Care, Work and Welfare in Europe

RECWOWE: Research findings and policy challenges
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Care Between Work and Welfare in Europe

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Care over the life course

Starting point:
The need for care is universal and a natural element of the life cycle

The book focuses on the need for care in two main life situations:
• Care for children in their infancy and early years
• Care for frail elderly

Multi-dimensional concept. Care as:
• policy
• activity
• work
• relationship
Why study care?

Why not:
Ageing societies
Reconciliation of work and family life
Changing family structures
Quality of Life
Investment in children agenda
Realisation of the Adult Worker Model
Gender equality

Etc...
Old and new tensions

Old tensions:
• Division of care work between men and women, recognising the economic and emotional value of women’s unpaid work.

New tensions:
• Division of care work between informal/formal and professional
• home/institution
• local/national
• between market/state/vol. organisations/civil society/employers,
• between social classes/ethnic groups
Caring for children - snapshots

General extension of extra-familial public or publicly financed child care provision

But women continue to care for the under 3s in many countries

Why?

Still lack of high quality, affordable day care, BUT - even when such exist - also cultural preferences for family care

Cultural value orientations giving priority to family child care still play an important role

Nordic countries have achieved dual-earner, but not dual carer societies

Tensions of active fatherhood and cash policies supporting the traditionally gender differentiated family roles -> new social cleavages
Caring for elderly - snapshots

The welfare states have increasingly assumed responsibility for elder care, but huge variation across countries in models and consequently in tensions.

Denmark: Care is formalised but tensions about job quality of the formal care jobs.

Spain and Germany: tension about care quality, unregulated care work provided by family members or live-in help -> marginalisation and social suffering for care providers. Prevents women from fully participating in the labour market.

Cash for care schemes favouring grey sector care provision - > care migrants.

And still leaves a great deal of responsibility of managing care to the families.
Common trends?

Path dependencies but common challenges

Common strategies: Restructuring of the societal organization of care work involving more public involvement, but also a strengthening of economic principles and involvement of other sectors

And care for children/elderly follow different paths of modernization even within one society, resulting in quite varied provisions and mix of care
Thank you!