a representative 2005 survey of 2,504 mothers found that one of the main reasons for them to change jobs or employer following childbirth in a was in order to obtain part-time or more flexible work hours (Hudson et al 2004). Full-time employment is often difficult for those with care responsibilities, particularly in countries with a 'long work hours' culture such as in the UK where many full-timers regularly work long hours of 45+, 50+ and even 60+ per week (Fagan et al 2005). Thus, women typically move into part-time employment to reconcile employment with care responsibilities, however, the cost of this is high.

Firstly, part-time jobs are usually lower paid than full-time jobs as indicated by the gender pay gap. Therefore, episodes of part-time employment can have a long-term 'scarring effect' on earnings. That is, the longer a person is in part-time work, the lower their subsequent wages are likely to be, even if they later switch to full-time work (Francesconi and Gosling, 2005). Secondly, despite part-time work being available in most organizations, options are more limited in senior grades and positions.

Options for quality part-time work in high-level jobs in the chemical industry may be limited if the jobs are organised around a full-time norm and there is little experience or role models of part-time working in specialist or senior positions. A recent survey of over 276 employers from large, small and medium enterprises in the European chemical industry found that while a high proportion (73 per cent) offered flexible working (including annualised hours, part time working and job sharing), over a fifth (22 per cent) offered no such arrangements (TAEN, 2012).

This lack of flexible work-time arrangements in some chemical industry firms is likely to deter women from returning to their jobs if they have significant care responsibilities, or to limit their career progression.

It should be noted that measures to encourage men to adjust their work to accommodate care responsibilities has been largely absent from work-life balance policies across all nine countries. To date, policies have been largely oriented towards helping mothers adjust their working hours. The positive impact of this is that it helps to integrate women to combine employment with the care responsibilities of raising young children. However, the negative impact is that it reinforces the notion that it is predominantly the women's responsibility to adjust their working hours to meet care responsibilities. As already discussed, this gender division of labour has negative reverberations on gender inequalities in earnings and lifetime earnings. Thus, a more concerted effort is needed to make flexible work options available to, and used by, fathers. However, flexible working schemes that leave too much to individual negotiations between the employee and employer are particularly difficult for men to take-up in a culture where these schemes are seen as mainly for women (Smithson et al 2004). An example of this is in Italy where the opportunity to reduce hours of work for childcare is an option only open to women. Similarly the Time Credit System is a well-established reconciliation policy in Belgium but tends to be only be taken up by women.

There are several factors for low take up amongst men. Research in the UK shows that men are more likely to have their requests for flexible work rejected by their employer (Fagan et al 2006) while in many countries there continues to be a prevalent organizational culture that measures professional and company commitment in terms of full-time availability – typically for very long parts of the day and week. Qualitative case studies with professionals in the UK show that employees are often reluctant to make use of the policies available in their company because they are aware that by doing so they send a 'negative signal' to their managers (Lewis 1997, Smithson et al 2004).

Finally, while employees may be aware of the available statutory parental leave rights, they may be less aware of other work-time reconciliation measures. For example, the female employment rate remains the lowest in Italy, yet there is an array of working-time provisions to support reconciliation. In light of this, employers, and governments, have a key role to play in raising awareness of employees' rights.

Of the nine countries in our study, particular issues were identified for some countries in relation to other work-time adjustments for those with care responsibilities:

- The absence of flexible work-time options in the Czech Republic
- In Italy, fathers do not have the right to reduce work hours for a child under twelve months old
- Reconciliation support might be enhanced across the Chemical sector in most countries through opportunities for employees to reduce or adjust their work schedules. Here exemplars of innovative working time policies might be instructive; for example the implementation of employees to reduce or adjust their schedules, such as the 'right to request' (Germany, UK), the Time Credit system (Belgium) and other measures which enable employees to reduce their working hours, such as in Sweden for those with young children and for employees in the French public sector, offer examples

4.6 CHILDCARE SERVICES

Access to affordable and good quality childcare is important for supporting reconciliation and has an influence on women's decisions to return to employment after having children.

Problems emerge when there is a structural gap between the end of a parental leave entitlement and the entitlement to an ECEC place. In Sweden, all children are entitled to a full-time ECEC place from the age of one, which is the age at which the parental leave entitlement ends. This continuation of childcare helps to support a continuous employment profile for women. In contrast, Belgium, the Czech

Republic, Italy, France and Germany have a particular shortage of childcare facilities for very young children (aged under three years old), which encourages mothers to either stay at home for a longer period, or exit the labour market completely. There is also a particular shortage of after school facilities in Belgium and Finland. In the UK, a significant proportion of women are deterred from returning to work after pregnancy by childcare costs, which are the most expensive in Europe (Callender et al. 1997, La Valle et al, 1999), and the quality of staff and facilities has also been found to influence decisions of whether to use formal childcare (Comptroller and Auditor General, 2004). Most families use part-time formal provision in the UK as well as Germany with the implication that many women have no option but to move into part-time employment.

In connection to this is the influence of social attitudes. A proportion of mothers elect to exit employment, or work part-time, when their children are young because they believe this is the best way to care for their children. This is particularly evident in Italy where there is a prevalent expectation for the mother to stay at home to care for her children until they are at least aged two. This reflects a cultural notion that 'good mothering' is incompatible with using childcare services for pursing full-time employment (see Duncan 2006). This is in contrast to a longer cultural tradition in countries such as Sweden, Finland and France where childcare is more widely accepted as part of family life with positive developmental benefits for children. In many countries it is gradually becoming more acceptable for families to put young children into formal childcare – such as in the UK – however the notion of formal childcare services being seen as a positive part of family life rather than an unavoidable necessity depends very much on the quality of childcare that is available (Fagan et al 2005).

Of the nine countries in our study, particular issues were identified for some countries in relation to childcare services:

- In Belgium, the Czech Republic, France, Germany, Italy, Spain and the UK, there are shortages in childcare facilities for very young children aged under three.
- There is a shortage of flexible, after-school services in many countries; including some such as Belgium and Finland, where pre-school care is reasonably extensive.
- Childcare is expensive in the Czech Republic, Italy, Spain and the UK (aside from the free part-time and term-time only pre-school place in the UK).
- Most of the subsidized pre-school childcare is only provided part-time in Germany and the UK.

4.7 ELDERCARE SERVICES

Common to all nine countries is the heavy reliance on informal family care for elder relatives (or other adults in need of care). This burden continues to fall disproportionately on women who are expected to adapt or reduce work hours to reconcile care responsibilities.

The most developed system of public support for elderly care is found in Sweden and Finland. All citizens have access to publicly funded eldercare and there are several in kind and cash benefits to support informal carers who are recognised as an important form of support by the government. Support for eldercare is also extensive in Belgium with all citizens entitled to long-term care under the health insurance system, and several cash benefits to support the care of elderly people are available although most receive a mix of formal and informal care (provided mainly by female relatives) in their own homes. Support for informal elderly care is severely limited in the other countries particularly in Spain and France where informal care by family members is actively encouraged yet support policies for elderly care are minimal.

The right to work flexible and/or reduced hours exist in some countries such as the Belgium, Italy, Germany and the UK, which provides some support for employees to reconcile work with informal elderly care responsibilities (see section 4.5). Of the nine countries in our study, particular issues were identified for some countries in relation to eldercare services:

- The reliance on mainly women's informal care in all nine countries.
- The affordability of eldercare services is particularly problematic in Italy, Spain and the UK, and in the Czech Republic the shortages are particularly acute in some regions.

4.8 RECOMMENDATIONS

Measures taken by employers in the chemical industry to enhance statutory provisions may incur some operational costs such as enhanced maternity or parental leave payments, arranging cover for extended leave or reduced working hours, providing additional support for child or elder care services, However the 'business case' is that at least part of these costs are offset by other gains such as reduced labour turnover and hence savings on recruitment and training costs, retention of skilled workers, reduced absenteeism and other productivity gains through the enhanced morale and commitment of the workforce. (Plantenga and Remery, 2009; Fagan et al 2005; Messenger, 2004; Rubery et al, 2003). Indeed, firms report more positive effects arising from implementing flexible work patterns and associated reconciliation policies. In the UK for example, Woodland et al (2003) found that 49 per cent of employers who had implemented reconciliation policies found they had had a positive effect upon productivity. Moreover, personnel directors claimed that some of the organisational logistics with providing employees with more options for flexible work are lessened by information and training for line managers and the development of a modernised organisational culture.

We therefore suggest the following recommendations for consideration in relation to enhancing the reconciliation measures provided by firms in the European Chemical industry:

1. Enhance statutory maternity, paternity and parental leave systems so that employees who take parental leave (of up to a year) are financially supported and have a guarantee to return to the same or equivalent job.
2. Introduce specific encouragement for men to make use of leave and family-related working time adjustments, thus reforming the organizational culture and norms so that care is seen as a gender neutral joint rather than a female-only responsibility.
3. Opportunities to work reduced or more flexible work schedules (e.g. adjust start and finish times, working at home, job sharing, reduction in hours) should be extended and promoted to all employees.
4. Provide appropriate training and career support for employees returning after a period of parental leave.
5. Introduce training and information for line managers to help them to innovate and manage more flexible working arrangements. Consider setting targets for delivery on the implementation of certain policy reforms, such as male take-up of parental leave or working-time adjustments.
6. Increase support to help employees find affordable and quality childcare for young children. For example, through employer supported packages that increase employee's choices such as childcare vouchers and/or workplace crèches.
7. Increase support for employees with elder care responsibilities through options to work flexibly, take leave and by providing clear information about available financial support for accessing eldercare services where appropriate.

References

Addabbo, T. and Giovannini, D. (2013) 'Italy country note', in: P. Moss (ed.) International Review of Leave Policies and Research 2013. Available at: *http://www.leavenetwork.org/lp_and_r_reports/*

Alzheimer Europe, (2009): 'France'; available at: *http://www.alzheimer-europe.org/Policy-in-Practice2/Country-comparisons/Social-support-systems/France* (accessed 17 December, 2013)

Arntz, M., Sacchetto, R., Spermann, A., Steffes, S., Widmaier, S. (2007): The German Social Long-Term Care Insurance: Structure and Reform Options, IZA Discussion Paper No. 2625, IZA: Germany

BBC News (9th February 2011): Parents 'struggle to find out-of-school care' *http://www.bbc.co.uk/news/education-12390881* (accessed 13 November 2013)

Bergman, H. and B. Hobson (2002). Compulsory Fatherhood: the coding of fatherhood in the Swedish Welfare State in "Making Men into Fathers: Men, Masculinities and the social politics of fatherhood". B. Hobson. Cambridge, Cambridge University Press, UK

Bettio, F., Verashchagina, A. (2012): Long-Term Care for the elderly. Provisions and providers in 33 European countries, Synthesis report was financed by, and prepared for the use of the European Commission, Directorate- General Justice, Unit D1 "Gender Equality", European Union.

Bettio, F., Verashchagina, A. (2009): Gender segregation in the labour market Root causes, implications and policy responses in the EU, European Communities: Belgium

Blum, S. and Erler, D. (2013) 'Germany country note', in: P. Moss (ed.) International Review of Leave Policies and Research 2013. Available at: *http://www.leavenetwork.org/lp_and_r_reports/*

Brilli, Y., Del Boca, D., Pronzato, C. (2011): Exploring the Impacts of Public Childcare on Mothers and Children in Italy: Does Rationing Play a Role?, IZA DP No. 5918, IZA: Germany

Callender, C. (2000) The Barriers to Childcare Provision, Research Report RR231, Department for Education and Employment: London, UK.

Callender, C., Millward, N., Lissenburgh, S., Forth, J. (1997) Maternity Rights and Benefits in Britain 1996, Research Report no 67, Stationery Office, London, UK.

The Connexion (2010): Parental leave rules explained: *http://www.connexionfrance.com/maternity-paternity-leave-parental-rules-france-11284-news-article.html* (accessed 28 January 2014).

Chanfreau J, Gowland S, Lancaster Z, Poole E, Tipping S and Toomse M (2011) Maternity and Paternity Rights and Women Returners Survey 2009/10, research report no 777, Sheffield: Department for Work and Pensions. *http://www.natcen.ac.uk/media/747128/maternity-and-paternity2009-10.pdf*

Collinson, P (2010) 'Can Saga take care of you?' The Guardian – Saturday money section, 13th February 2010, p1: *http://www.theguardian.com/money/2010/feb/13/saga-home-care* (accessed 28 January 2014)

Comptroller and Auditor General (2004) 'Early Years: Progress in developing high quality childcare and early education accessible to all', HC 268, London: The Stationery Office.

Crepaldi, C., and Pesce, F., (2013) 'First quarter 2013 – Country fiche on gender equality and policy developments: Italy', European Network of Experts on Gender Equality, FGB: Italy

CSCI (2005): The state of social care in England 2004-5. London: Commission for Social Care Inspection

Dahlberg, L., Demack, S., Bambra, C. (2008): Age and Gender of Informal Carers: a population-based study in the UK, Health and Social Care in the Community vol.15(5), 439–445

Daycare Trust (2006) Childcare Today: a progress report on the Government's Ten-Year hildcare Strategy, Daycare Trust: London

Daycare Trust and Family and Parenting Institute (2013) Childcare Costs Survey 2013, Daycare Trust and Family and Parenting Institute: London, UK

Dex, S. (2003). Families and work in the 21st century, foundations. York: Joseph Rowntree Foundation, UK.

Duncan, S. (2006). Mothers' work-life balance: individualized preferences or cultural construction in "Gender Divisions and Working Time in the New Economy: Changing Patterns of Work, Care and Public Policy in Europe and North America". D. Perrons, C. Fagan, L. McDowell, K. Ray and K. Ward. Cheltenham, Edward Elgar

Duvander, A.-Z. and Haas, L. (2013) 'Sweden country note', in: P. Moss (ed.) International Review of Leave Policies and Research 2013. Available at: *http://www.leavenetwork.org/lp_and_r_reports/*

Duvander, A-Z., Johansson, M., (2012): What are the effects of reforms promoting fathers' parental leave use? Journal of European Social Policy 2012, 22: 319

Eironline. (2012). 'New government plans sweeping reforms'. Available at: *http://www.eurofound.europa.eu/eiro/2011/12/articles/be1112021i.htm* (accessed 20 December, 2013)

Ellingsaeter, A. (2012): Cash for Childcare: Experiences from Finland, Norway and Sweden, International Policy Analysis: *http:///library.fes.de/pdf-files/id/09079.pdf* (access 28 January 2014)

Euraxess (2012): 'Services: Family Support'. Available: *http://www.euraxess.it/services/types.php?voce=incoming&pag=family_support#child* (assessed 18 December 2013).

Eurofound. (2013). 'More and better jobs in home-care services Germany'. European Foundation for the Improvement of Living and Working Conditions. Available: *http://www.eurofound.europa.eu/pubdocs/2013/536/en/1/EF13536EN.pdf* (accessed 10 December 2013)

Eurofound (2004): Family and parental leave provision and collective bargaining – The case of France, EIRO national centre: Dublin

European Commission (2012): She Figures: Gender in Research and Innovation – Statistics and Indicators, EC: Brussels

European Commission (2011): Europe 2020 Targets: *http://ec.europa.eu/europe2020/targets/eu-targets/* (accessed 20 January 2014).

European Commission (2010): Strategy for equality between women and men 2010-2015, European Union: Belgium

European Commission (2009): '2009 Ageing Report: Economic and budgetary projections for the EU-27 Member States (2008-2060)', European Commission: Luxembourg.

European Commission (2008): Manual for Gender Mainstreaming, European Communities: Belgium.

European Union. (2012) 'Czech Republic: Supporting parental care in early childhood'. Available at: *http://europa.eu/epic/countries/czech-republic/index_en.htm* (accessed 20 December 2013)

European Union (2013): Women and Men in Leadership Positions in the European Union, 2013, European Union: Belgium

European Union. (2013a). 'Germany: developing a targeted family policy'. Available: *http://europa.eu/epic/countries/germany/index_en.htm* (accessed 17 December 2013).

European Union. (2013b). 'Spain: Families take the strain'. Available: *http://europa.eu/epic/countries/spain/index_en.htm* (accessed 16 December 2013)

Eurostat (2008): 'Nace Rev.2: Statistical classification of economic activites in the European Community', Office for Official Publications of the European Communities: Luxembourg

Escobedo, A. and Meil, G. (2013). 'Spain country note', in: P. Moss (ed.) International Review of Leave Policies and Research 2013. Available at: *http://www.leavenetwork.org/lp_and_r_reports/*

Expatica.com. (2011a). 'Childcare in Belgium. Available at *http://www.expatica.com/be/family/kids/childcare-in-belgium-1445_8443.html* (accessed 28 January 2014)

Expatica.com. (2011b). 'Childcare in Spain'. Available: *http://www.expatica.com/es/education/pre_school/childcare-in-spain_11017.html* (accessed 2013)

Eydoux, A., (2013) 'First quarter 2013 – Country fiche on gender equality and policy developments: France', European Network of Experts on Gender Equality, FGB: Italy

Fagan, C., Donnelly, R., Rubery, J. (2005): Reconciliation of Work and Private life in the UK, External report commissioned by and presented to the EU Directorate-General Employmentand Social Affairs, Unit G1 'Equality between women and men', EWERC: Manchester

Fagan, C., González Menéndez, M., Gómez Ansón, S. (eds) (2012) Women on Corporate Boards and in Top Management: European trends and policy. Work and Welfare in Europe. Basingstoke (UK): Palgrave

Fagan, C., Hegewisch, A., and Pillinger, J. (2006) Out of Time – why Britain needs a new approach to working-time flexibility, London: Trades Union Congress, *www.tuc.org.uk*

Fagan, C., and Nixon, D. 'Home Care in the United Kingdom' (2001) in E. Mermet and S. Lehndorff (eds.) New Forms of Employment and Working Time in the Service Economy: country case studies conducted in five service sectors. ETUI Report 69, Brussels: European Trade Union Institute.

Fagan, C., Norman, H. "Men and gender equality: tackling gender segregation in family roles and in social care jobs." In Gender and the European Labour Market, ed. Bettio, F., Plantenga, J., Smith, M, 199-223. Oxon (UK): Routledge

Fagan, C., Teasdale, N. (2008): Gender segregation in the labour market: roots, implications and policy responses in the UK. External report commissioned by and presented to the EU Directorate-General Employment and Social Affairs, Unit G1 'Equality between women and men', University of Manchester: Manchester (UK)

Fagnani, J., Boyer, D. and Thévenon, O. (2013). 'France country note', in: P. Moss (ed.) International Review of Leave Policies and Research 2013. Available at: *http://www.leavenetwork.org/lp_and_r_reports/*

Fagnani and Letablier (2006): The French 35-hour working law and the work-life balance of parents: friend or foe? in Perrons, D., Fagan, C., McDowell, L., Ray, K., Ward, K. (eds.): 'Gender Divisions and Working Time in the New Economy: Changing Patterns of Work, Care and Public Policy in Europe and North America. Edward Elgar: Cheltenham.
Fagnani, J., and Lloyd, E., (2013): 'France's Childcare system-French Lessons'. Available at: *http://www.nurseryworld.co.uk/nursery-world/analysis/1097583/frances-childcare-french-lessons* (accessed 10 December 2013)

Försäkringskassan (2013): 'Attendance Allowance'. Available: *https://www.forsakringskassan.se/wps/wcm/connect/f2331695-f616-4730-9ff3-f715f51cc572/assistansersattning_eng.pdf?MOD=AJPERES* (accessed 18 December 2013).

Federal Ministry of Economics and Technology (undated): 'Guide to Living in Germany'. Available: *http://www.make-it-in-germany.com/fileadmin/user_upload/download/Guide_to_Living_in_Germany.pdf* (accessed 17 December 2013).

Federal Ministry of Education and Research (2013) 'All-day schools – The investment programme "The Future of Education and Care'. Available at: *http://www.bmbf.de/en/1125.php* (accessed 17 December 2013)

Francesconi, M., and Gosling, A. (2005) Career paths of part-time workers, EOC working paper no.19, Manchester: Equal Opportunities Commission

Garcia Diez, S. (2012): Childcare in Europe: a reflection on the present economic approach, BBVA Foundation: Bilbao

Glendinning, C., Tjadens, F., Arksey, H., Moree, M., Moran, N., Nies, H. (2009): Care provision within Families and its Socio-Economic Impact on Care Providers, Report for the European Commission DG EMPL Negotiated Procedure VT/2007/114, Social Policy Research Unit, University of York in collaboration with Vilans Centre of Expertise for Long-Term Care, Utrecht.

Gonzalez Gago, E., (2013). 'First quarter 2013 – Country fiche on gender equality and policy developments: Spain', European Network of Experts on Gender Equality, FGB: Italy

Government offices of Sweden. (2012). 'Elderly Care in Sweden' Available at: *http://www.government.se/sb/d/15473/a/183501* (accessed 10 December 2013)

The Guardian (21 May 2012): 'Child care costs: how the UK compares with the world'. Available: *http://www.theguardian.com/news/datablog/2012/may/21/child-care-costs-compared-britain* (accessed 18 December 2013).

Heinämäki, L. (2008): Early Childhood Education in Finland, National Research and Development Centre for Welfare and Health STAKES, Jyväskylä Satellite Office: Finland

Hellqvist, K., and Lidbrink, M. (2010): Quality of long-term care in residential facilities: see *http://ec.europa.eu*

Himmelweit, S., Land, H. (2008): Reducing Gender Inequalities to Create a Sustainable Care System, Joseph Rowntree Foundation: York

How to Germany (2013): Mutterschaftsgeld / Maternity Allowance in Germany: *http://www.howtogermany.com/pages/maternity_allowance.html* (accessed 28 January 2014).

Hudson, M., S. Lissenburgh, et al. (2004). Maternity and Paternity Rights in Britain 2002: Survey of parents. London, Policy Studies Institute

International Labour Organisation (ILO) (2011). 'Maternity Protection in the Context of Work-Life Reconcilation for Men and Women'. Available at: *http://issuu.com/undp_in_europe_cis/docs/maternity_protection_in_the_context_of_work-life_r* (accessed 20 December 2013)

Joel, M-E., Dufour-Kippelen, S., Duchene, C., Marmier, M. (2010) : 'The Long-Term Care System for the Elderly in France', ENEPRI Research Report, No. 77, European Network of Economic Policy Research Institutes and ANCIEN (Assessing Needs of Care in European Nations): *http://www.ancien-longtermcare.eu/sites/default/files/ENEPRI%20_ANCIEN_%20RR%20No%2077%20France.pdf* (accessed 17 December 2013).

Johansson, E. (2010): The Long-Term Care System for the Elderly in Finland, ENEPRI Research Report No. 76 Contribution to WP1 of the ANCIEN project. See *http://www.ancien-longtermcare.eu/sites/default/files/ANCIEN%20RR%2076%20Finland_0.pdf* (accessed 28 January 2014).

Johansson, T. and R. Klinth (2008). Caring Fathers: The Ideology of Gender Equality and Masculine Positions. Men and Masculinities 11(1): 42-62

Joseph, O., Pailhé, A., Recotillet, I., Solaz, A. (2013): 'The economic impact of taking short parental leave: Evaluation of a French reform'. Available: *http://www.ined.fr/fichier/t_telechargement/62045/telechargement_fichier_fr_josephpailherecotilletsolaz26mars2013.pdf* (accessed 20 December 2013).

Kandalaft, A. (2012): The growing problem of elderly care in France, Guardian Professional (Social Care Network): *http://www.theguardian.com/social-care-network/2012/jan/11/growing-problem-elderly-care-france* (accessed 28 January 2014)

Kela. (2013). 'Paternity allowance during paternity leave'. Available at: *http://www.kela.fi/web/en/paternal-leave_paternity-allowance* (accessed 19 November 2013)

Kocourková, J. (2013). 'Czech Republic country note', in: P. Moss (ed.) International Review of Leave Policies and Research 2013. Available at: *http://www.leavenetwork.org/lp_and_r_reports/*

Křížková, A., (2013). 'First quarter 2013 – Country fiche on gender equality and policy developments: Czech Republic', European Network of Experts on Gender Equality, FGB: Italy

La Valle, I., Arthur, S., Millward, C., Scott, J., & Clayden, M. (2002). Happy families? Atypical work and its influence on family life. Bristol: The Policy Press.

La Valle, I., Finch, S., Nove, A., and Lewin, C. (1999) Parents' Demand for Childcare Department for Education and Employment Research Report no 176, London

Laing and Buisson, (2011). 'Care Home Fees'. Available: *http://www.payingforcare.org/care-home-fees* (accessed 5 September 2013)

Lewis, S. (1997) "Family Friendly' Employment Policies: A Route to Changing Organizational Culture or Playing About the Margins?' Gender, Work and Organization, 4 (1): 13 – 23.

Lewis, S., Gambles, R., Rapoport, R. (2007). 'The Constraints of a Work-life Balance Approach: an International Perspective' The International Journal of Human Resource Management, 18(3): 360 – 374.

Leon, M. (2007). 'Speeding Up or Holding Back? Institutional Factors in the Development of Childcare Provision in Spain', European Societies, Vol 9(3), pp: 315-337

Merla, L. and Deven, F. (2013) 'Belgium country note', in: P. Moss (ed.) International Review of Leave Policies and Research 2013, available at: *http://www.leavenetwork.org/lp_and_r_reports]*

Messenger, J. (ed) (2004): Finding the Balance: Working Time and Workers' Needs and Preferences in Industrialised Countries, London: Routledge

Meulders, D., (2013). 'First quarter 2013 – Country fiche on gender equality and policy developments: Belgium', European Network of Experts on Gender Equality, FGB: Italy

Meulders, D., O'Dorchai, S. (2008): Childcare in Belgium, Working Paper No. 08-08 RR, DULBEA l'Université Libre de Bruxelles: Belgium

Ministry of Education youth and sports, (2013). 'Pre-School Education in the CR'. Available: *http://www.msmt.cz/areas-of-work/preschool-education* (accessed 10 December 2013)

Ministry of Education and Culture (2013), Finland. Available at: *http://www.minedu.fi/OPM/Koulutus/varhaiskasvatus/?lang=en* (accessed 19 November 2013)

Ministry of Social Affairs and Health (2006) : Social Welfare in Finland, Helsinki University Printing House : Helsinki

Mooney, A., Statham, J. with Simon, A. (2002): Informal care and work after fifty -Findings, Joseph Rowntree Foundation: York

Naumann, I., McLean, C., Koslowski, A., Tisdall, T., Lloyd, E. (2012): Early Childhood Education and Care Provision: International Review of Policy, Delivery and Funding: Final Report, Centre for Research on Families and Relationships, The University of Edinburgh: Edinburgh

Norman, H., Elliot, M., Fagan, C. (2013): Which fathers are the most involved in taking care of their toddlers in the UK? An investigation of the predictors of paternal involvement, Community, Work & Family, DOI: 10.1080/13668803.2013.862361

Nyberg, A., (2013). 'First quarter 2013 – Country fiche on gender equality and policy developments: Sweden', European Network of Experts on Gender Equality, FGB: Italy

O'Brien, M., Moss, P., Koslowski, A. and Daly, M. (2013) 'United Kingdom country note', in: P. Moss (ed.) International Review of Leave Policies and Research 2013. Available at: *http://www.leavenetwork.org/lp_and_r_reports/*

O'Brien, M. (2009). Fathers, Parental Leave Policies and Infant Quality of Life: International Perspectives and Policy Impact. The Annals of the American Academy of Political and Social Science Special Issue: Fathering across Diversity and Adversity

OECD. (2011a). 'Belgium: Long Term Care'. Available at: *http://www.oecd.org/belgium/47877421.pdf* (accessed 20 December 2013)

OECD. (2011b). 'Czech Republic: Long-term Care'. Available: *http://www.oecd.org/czech/47877501.pdf* (accessed 20 December 2013)

OECD (2011c). 'France: Long Term Care'. Available: *http://www.oecd.org/france/47902097.pdf* (accessed 20 December 2013)

OECD (2011d): 'Italy: Long Term Care – Highlights from Help Wanted? Providing and Paying for Long-Term Care, OECD Publishing, 2011

OECD. (2011e). 'Highlights from Spain: Help Wanted? Providing and Paying for Long- Term Care'. Available: *http://www.oecd.org/spain/47891779.pdf* (accessed 10 December 2013)

OECD (2011f). 'Sweden: Long Term Care.' Available: *http://www.oecd.org/sweden/47878082.pdf* (accessed 18 December 2013).

OECD. (2007).'Highlights Italy: Babies and Bosses – Policies towards reconciling work and family life'. Available: *http://www.oecd.org/els/soc/39696356.pdf* (accessed 10 December 2013)

OECD. (2006). Sweden 'Starting Strong II: Early Childhood Education and Care' Available at: *http://www.oecd.org/edu/school/37423778.pdf* (accessed 19 November 2013)

Oliver, R., Mätzke, M. (2012): 'Regional Diversity in Public Childcare: Explaining the Varied Fate of Central Governments' Childcare Agendas in Italy and Germany'. Available: *http://www.espanet2012.info/__data/assets/pdf_file/0007/88981/Matzke_-_Stream_12.pdf* (accessed 20 December 2013).

Päivähoito Ja Esiopetus (2013). 'Children's Daycare and Pre-school Education' available at: *http://www.jkl.fi/paivahoito/english* (accessed 28 January 2014).

Plantenga, J., and Remery,. C., (2013), Childcare services for school age Children: A comparative Review of 33 Countrie'. Synthesis report financed by, and prepared for the use of the European Commission, Directorate- General for Justice, Unit D2 "Gender Equality" in the framework of the contract managed by Fondazione Giacomo Brodolini (FGB), Italy. Available at: *http://ec.europa.eu/justice/gender-equality/files/documents/130910_egge_out_of_school_en.pdf* (accessed 20 December 2013)

Plantenga, J., and Remery,. C., (2009): The provision of childcare services A comparative review of 30 European countries. European Commission. Office for Official Publications of the European Communities, Luxembourg.

Plantenga, J. and C. Remery (2005). Reconciliation of work and private life. A comparative review of 30 European countries. European Commission. Office for Official Publications of the European Communities, Luxembourg.

Rake, C. (2009): Are women bearing the brunt of the recession? A Fawcett Society Report, March 2009, The Fawcett Society: London

Ray, R. (2008): A Detailed Look at Parental Leave Policies in 21 OECD Countries, Center for Economic and Policy Research: Washington, DC.

Robert, T., (2012). 'Parental leave extended to 4 months since 1 June 2012'. Available: *http://www.laga.be/newsroom/legal-news/parental-leave-extended-to-4-months-since-1-june-2012* (accessed 20 December, 2013)

Rubery, J., Humphries, J., Fagan, C., Grimshaw, D., and Smith, M. 'Equal Opportunities as a Productive Factor' in B. Burchell, S. Deakin, J. Michie and J. Rubery (eds.) (2003) Systems of Production: markets, organisations and performance, London: Routledge

Salmi, M. and Lammi-Taskula, J. (2013). 'Finland country note', in: P. Moss (ed.) International Review of Leave Policies and Research 2013. Available at: *http://www.leavenetwork.org/lp_and_r_reports/*

Scheele, A., (2013). 'First quarter 2013 – Country fiche on gender equality and policy developments: Germany', European Network of Experts on Gender Equality, FGB: Italy Sutela,A., (2013). 'First quarter 2013 – Country fiche on gender equality and policy developments: Finland', European Network of Experts on Gender Equality, FGB: Italy

Schultz, E., (2010). 'The Long-Term Care System in Germany'. Discussion Papers. (1039). Berlin Available: *http://www.diw.de/documents/publikationen/73/diw_01.c.359024.de/dp1039.pdf* (accessed 10 December 2013)

Schulz, E. (2004), Use of health and nursing care by the elderly, AGIR WP2. ENEPRI Re-search Report, No. 2. See www.enepri.org

Smedley, T. (2012): Have a care for the carers forced to give up work, The Guardian: *http://www.theguardian.com/money/2012/jun/29/carers-forced-give-up-work* (accessed 28 January 2014)

Smithson, J., Lewis, S., Cooper, C. and Dyer, J. (2004) 'Flexible working and the gender pay gap in the accountancy profession', Work, Employment and Society, 18 (1): 115 – 135

Sobotka, T., Šťastná, A., Zeman, K., Dana Hamplová, D., Kantorová, K., (2008). 'Czech Republic: A rapid transformation of fertility and family behaviour after the collapse of state socialism'. Special Collection 7: Childbearing Trends and Policies in Europe. 19. (14). Available at: *http://www.demographic-research.org/volumes/vol19/14/19-14.pdf*
(accessed 10 December 2013)

Sowa, A., (2010): The Long-Term Care System for the Elderly in the Czech Republic, ENEPRI Research Report No. 72 Contribution to WP1 of the ANCIEN project. See. *http://www.ancien-longtermcare.eu/sites/default/files/ENEPRI%20RR%20No%2072%20ANCIEN%20Czech%20Republic.pdf*
(accessed 17 January 2014).

Sweden.se (2013). 'Elderly Care in Sweden'. Available at: *http://sweden.se/society/elderly-care-in-sweden/*
(accessed: 28 January 2014)

Swedish National Agency for Education (Skolverket) (2013): Facts and figures 2012 – Pre-school activities, schools and adult education in Sweden – summary of report 383, Skolverket: Sweden

The Age and Employment Network (TAEN) (2012) in collaboration with European Chemical Employers Group (ECEG), European Mine, Chemical and Energy Workers' Federation (EMCEF) and the Fédération Européenne des Cadres de la Chimie et des Industries Annexes (FECCIA): Active Ageing in the European Chemical Industry, TAEN: London

Tanaka, S. and J. Waldfogel (2007). Effects of Parental Leave and Work Hours on Fathers' Involvement with their Babies: Evidence from the Millennium Cohort Study. Community, Work and Family 10(4): 409-426.

Tediosi, F. and Gabriele, S. (2010): The Long-Term Care System for the Elderly in Italy , ENEPRI Research Report No. 76 Contribution to WP1 of the ANCIEN project. See: *http://www.ancien-longtermcare.eu/sites/default/files/ENEPRI%20_ANCIEN_%20RR%20No%2080%20Italy%20edited%20final.pdf*
(accessed 28 January 2014).

The Telegraph (March 2013): 'Francois Hollande calls for six months paid paternity leave in France'. Available at: *http://www.telegraph.co.uk/news/worldnews/europe/france/9918846/Francois-Hollande-calls-for-six-months-paid-paternity-leave-in-France.html* (accessed 10 December 2013)

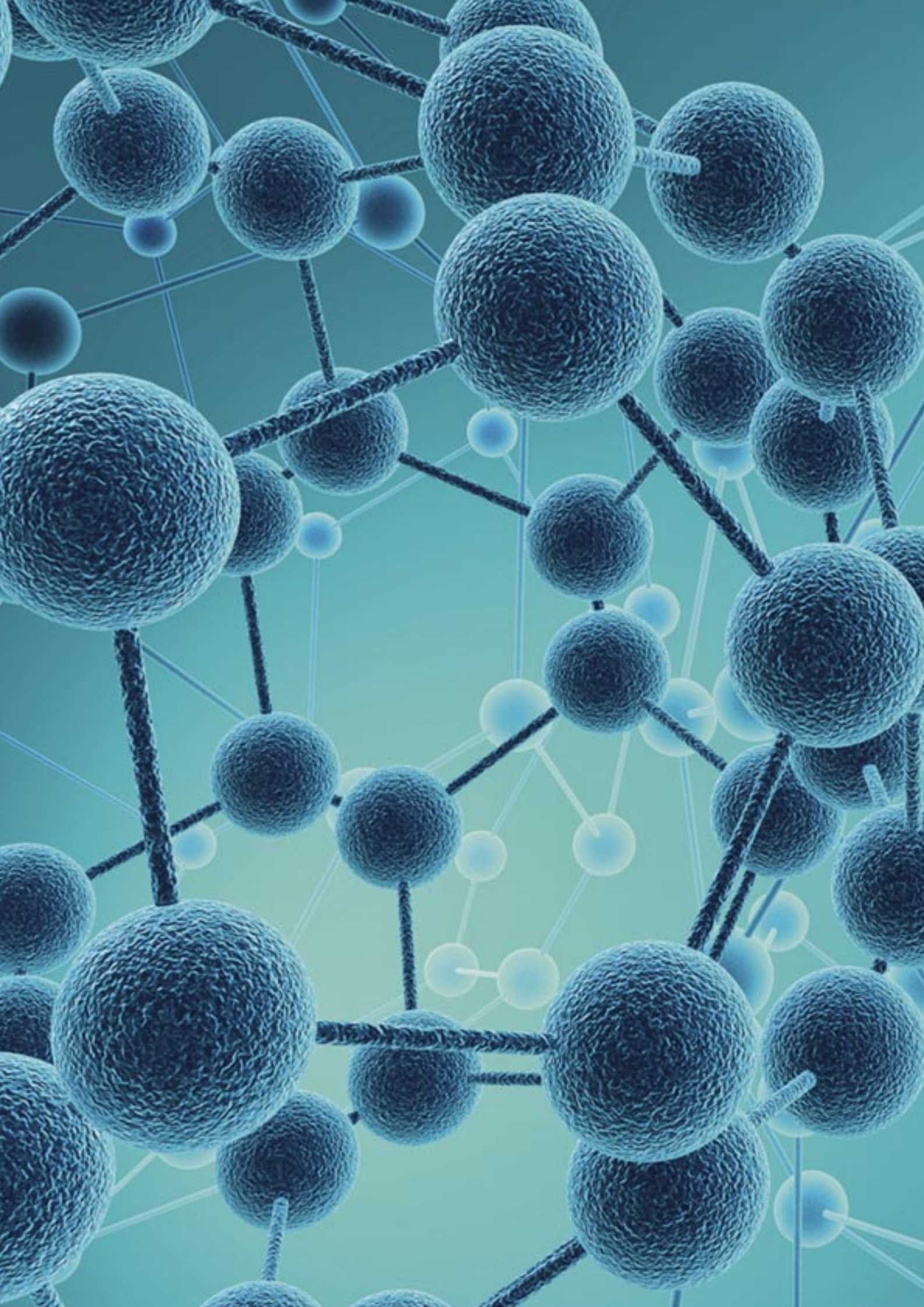
Tipping, S. Chanfraeu, J., Perry, J. and Tait, C. (2012) The Fourth Work-Life Balance Employee Survey, Employment Relations Series, No. 122, Department for Business, Innovation and Skills: London

Tivig, T., Eggert, D., and Korb, C. (2010): 'The Impact of Demographic Change on the Chemical Industry in Europe', study commissioned by the European Chemical Employers Group (ECEG), The European Mine, Chemical and Energy Workers' Federation (EMCEF) and the Federation Europeenne des Cadres de la Chimie et des Industries annexes (FECCIA), supported by the European Commission.

Trades Union Congress (TUC) (13 June 2013): Just one in 172 fathers taking Additional Paternity Leave: *http://www.tuc.org.uk/workplace/tuc-22282-f0.cfm*
(accessed 28 January 2014).

Ulmanen, P. (2012): Working Daughters: A Blind Spot inSwedish Eldercare Policy, Social Politics 2012, Volume 20, Number 1: 65-87

Urwin P.C. and Rubery, J. (2006), The elderly care sector in the UK, *http://dynamoproject.eu*

Vanhille, J., Maes, F., Spiritus, K. (2012): Belgium (BE) 2007-2010, Euromod Country Report, Institute for Social and Economic Research: *https://www.iser.essex.ac.uk/files/euromod/country-reports/year-3/CR_BE_2007-2010_YR3_Final.pdf*
(accessed 28 January 2014).

Willemé, P. (2010) The Long-Term Care System for the Elderly in Belgium, with European Network of Economic Policy Research Institutes and ANCIEN (Assessing Needs of Care in European Nations), ENEPRI Research Report No. 70 Contribution to WP1 of the ANCIEN project. See *http://www.ceps.be/book/long-term-care-system-elderly-belgium*
(accessed 20 December 2013).