Investing in care: Recognising and valuing those who care

VOLUME 2: TECHNICAL PAPERS • 2013
Acknowledgements

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- Sex Discrimination Team (Dimitry Hodge, Pooja Chowdhary, Frieda Lee and Alison Aggarwal)

Disclaimer

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Investing in care: Recognising and valuing those who care

Volume 2: Technical Papers

Social Policy Research Centre Team (University of New South Wales): Bettina Cass, Trish Hill, Myra Hamilton and Cathy Thomson

Australian Human Rights Commission 2013
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# Abbreviations

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<tr>
<td>ABS</td>
<td>Australian Bureau of Statistics</td>
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<tr>
<td>ACOSS</td>
<td>Australian Council of Social Services</td>
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<td>ACTU</td>
<td>Australian Council of Trade Unions</td>
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<td>AIHW</td>
<td>Australian Institute of Health and Welfare</td>
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<td>ATO</td>
<td>Australian Taxation Office</td>
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<td>CALD</td>
<td>Culturally and Linguistically Diverse</td>
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<td>CEDAW</td>
<td>Convention on the Elimination of all forms of Discrimination Against Women</td>
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<td>Census</td>
<td>Census of Population and Housing</td>
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<td>Cth</td>
<td>Commonwealth</td>
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<td>DEEWR</td>
<td>Australian Government Department of Education, Employment and Workplace Relations</td>
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<td>DOHA</td>
<td>Australian Government Department of Health and Ageing</td>
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<td>FaHCSIA</td>
<td>Australian Government Department of Families, Housing, Community Services and Indigenous Affairs</td>
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<td>HILDA</td>
<td>Household Income and Labour Dynamics in Australia</td>
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<td>ILO</td>
<td>International Labour Organization</td>
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<td>NDIS</td>
<td>National Disability Insurance Scheme</td>
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<td>NES</td>
<td>National Employment Standards</td>
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<tr>
<td>OECD</td>
<td>Organisation for Economic Co-operation and Development</td>
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<tr>
<td>SDAC</td>
<td>Survey of Disability, Ageing and Carers</td>
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<td>SPRC</td>
<td>Social Policy Research Centre, University of New South Wales</td>
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<td>UNSW</td>
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1. Introduction

The Australian Human Rights Commission’s report, *Investing in care: Recognising and valuing those who care* examines the current issues in unpaid caring in Australia. The report looks at the way in which caring responsibilities effect workforce participation and examines the impact of time spent out of the workforce on the retirement incomes and savings of unpaid carers.

The report considers:

- the nature of unpaid caring work in Australia;
- the relationship between unpaid caring work and women’s unequal participation in the workforce, and women’s long-term economic security (in particular, retirement income);
- the different models/measures used in Australia and internationally which recognise and remunerate unpaid caring work, and
- options for reform that will properly recognise and compensate those who undertake unpaid caring work.

The report is intended as a discussion paper to inform potential policy reforms in Australia. By researching a range of mechanisms and models used to value unpaid caring work, both in Australia and overseas, the report identifies possible options for reform that could be applicable in the Australian context.

The options for reform cover a range of mechanisms including legislative mechanisms, flexible work arrangements, carer support payments, leave arrangements, services for carers, workplace initiatives and mechanisms within the retirement income and savings system (ie taxation, superannuation and income support).

The report comes in two parts:

- **Volume 1 – the research report**
- **Volume 2 – the technical papers**

In addition the Report is complemented by the *Supporting Carers in the Workplace: A Toolkit*. The Toolkit focuses on strategies workplaces can use to support unpaid carers to meet their caring responsibilities while continuing to work. The Toolkit provides practical suggestions and examples of different kinds of workplace mechanisms to support carers in organisations and workplaces of all sizes and types. These examples have been drawn from current practice both within Australia and internationally.

2. Technical Paper A: Defining unpaid care

2.1 Unpaid care

In considering policy options to recognise and value unpaid caring work it is essential to develop a definition of unpaid caring that clearly sets out the target population, the purpose, and how these relate to the proposed outcomes of any policy options. The aims in this project are to consider and identify policies and mechanisms that recognise and value unpaid care in order to improve opportunities for carers to participate in the workforce and to address the gender gap in retirement savings associated with unpaid caring roles.

Unpaid caring work is undertaken by two main groups in Australia:

1. **parents** (who include biological, step, adoptive, or foster parents, and grandparents or guardians with caring responsibilities for a dependent child); and
2. **carers** (who include people caring for a family member or friend with disabilities, chronic illness or frailty due to older age.

‘Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.’

This latter definition includes parents of children with disability, who have both parental roles and other unpaid care roles.

2.2 Understanding the nature of care

The academic literature on the nature of care suggests that unpaid care encompasses the following elements:

- relationships of moral and social obligation and responsibility;
- labour, it is an activity with costs, both emotional and financial;
- a disposition of attentiveness to another’s needs; and
- care occurs within economic and social policy arrangements and normative social frameworks, which define entitlements, expectations and responsibility for care and how this is to be shared between individuals and the state.

These facets of care should be considered when defining unpaid caring for the purposes of the policies and mechanisms considered and proposed in this project.

2.3 Defining parents and carers in this project

Defining parents and carers for the purposes of recognising and remunerating unpaid carers in order to enhance workforce participation and decreasing gender inequalities in retirement incomes requires consideration of the following elements which may affect criteria for eligibility for policies and access to entitlements:

1) Types of relationships to be recognised in a definition of unpaid care including: age of children for whom one has responsibility to care, types of familial or marital relationships, relationships of co-residence, and relationships to members of a broader community.

2) Types of unpaid care needs to be recognised:

   a. Level of dependency and support for children – until what age and under what conditions should parental care be recognised?
b. Level and duration of disability or illness – what thresholds of care needs should be considered? How should episodic illness or conditions be addressed?

3) Level of unpaid care contributions:
   b. What contribution to parenting each child would count as sufficient?
   c. What contribution to informal care would count as sufficient?

4) Location of unpaid care:
   a. Does care need to be co-residential to be recognised?
   b. Is caring for a person while they are in residential care also to be recognised?

5) Restrictions on eligibility – should definitions of unpaid caring work:
   a. Be subject to residence requirements, as in forms of income support?
   b. Be subject to income and assets tests relating to self, person cared for, or partner?
   c. Have paid employment or education or training participation restrictions?

Table 1 outlines examples of the definitions of parents and carers used in a range of current contexts in Australia in legislation, income support systems and statistical data collections. These definitions are all employed for different purposes and may or may not have relevance to the mechanisms that are proposed in this research project. In future policy development, all potential definitions should be scrutinised for the ways in which they define criteria to recognise unpaid carers – both carers and parents – according to the above elements.
(a) Legislation

A definition of carers (of people with disability, illness or frailty) to be used in this project should align with the definition in the Carer Recognition Act 2010 (Cth) and the exclusions indicated within the definition in this Act relating to paid and volunteer carers and the acknowledgement that co-residence or existence of a relationship in themselves, are not sufficient to be defined as a carer. For the purposes of this project, there are limitations in this definition as it does not define a level of care that might be considered to be a threshold to identify carers whose responsibilities impede workforce participation.

A broad definition of carer also should align with the definitions of carers and associates who are carers in the Disability Discrimination Act 1992 (Cth) (DDA), as this definition encompasses individuals who ‘provides assistance ... to the person because of the disability’. However, for the purposes of this project our definition of carers is restricted to those who provide such assistance without remuneration for their assistance, as the aims of this project are to develop recommendations for carers who have care responsibilities that impede their workforce participation and capacity to accumulate retirement incomes and savings. Paid carers by definition are employed and thus have opportunities to contribute to superannuation.

While the general terms of the definition of carer in the DDA are relevant to the definition of carer for this project, the purposes of the definition of carers in that Act are different to the purpose of the definition of carers within this project. The definition of carer in the DDA is used within sections of the Act which aim to prevent discrimination against the person with a disability due to the fact of having a carer or assistant and also to prevent discrimination against associates, who include carers (paid and unpaid), because of the association with a person with disability.

A preferred definition of care relationships to be used in this project is broader than the definition in the Sex Discrimination Act 1984 (Cth), as this Act only refers to family responsibilities for immediate family members, which include a child, spouse, and also a parent, grandparent, or sibling of the person or the spouse of the person. This definition of recognised care relationships does not address the question of care responsibilities for household members or obligations to kin networks and friends beyond immediate family members. The Fair Work Act 2009 (Cth) goes beyond the definitions of care relationships recognised in the Sex Discrimination Act 1984 to also recognise care responsibilities for household members for the purposes of carer’s leave. However, with respect to the right to request flexible work, the types of care relationships recognised are only those to all children below school age and children with disability up to 18 years. Neither Act recognises care relationships for family, friends or neighbours beyond immediate family and household members.

As noted by Carers Australia in their submission to the Fair Work Act Review these definitions:

> do not adequately reflect the diversity of carers...[who] may be friends or neighbours. It is particularly common in indigenous or culturally and linguistically diverse communities for members of the community or from the much broader extended family to provide care.³

Neither the Sex Discrimination Act 1984, nor the Fair Work Act 2009 specify the intensity of care responsibilities. However, in the Fair Work Act 2009 applicants for carer’s leave may be required to provide evidence to employers that would ‘satisfy a reasonable person’.⁴

(b) Centrelink payments

By contrast, income support for carers (Carer Payment) has no restrictions on the type of care relationships it recognises but a threshold of care need (in terms of both time and level of disability for the person being cared for) must be met. This payment is also income and asset tested and has restrictions on the amount of time that may be spent in employment, training or education. Carer Allowance also recognises all caring relationships, has no co-residency requirements or income test, but has a threshold of care need that must be met.

Income support for parents (Parenting Payment) is paid to the main carer of the child under six years if in a couple family and under 8 years if in a one parent family. Income and residency tests apply. However, Family Tax Benefit A and B have a time component attached to the definition of parental responsibility with a threshold of responsibility for the child at least 35 per cent of the time as a criteria for eligibility, along with residency and income tests. Dependent children may be aged up to 25 years for Family Tax Benefit A and 20 years for Family Tax Benefit B.

Other Centrelink payments for families include Child Care Benefit and Child Care Rebate which are paid to the parent with financial responsibility for child care fees.

Under the Paid Parental Leave Scheme, parents are defined as a primary carer if she/he is meeting most of the child’s physical needs, with restrictions in eligibility based on income, residency and work test. Dad and Partner Pay is paid to the person who is not the birth mother and has eligibility criteria based on residency, income and work tests. The Baby Bonus has a similar definition of parent as the Paid Parental Leave Scheme, but there is no work test.
(c) **ABS statistical collection definitions**

Examples of definitions of carers in ABS data collections include the definition of primary carer and carer in the *ABS Survey of Disability Ageing and Carers (SDAC)* 2009. These definitions encompasses all types of care relationships, but have restrictions based on the level of disability of the person being cared for and whether the main support for a person (ie primary carer) and also on the types of activities and tasks for which care is provided. Both primary carer and carer relationships are also defined on the basis of duration of care; care must be ongoing or likely to be ongoing for 6 months.

A limitation of the primary carer definition in the ABS SDAC is the requirement that each person cared for may have only one primary carer, which may overlook the intensity of care provided by other people in the networks of care and support for some people with disability, illness, or frailty.

An example of a common definition of parents in ABS data collections is that in the *ABS Census of Population and Housing (Census)* 2011, where parents encompass the natural, adoptive, step, or foster mother or father of a child. The category of children is split into dependent and non-dependent children. Dependent children are defined by age, are unpartnered, not a parent themselves, and if aged 15-24 years, are also a full-time student. The ABS data collections generally do not classify parents on the basis of intensity of care provided to children.
## Table 1: Example of definitions of parents and carer in Commonwealth legislation, income support payments and statistical data collections

<table>
<thead>
<tr>
<th>Legislation</th>
<th>Definition</th>
<th>Inclusions/ exclusions</th>
<th>Purpose of Act and definition</th>
<th>Limitations/ advantages for the purposes of this project</th>
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<tr>
<td>Carer Recognition Act 2010 (Cth)</td>
<td>Section 5 ‘For the purpose of this Act, a carer is an individual who provides personal care, support and assistance to another individual who needs it because that other individual: (a) has a disability; or (b) has a medical condition (including a terminal or chronic illness); or (c) has a mental illness; or (d) is frail and aged. An individual is not a carer in respect of care, support and assistance he or she provides: (a) under a contract of service or a contract for the provision of services; or (b) in the course of doing voluntary work for a charitable, welfare or community organisation; or (c) as part of the requirements of a course of education or training. (3) To avoid doubt, an individual is not a carer merely because he or she: (a) is the spouse, de facto partner, parent, child or other relative of an individual, or is the guardian of an individual; or (b) lives with an individual who requires care.’</td>
<td>Unpaid carers only. Excludes paid carers, volunteer carers and people undertaking training. Does not limit the types of care relationships that may be recognised A person is not a carer on the basis of a relationship or cohabitation only.</td>
<td>Section 3 ‘The object of this Act is to increase recognition and awareness of carers and to acknowledge the valuable contribution they make to society.’</td>
<td>Advantages: Encompasses all care relationships. Limitations: Definition does not describe any minimum level or intensity of care that may be used to identify carers whose responsibilities impede workforce participation or the accumulation of retirement savings.</td>
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<td><strong>Disability Discrimination Act 1992 (Cth)</strong></td>
<td><strong>Definition</strong></td>
<td><strong>Inclusions/ exclusions</strong></td>
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<td>Section 9(1) For the purposes of this Act, a carer or assistant, in relation to a person with a disability, is one of the following who provides assistance or services to the person because of the disability: (a) a carer; (b) an assistant; (c) an interpreter; (d) a reader.</td>
<td>Includes both paid and unpaid carers and associates.</td>
<td>Section 3 ‘The objects of this Act are: (a) to eliminate, as far as possible, discrimination against persons on the ground of disability in the areas of: (i) work, accommodation, education, access to premises, clubs and sport; and (ii) the provision of goods, facilities, services and land; and (iii) existing laws; and (iv) the administration of Commonwealth laws and programs; and (b) to ensure, as far as practicable, that persons with disabilities have the same rights to equality before the law as the rest of the community; and (c) to promote recognition and acceptance within the community of the principle that persons with disabilities have the same fundamental rights as the rest of the community.’</td>
<td>Limitations: Definition does not distinguish between paid and unpaid carers or assistants. Definition does not describe any minimum level or intensity of care that may be used to identify carers whose responsibilities impede workforce participation or accumulation of retirement savings.</td>
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<td>Section 9 (4) For the purposes of this Act, a person with a disability has a carer or assistant if the person is (a) presently accompanied by the carer or assistant; or (b) was previously accompanied by the carer or assistant; or (c) may be accompanied by the carer or assistant in the future; or (d) is imputed to be accompanied by the carer or assistant.</td>
<td>Associate, in relation to a person, includes: (a) a spouse of the person; and (b) another person who is living with the person on a genuine domestic basis; and (c) a relative of the person; and (d) a carer of the person; and (e) another person who is in a business, sporting or recreational relationship with the person.</td>
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| **Sex Discrimination Act 1984 (Cth)** | Section 7A  
For the purposes of this Act, an employer discriminates against an employee on the ground of the employee’s family responsibilities if:  
(a) the employer treats the employee less favourably than the employer treats, or would treat, a person without family responsibilities in circumstances that are the same or not materially different; and  
(b) the less favourable treatment is by reason of:  
(i) the family responsibilities of the employee; or  
(ii) a characteristic that appertains generally to persons with family responsibilities; or  
(iii) a characteristic that is generally imputed to persons with family responsibilities. | Section 3  
‘The objects of this Act are:  
(a) to give effect to certain provisions of the Convention on the Elimination of All Forms of Discrimination Against Women and to provisions of other relevant international instruments; and  
(b) to eliminate, so far as is possible, discrimination against persons on the ground of sex, marital status, pregnancy or potential pregnancy or breastfeeding in the areas of work, accommodation, education, the provision of goods, facilities and services, the disposal of land, the activities of clubs and the administration of Commonwealth laws and programs; and  
(ba) to eliminate, so far as possible, discrimination on the ground of family responsibilities in the area of work; and  
(c) to eliminate, so far as is possible, discrimination involving sexual harassment in the workplace, in educational institutions and in other areas of public activity; and  
(d) to promote recognition and acceptance within the community of the principle of the equality of men and women’. | Limitation:  
As noted by the HREOC submission to the relevant Senate Inquiry there are problems with this definition of carers with the limitation of the definition of care to immediate family members only.  
It is noted that this fails to ‘provide protection to workers based on the nature of their responsibilities rather than the more arbitrary nature of their relationship to the person requiring care’.  
5 The Commission has recommended that the Human Rights and Anti-Discrimination Bill cover discrimination on the basis of family responsibilities in all areas of public life and that discrimination on the basis of carer responsibilities be expressly covered.  
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<td>(e) women who are breastfeeding and people who are not breastfeeding; or (f) people with family responsibilities and people without family responsibilities.</td>
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Section 4A

(1) In this Act, family responsibilities, in relation to a person, means responsibilities of the person to care for or support:

(a) a dependent child of the person; or
(b) any other immediate family member who is in need of care and support.

(2) In this section:

**child:** without limiting who is a child of a person for the purposes of this section, each of the following is the child of a person:

(a) an adopted child, stepchild or exnuptial child of the person;
(b) someone who is a child of the person within the meaning of the Family Law Act 1975.

**dependent child** means a child who is wholly or substantially dependent on the person.

**immediate family member** includes:

(a) a spouse of the person; and
(b) an adult child, parent, grandparent, grandchild or sibling of the person or of a spouse of the person.
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<td><strong>parent:</strong> without limiting who is a parent of a person for the purposes of this section, someone is the parent of a person if the person is his or her child because of paragraph (b) of the definition of child in this subsection.</td>
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<td><strong>spouse</strong> includes a former spouse, a de facto partner and a former de facto partner.</td>
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<td><strong>stepchild:</strong> without limiting who is a stepchild of a person for the purposes of this section, someone is the stepchild of the person if he or she would be the person’s stepchild except that the person is not legally married to the partner.</td>
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<td>(3) For the purposes of this section, if one person is the child of another person because of paragraph (b) of the definition of child in subsection (2), relationships traced to or through the person are to be determined on the basis that the person is the child of the other person.</td>
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| *Fair Work Act 2009 (Cth)* | Section 65  
**Definition of care responsibilities for the purposes of flexible work requests**  
"Employee may request change in working arrangements"  
(1) An employee who is a parent, or has responsibility for the care, of a child may request the employer for a change in working arrangements to assist the employee to care for the child if the child:  
(a) is under school age; or  
(b) is under 18 and has a disability.  
*Note: Examples of changes in working arrangements include changes in hours of work, changes in patterns of work and changes in location of work.* | Section 3  
"The object of this Act is to provide a balanced framework for cooperative and productive workplace relations that promotes national economic prosperity and social inclusion for all Australians by:  
(a) providing workplace relations laws that are fair to working Australians, are flexible for businesses, promote productivity and economic growth for Australia's future economic prosperity and take into account Australia's international labour obligations; and  
(b) ensuring a guaranteed safety net of fair, relevant and enforceable minimum terms and conditions through the National Employment Standards, modern awards and national minimum wage orders; and  
(c) ensuring that the guaranteed safety net of fair, relevant and enforceable minimum wages and conditions can no longer be undermined by the making of statutory individual employment agreements of any kind given that such agreements can never be part of a fair workplace relations system; and" | Flexible work:  
Limitation:  
Fails to recognise other care relationships for adults. |
|  | Flexible work:  
All parents of children up to school age.  
Parents of children with a disability up to age 18. |  |  |
|  | Parental leave:  
All parents with responsibility for care of child. (For up to three weeks both parents may have concurrent leave) |  |  |
|  | Limitation:  
Does not specify what responsibility for a child means (ie what level of responsibility is required). |  |  |
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| (i) the placement of a child with the employee for adoption; and  
(ii) the employee has or will have a responsibility for the care of the child." | (d) assisting employees to balance their work and family responsibilities by providing for flexible working arrangements; and  
(e) enabling fairness and representation at work and the prevention of discrimination by recognising the right to freedom of association and the right to be represented, protecting against unfair treatment and discrimination, providing accessible and effective procedures to resolve grievances and disputes and providing effective compliance mechanisms; and  
(f) achieving productivity and fairness through an emphasis on enterprise-level collective bargaining underpinned by simple good faith bargaining obligations and clear rules governing industrial action; and  
(g) acknowledging the special circumstances of small and medium-sized businesses.' | Limitation:  
Does not recognise caring relationships and responsibilities beyond household or immediate family. |
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| (a) the other person is the parent of the child, and so is a member of the child's immediate family; and  
(b) the child, and any other children, of the other person are siblings, and so are members of each other's immediate family.' | | Carer's leave recognises care responsibilities for immediate family and household members only. | No definition of level of support required, but evidence of need for support 'that would satisfy a reasonable person' may be required by employers. (Section 107(3)) |
| Definition of carer for the purposes of carer's leave | | | |
| Section 97 'An employee may take paid personal/carer's leave if the leave is taken:  
(b) to provide care or support to a member of the employee's immediate family, or a member of the employee's household, who requires care or support because of:  
(i) a personal illness, or personal injury, affecting the member; or  
(ii) an unexpected emergency affecting the member.  
Note: The notice and evidence requirements of section 107 must be complied with.' | | | |
<table>
<thead>
<tr>
<th>Definition</th>
<th>Inclusions/ exclusions</th>
<th>Purpose of Act and definition</th>
<th>Limitations/ advantages for the purposes of this project</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 102 Entitlement to unpaid carer’s leave</td>
<td>‘An employee is entitled to 2 days of unpaid carer’s leave for each occasion (a permissible occasion) when a member of the employee’s immediate family, or a member of the employee’s household, requires care or support because of: (a) a personal illness, or personal injury, affecting the member; or (b) an unexpected emergency affecting the member.’</td>
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<tr>
<td>Section 12 immediate family of a national system employee means:</td>
<td>‘(a) a spouse, de facto partner, child, parent, grandparent, grandchild or sibling of the employee; or (b) a child, parent, grandparent, grandchild or sibling of a spouse or de facto partner of the employee.’</td>
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<tr>
<td>Definition</td>
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</table>
| Workplace Gender Equality Act 2012 (Cth) (replaced the Equal Opportunity for Women in the Workplace Act 1999 (Cth)) | Issues of gender equality are defined as including family and caring responsibilities. | Section 2A Objects of Act  
"The principal objects of this Act are:  
(a) to promote and improve gender equality (including equal remuneration between women and men) in employment and in the workplace; and  
(b) to support employers to remove barriers to the full and equal participation of women in the workforce, in recognition of the disadvantaged position of women in relation to employment matters; and  
(c) to promote, amongst employers, the elimination of discrimination on the basis of gender in relation to employment matters (including in relation to family and caring responsibilities); and  
(d) to foster workplace consultation between employers and employees on issues concerning gender equality in employment and in the workplace; and  
(e) to improve the productivity and competitiveness of Australian business through the advancement of gender equality in employment and in the workplace." | Advantage: The principal objects of the Act explicitly family and caring responsibilities as key components of gender equality.  
Limitation:  
No definition of care relationships or level of responsibilities outlined in this Act. |

Centrelink payments
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<tr>
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<th><strong>Inclusions/ exclusions</strong></th>
<th><strong>Purpose of Act and definition</strong></th>
<th><strong>Limitations/ advantages for the purposes of this project</strong></th>
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<tbody>
<tr>
<td><strong>Carer Payment (adult)</strong></td>
<td>‘You may be eligible for Carer Payment (caring for a person 16 years or over) if you provide constant daily care in the home of the person you care for and he or she: • is aged 16 or more with a severe disability or medical condition or is frail aged, or • is aged 16 or more with moderate care needs and has a dependent child who either is under six or is aged 6–16 and eligible for Carer Allowance [1]. The person you care for must also either: • receive an income-support payment from Centrelink or from the Department of Veterans’ Affairs[2], • be unable to receive an income-support payment from Centrelink or the Department of Veterans’ Affairs because they have not lived in Australia long enough to be eligible, or • meet the care-receiver income and assets tests. You may be eligible for Carer Payment (caring for a person 16 years or over) if you provide constant daily care in the home of the person you care for, and he or she is: • a single child aged under 16 years with a severe disability or severe medical condition</td>
<td>‘Constant’ care to any adult or child with a specified level of need for support. Care must be undertaken in the home of the person being cared for. Adult care recipient must receive Department of Veterans Affairs payment or Centrelink income support payment, unless excluded due to residency requirements. Income and assets tested on carer and care recipient.</td>
<td>Limitations: Definition of care restricted by strict eligibility requirements relating to level of care need and time spent caring.</td>
</tr>
</tbody>
</table>
| **Carer payment (child)** | ‘You may be eligible for Carer Payment (caring for a child under 16 years) if you provide constant daily care in the home of the child you care for, and he or she is: • a single child aged under 16 years with a severe disability or severe medical condition | ‘Carer Payment provides financial support if you are unable to work in substantial paid employment because you are providing full-time daily care to someone with a severe disability or medical condition, or to someone who is frail aged.’ | }
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<tr>
<th>Definition</th>
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</table>
| • one of two to four children under 16 with a disability or medical condition whose combined care needs are equal to that of a single child aged under 16 with a severe disability or severe medical condition  
• one of one or two children and an adult who each have a disability or medical condition, whose combined care needs are equal to that of a single child with a severe disability or severe medical condition, or  
• one of two or more children under 16 who individually or combined have a severe disability or severe medical condition in an exchanged-care arrangement (see below). | No restrictions on care relationships or co-residency. Restrictions based on condition of care recipient subject to medical review. No restrictions relating to income or assets. | "Carer Allowance is a supplementary payment for parents or carers who provide additional daily care to an adult or dependent child who has a disability or medical condition or is frail aged." | Advantages: Definition of care not restricted by relationship or income. Definitions includes threshold of care need. |

Carer Allowance  
‘You may receive Carer Allowance (caring for a person 16 years or over) if you:  
• are looking after a person aged 16 or more who has a disability or medical condition or is frail aged and needs additional care and attention on a daily basis; and  
• provide the care for that person in either your home or that person’s home. You may receive Carer Allowance for up to two adults in your care.'
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<tbody>
<tr>
<td>You may receive Carer Allowance (caring for a child under 16 years) if:</td>
<td>• you look after a child with a disability or medical condition who needs additional care and attention on a daily basis or</td>
<td>'Carer Supplement is an annual lump-sum payment to assist carers with the costs of caring for a person with a disability or medical condition.'</td>
<td>As above for Carer Allowance.</td>
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<td></td>
<td>• care for two children with disabilities and the children do not individually qualify you for Carer Allowance (child) but together create a substantial caring responsibility and</td>
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<td></td>
<td>• you live with the child (or children) you are caring for.'</td>
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<tr>
<td>Carer Supplement</td>
<td>'To be eligible for Carer Supplement, you must be in receipt of one of the following payments on 1 July of each year:</td>
<td>Restrictions as above for carer’s allowance.</td>
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<td>• Carer Payment</td>
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<td>• Carer Allowance</td>
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<td>• Wife Pension with Carer Allowance (you can no longer make a new claim for Wife Pension)</td>
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<td>• Department of Veterans’ Affairs Partner Service Pension with Carer Allowance</td>
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<td></td>
<td>• Department of Veterans’ Affairs Carer Service Pension.'</td>
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<tr>
<td><strong>Parenting Payment</strong></td>
<td><strong>Definition</strong></td>
<td><strong>Inclusions/ exclusions</strong></td>
<td><strong>Purpose of Act and definition</strong></td>
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<td>‘Parenting Payment is paid to the main carer of a child. Only one parent or guardian can receive the payment. You may be eligible to receive Parenting Payment if you: • are single and care for at least one child aged less than eight • have a partner and care for at least one child aged less than six Parenting Payment is income tested, so the amount you may receive depends on your situation. Residency requirements also apply. You may need to participate in certain activities to get the payment, depending on your situation and the age of your youngest child. The activities could include applying for jobs; taking a course or other study; or working part-time.’</td>
<td>Eligible parents are main carers of child under age 6 if in a couple or age 8 if in a one parent family.</td>
<td>‘Parenting Payment provides income support to parents or guardians to help with the cost of raising children.’</td>
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<tr>
<td>Family Tax Benefit A</td>
<td>Definition</td>
<td>Inclusions/ exclusions</td>
<td>Purpose of Act and definition</td>
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<tr>
<td>'You may be eligible for Family Tax Benefit Part A if you have:</td>
<td>Parents are individuals with responsibilities for a child up to aged 16 or a dependent student 16-24 years at least 35 per cent of the time. Restrictions based on income test. Residency requirements.</td>
<td>'Family Tax Benefit (FTB) is a payment that helps with the cost of raising children. It is made up of two parts: Family Tax Benefit Part A and Part B.'</td>
<td>Parents defined by age of child and dependency level of child and time spent caring.</td>
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<td>• a dependent child under 16 years of age</td>
<td>or</td>
<td>or</td>
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<td>• a dependent child 16-20 years of age who:</td>
<td>• a dependent full-time student 21–24 years of age. You will also need:</td>
<td>• has completed a Year 12 or equivalent qualification</td>
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<td>- has undertaken full-time education or training in an approved course leading to a Year 12 or equivalent qualification</td>
<td>• to have care of the child for at least 35 per cent of the time and</td>
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<td>- has an acceptable study load or</td>
<td>• to satisfy the income test. You may not be eligible for Family Tax Benefit Part A if your child earns over the child-income limit.'&quot;</td>
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<td>- has been granted an exemption from this requirement</td>
<td>or</td>
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<td>or</td>
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<td>• a dependent full-time student 21–24 years of age. You will also need:</td>
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<tr>
<td><strong>Family Tax Benefit B</strong></td>
<td><strong>Definition</strong></td>
<td><strong>Inclusions/ exclusions</strong></td>
<td><strong>Purpose of Act and definition</strong></td>
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<td>‘You may be eligible for Family Tax Benefit Part B if: you have • a dependent child under 16 years of age, or • a dependent full-time secondary student up until the end of the calendar year in which they turn 18, and • you have care of the child for at least 35 per cent of the time. The rate of Family Tax Benefit Part B is based on an income test. You and your partner cannot receive Family Tax Benefit Part B during a Paid Parental Leave [1] period, but it may be paid after the Paid Parental Leave period ends. Note: You cannot receive Family Tax Benefit Part A or Part B for a child receiving a pension, payment, or benefit such as Youth Allowance.’ Eligible carers: If you are a parent, guardian, foster carer, grandparent, or other carer, you may be eligible for Family Tax Benefit Part B.’</td>
<td>Parents are individuals with responsibilities for a child up to aged 16 or a dependent student up to 20 years at least 35 per cent of the time. Restrictions based on income test. Residency requirements.</td>
<td>As above.</td>
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<td>Definition</td>
<td>Inclusions/ exclusions</td>
<td>Purpose of Act and definition</td>
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<td><strong>Child Care Benefit</strong></td>
<td>‘You may qualify for Child Care Benefit if you meet all of the following:</td>
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<td>• you use approved or registered child care and</td>
<td>Parental responsibility defined on the basis of financial responsibility for child care fees.</td>
<td>‘Child Care Benefit helps cover the cost of child care, including long day care, family day care, occasional day care, outside school hours care, vacation care, pre-school, and kindergarten. It may also help cover the cost of child care provided by grandparents, relatives, friends or nannies.’</td>
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<td></td>
<td>• you are responsible for paying the child-care fees for your child and</td>
<td>Restrictions based on residency and income. Restrictions on number of eligible hours based ‘work, training, study’ test.</td>
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<td>• your child is immunised (or on an immunisation catch-up schedule) or</td>
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<td>is exempt from the immunisation requirements and</td>
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<td>• you meet the residency requirements and</td>
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<td>• you meet the income test.’</td>
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<td><strong>Child Care Rebate</strong></td>
<td>‘You may be eligible for Child Care Rebate if:</td>
<td>Parental responsibility defined on the basis of financial responsibility for child care fees.</td>
<td>‘Child Care Rebate is paid in addition to Child Care Benefit and covers 50 per cent of out-of-pocket child-care expenses, up to a maximum amount per child per year.’</td>
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<td>• you use a Child Care Benefit–approved child-care service and</td>
<td>Restrictions based on residency and income.</td>
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<td></td>
<td>• you are eligible for Child Care Benefit and</td>
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<td></td>
<td>• you and your partner meet the ‘work, training, study test’ or are exempt from it.’</td>
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<td>Inclusions/ exclusions</td>
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<td><strong>Paid Parental Leave Scheme</strong></td>
<td>‘You may be eligible if you: • are the primary carer of a newborn or recently adopted child from 1 January 2011 (A child’s primary carer is the person who is most meeting the child’s physical needs. This will usually be the birth mother of a newborn child or the initial primary carer of an adopted child. You are considered to be the primary carer of your child even if your child is in hospital); and • are an Australian resident; and • have met the Paid Parental Leave work test before the birth or adoption occurs; and • have received an individual adjusted taxable income of $150,000 or less in the financial year before the date of birth or adoption or date of claim, whichever is earlier; and • are on leave or not working, from when you become the child’s primary carer until the end of your Paid Parental Leave period.'</td>
<td>‘The Paid Parental Leave scheme provides financial support to eligible working parents of children born or adopted from 1 January 2011.’</td>
<td>Implied time definition of primary carer of child.</td>
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<td>Definition</td>
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<td>Dad and Partner Pay</td>
<td>‘You need to meet certain criteria to get Dad and Partner Pay. You may be eligible if you are the: • biological father of the child • partner of the birth mother • adopting parent • partner of the adopting parent • parent in a surrogacy arrangement • partner of a parent in a surrogacy arrangement, or • same-sex partner of the birth mother, biological father or the adopting parent. And, you: • provide care for a child born or adopted from 1 January 2013 • are an Australian resident • meet the work test, which requires you to have worked for: - at least 10 of the 13 months before the date your Dad and Partner Pay period starts, and - at least 330 hours in that 10 month period (just over a day a week), with no more than an eight week gap between two consecutive working days</td>
<td>‘Dad and Partner Pay is a new payment to support dads or partners caring for a newborn or recently adopted child.’</td>
<td>Recognises roles of both parents.</td>
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<td>Definition</td>
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<td>- had an individual adjusted taxable income of $150,000 or less in the financial year either before the date of your claim or the date your Dad and Partner Pay period starts (whichever is earlier), and</td>
<td>- are on unpaid leave or not working during your Dad and Partner Pay period.</td>
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<td>Your Dad and Partner Pay period is the time that you take off work and get Dad and Partner Pay for (up to two weeks). Dad and Partner Pay can’t be transferred to another person.</td>
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<td>If you’re a birth mother, you are not eligible for Dad and Partner Pay but you may be eligible for Parental Leave Pay or Baby Bonus. The birth mother does not need to receive Parental Leave Pay for the father or partner to get Dad and Partner Pay.</td>
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<td><strong>Baby Bonus</strong></td>
<td><strong>Definition</strong></td>
<td><strong>Inclusions/ exclusions</strong></td>
<td><strong>Purpose of Act and definition</strong></td>
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<td>‘Baby Bonus may be paid to your family following the birth (including stillbirth) or adoption of a child if: • you are eligible for Family Tax Benefit (FTB) for the child (disregarding the FTB income test) within six months of the child’s birth or after an adopted child enters your care before turning 16 years old or • you are claiming for a child other than your own and you started caring for the child within six months of the child’s birth and are likely to continue caring for the child for at least six months and • you or your partner are the primary carer of the child and • you meet the residency requirements for FTB within six months of the child’s birth or entry into care and • you meet the Baby Bonus income test and • you have not received Parental Leave Pay for the child and • you make your claim no later than one year after the birth of the child or after the adopted child enters your care.’</td>
<td>Parent is defined as the person who is meeting most of the child’s physical needs. Restrictions based on income and residency.</td>
<td>‘Baby Bonus is a payment that helps with the costs of a newborn baby or adopted child.’</td>
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</table>
### Statistical data collection definitions

<table>
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<th>Definition</th>
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</table>
| **Primary carers**
(Survey of Disability, Ageing and Home care) | 'A primary carer is a person who provides the most informal assistance, in terms of help or supervision, to a person with one or more disabilities. The assistance has to be ongoing, or likely to be ongoing, for at least six months and be provided for one or more of the core activities (communication, mobility and self-care). In this survey, primary carers only include persons aged 15 years and over for whom a personal interview was conducted. Persons aged 15 to 17 years were only interviewed personally if parental permission was granted.' | All types of relationship included. No co-residency or income restrictions. Restrictions based on severity of care need and main responsibility for care and duration of care. | Restriction to one primary carer per care recipient. Restrictions based on severity of care need and main responsibility for care and duration of care. Does not define an amount of time or intensity of care but does define the duration of care required. |
<table>
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<tr>
<th>Carer (Survey of Disability, Ageing and Home care)</th>
<th>Definition</th>
<th>Inclusions/ exclusions</th>
<th>Purpose of Act and definition</th>
<th>Limitations/ advantages for the purposes of this project</th>
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<tbody>
<tr>
<td>'A person of any age who provides any informal assistance, in terms of help or supervision, to persons with disabilities or long-term conditions or persons who are elderly (i.e. aged 60 years or over). This assistance has to be ongoing, or likely to be ongoing, for at least six months. Assistance to a person in a different household relates to ‘everyday types of activities’, without specific information on the activities. Where the care recipient lives in the same household, the assistance is for one or more of the following activities: • cognition/emotion • communication • health care • household chores • meal preparation • mobility • property maintenance • reading or writing • self care • transport.'</td>
<td>All types of relationship included. No co-residency or income restrictions. Restrictions based on types of tasks, support is provided for and duration of care.</td>
<td>Restrictions on types of support given, but fairly broad inclusions. Does not define an amount of time or intensity of care but does define the duration of care required.</td>
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<td>Parent/Child Census 2011</td>
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<tr>
<td><strong>Definition</strong></td>
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<td>Parent</td>
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<td>‘A parent is a natural, adoptive, step, foster mother or father of a child, or a person who is assigned as a nominal parent. This person must be usually resident in the same household as the child.’</td>
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<td>Child</td>
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<td>‘This is a person of any age who is a natural, adopted, step, foster or nominal son or daughter of a couple or lone parent, usually resident in the same household. A child is also any individual under 15, usually resident in the household, who forms a parent-child relationship with another member of the household. This includes otherwise related children less than 15 years of age and unrelated children less than 15 years of age. In order to be classified as a child, the person can have no identified partner or child of his/her own usually resident in the household. A separate family in the household is formed in this instance. If a person is aged under 15 and has a partner and/or a spouse these relationships are not recorded.’</td>
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<td><strong>Inclusions/ exclusions</strong></td>
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<td>Restrictions based on relationship and child’s age and needs.</td>
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<td><strong>Purpose of Act and definition</strong></td>
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<td><strong>Limitations/ advantages for the purposes of this project</strong></td>
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<td>Does not define amount of care responsibilities for dependent child.</td>
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<tr>
<td>Definition</td>
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</table>
| There are three types of children identified by the Relationship in Household classification:  
• child under 15;  
• dependent student; and  
• non-dependent child.  
Children aged under 15 years and dependent students are together referred to as dependent children.  
**Dependent child:**  
A dependent child is a person who is either a child under 15 years of age, or a dependent student (see Dependent student below).  
To be regarded as a child the person can have no identified partner or child of his/her own usually resident in the household.  
**Dependent student:** This refers to a natural, adopted, step, or foster child who is 15-24 years of age and who attends a secondary or tertiary educational institution as a full-time student and for whom there is no identified partner or child of his/her own usually resident in the same household.  
**Non-Dependent child:** This refers to a natural, adopted, step or foster child of a couple or lone parent usually resident in the household, who is aged 15 years and over and is not a full-time student aged 15-24 years, and who has no identified partner or child of his/her own usually resident in the household. |
2.4 Defining unpaid care for this project

Table 2 outlines elements of the definition of carer and parent to be used in this project. Due to the range of mechanisms proposed there will be no precise definition of carers and parents described at this stage as the criteria for each element will have to be defined for each policy and mechanism.

Broadly speaking the definition of unpaid carers (parents and carers) for this project will be as follows:

- Parents: any parent (adoptive, biological or step parent), grandparent, foster parent or guardian with caring responsibilities for a dependent child.
- Carers: provision of care for a family member or friend with disability, chronic illness or frailty due to older age, either co-resident or in a kinship or friendship network. ‘Persons with disability include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others’.\(^{32}\)
- This definition includes parents of children with disability, who have both parental roles and other unpaid caring roles.
This definition excludes the unpaid caring work of daily social reproduction, or the domestic work, undertaken by women for male partners. It also excludes the unpaid caring work undertaken by paid care workers who engage in work above and beyond their employment contract, due to personal commitments to service quality and their care relationships. In addition, the definition excludes unpaid caring work undertaken in a volunteer capacity. It is acknowledged that these forms of unpaid caring work are, also, along with the types of care involved in this investigation, essential to the functioning of the market economy, a health society and the health care system.

In considering mechanisms to recognise and value unpaid care, the salience of the critique of the concept of care from the disability rights perspective is noted. This critique proposes that focusing on the care provider, rather than the care receiver, may be disempowering and oppressive for people with disability. Any definition of unpaid caring for the purpose of fostering gender equality in workforce participation and retirement income also needs to take account of the reciprocity and interdependence in care relationships and the needs of the person requiring support for opportunities for choice, self-determination and control.

Table 2: Potential criteria for definitions of parents and carers for the purpose of defining eligibility for mechanisms

<table>
<thead>
<tr>
<th>Element</th>
<th>Potential Eligibility Criteria</th>
</tr>
</thead>
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<tr>
<td><strong>Carers</strong></td>
<td></td>
</tr>
<tr>
<td>Type of relationships</td>
<td>All care relationships</td>
</tr>
<tr>
<td>Types of care needs</td>
<td>Criteria defining level of care need of person to be defined in specific context of each policy or mechanism</td>
</tr>
<tr>
<td>Level of care contributions</td>
<td>Care responsibilities that impede workforce participation.</td>
</tr>
<tr>
<td>Location of care</td>
<td>Co-residential or ex-residential</td>
</tr>
<tr>
<td>Restrictions on eligibility</td>
<td>To be determined for each policy or mechanisms.</td>
</tr>
<tr>
<td><strong>Parents</strong></td>
<td></td>
</tr>
<tr>
<td>Type of relationships</td>
<td>Care responsibilities for a dependent child – could include full-time students and adult children with disability</td>
</tr>
<tr>
<td>Types of care needs</td>
<td>Needs of dependent children</td>
</tr>
<tr>
<td>Level of care contributions</td>
<td>Minimum threshold of parental responsibilities to be defined</td>
</tr>
<tr>
<td>Location of care</td>
<td>Co-residential and ex-residential depending on context of mechanism</td>
</tr>
<tr>
<td>Restrictions on eligibility</td>
<td>To be determined for each policy or mechanisms.</td>
</tr>
</tbody>
</table>
3. Technical Paper B: Prevalence of unpaid care in Australia

This paper outlines findings from a review of published data on the prevalence of unpaid care in Australia; undertakes further gender analysis of the unpaid caring roles taken on by men and women; and identifies gaps in the data about unpaid care in Australia.

3.1 Prevalence of unpaid carers

(a) Carers of people with disability, chronic illness or frailty

Rates of caring for people with disability, chronic illness or frailty in Australia can be estimated from a number of sources including the ABS Surveys of Disability, Ageing and Carers (SDAC), the ABS Census of Population and Housing (Census) (from 2006 onwards), the ABS General Social Survey (2006 onwards), the ABS Time Use Surveys (TUS) and the Household Income and Labour Dynamics in Australia (HILDA) Survey. The surveys provide different estimates of the number of carers in Australia due to differences in scope and methods of identifying carers within each of the surveys.

The most reliable figures on care for people with disability, chronic illness or frailty due to older age are found in the dedicated survey that seeks to identify carers, the ABS SDAC. The ABS SDAC estimates indicate that, amongst the Australian population in 2009, 12 per cent or 2.6 million people had caring responsibilities for a family member or friend with an ongoing disability, long-term illness or frailty due to older age.

In the populations aged 15 years and over, the rates of caring were higher for women (13 per cent) compared with men (11 per cent). Caring across the lifecycle increases with age and is gendered, with women having higher rates of unpaid care provision in all age groups between the ages of 18 and 74 years, encompassing the main period of paid employment. In the group over 74 years old, men had higher rates of care provision than women.

The ABS SDAC also identifies a category of carer known as a ‘primary carer’. A primary carer is a person who provides the most informal assistance, in terms of help or supervision, to a person with one or more disabilities or aged 60 years and over. The assistance has to be ongoing, or likely to be ongoing, for at least six months and be provided for one or more of the core activities (communication, mobility and self-care). This category of carer thus relies on a definition of the amount of care provided and the level and type of limitation of the person who is receiving care. While this category of carers clearly represents a group who are likely to provide intensive care and the SDAC provides extensive information on the care situation and the impact of care for primary carers, this category is also quite restrictive with respect to the number and type of carers it includes. For example, not all carers of partners, who, given the nature of obligation between partners, are likely to be the main carer, will be part of this category if their partner does not require assistance for a core activity. Women have higher rates of primary care-giving, with 5.5 per cent of women aged 15-64 years undertaking this role compared with 2.2 per cent of men.

Overall, among the population aged 15-64 years, 13.6 per cent or 1.95 million people (1.13 million women and 0.82 million men) were carers. The gender gap in rates of overall care provision commences at age 25 years and is greater in older age amongst this population, with women (Figure 1).
(b) Prevalence of parental roles

Figure 2 shows the proportion of men and women aged 15-64 years who have children aged under 15 years across the life cycle. Women are more likely than men to be parents of young children when they are under 45 years of age, with the largest gap occurring at the prime working age period of 25-34 years.
Figure 2: Proportion of men and women aged 15-64 years with children aged under 15 years by age, 2009


(c) Prevalence of unpaid care for children

The presence of one’s own young children, however, does not necessarily translate into the responsibility to provide care for children. Figure 3 outlines the proportion of men and women who provided any unpaid care to children (own or other) in the two weeks preceding the Census 2011. Overall, nearly one in four men (23.6 per cent) and one in three women (31.8 per cent) indicated that they provided care for their own or other children in the past two weeks. Women have higher rates of unpaid child care provision across all age groups, with the largest gender gaps in the prime working age period of 25-44 years. In the 35-44 years age group, nearly two-thirds of women (64.2 per cent) had provided child care. There is a significant gender gap in the provision of unpaid child care in the 55-74 years age group, possibly an indication of the proportion of older women who are providing unpaid care to grandchildren. Around one in five older women in this age group had provided care for children (woman aged 55-64 years, 23.3 per cent and 65-74 years, 19.2 per cent). In 2011 close to 2 million men and 2.8 million women aged 15 years and over provided unpaid child care to children under 15 years of age in the two weeks prior to the Census date.42
Care for dependent children is not only undertaken by biological, step or adopted parents; grandparents contribute significantly to the care of children both as primary caregivers and as the largest providers of informal child-care, while estimates suggest that in 2010, there were 8049 households with foster care placements.

(d) Overall rates of unpaid care

Figure 4 considers the proportion of the population aged 15-64 years who have responsibility for either care for a person with disability, frailty or illness and/or is a parent with a child aged under 15 years. The ABS SDAC 2009 is used to estimate the overall figures as it has the most robust data on carers of people with disability, illness or frailty. Based on 2009 data, at any point in time one in three men (34.8 per cent), or an estimated 2.5 million men, and two in five women (41.2 per cent of women), or nearly 3 million women, have responsibilities for unpaid care. Rates of unpaid care responsibilities are highest for men and women in the 25-54 years age group, and particularly in the 35-44 years age group where 73 per cent of women and 64 per cent of men had some form of unpaid care responsibility.
Figure 4: Overall proportion of men and women aged 15-64 years with unpaid care responsibilities by age


3.2 Time spent in unpaid care

(a) Time spent in care for people with disability, chronic illness, or frailty

The rates of unpaid caring do not provide an indication of the gendered nature of the intensity of care provision. In the ABS SDAC the number of hours spent in care for people with disability, chronic illness or frailty across the lifecycle is available for primary carers only. Estimates from the ABS SDAC 2009 indicate that 49 per cent of men and 54 per cent of women provide 20 hours or more per week of care. The reported number of hours providing care is likely to be an underestimate due to carers not recognising some of the activities that they undertake for the person for whom they care as actual caring activities.43

Figure 5 shows the gendered nature of the intensity of care for primary carers, with women being more likely to provide more than 40 hours of care per week at all points across the lifecycle. Nearly half of all female primary carers aged 35-44 years were providing more than 40 hours per week of care.
Figure 5: Primary carers aged 15-64 years: proportion spending 40 hours per week or more in care-giving by gender and age, 2009

Source: Generated from ABS, Survey of Disability, Ageing and Carers, Australia 2009 (2009), Basic CURF, Version 3, CD-Rom. Findings based on SPRC’s analysis of ABS CURF data. Note: denominator excludes the 'Don’t know' responses which are 1-2 per cent of primary carers.

(b) Time spent caring for children

Gender inequalities in time spent caring for children and gender differences in the type of care provided by mothers and fathers in Australia have been well documented. In Australia in 2006, overall, female parents spent 8 hours and 33 minutes per day in caring for children aged under 15 years, compared to 3 hours and 55 minutes for male parents. Care responsibilities are more intense when children are younger, with female parents being engaged in parental child care for an average of 11 hours and 25 minutes per day when a child was aged 5 years and under, compared to just over 5 hours per day when the youngest child was aged 6-14 years (on average). The comparable figures for male parents were 4 hours 59 minutes when the youngest child was aged 5 years and under and 2 hours and 30 minutes when the youngest child was aged between 6-14 years.

3.3 Caring for people with disability, chronic illness or frailty due to older age

(a) Relationship to person receiving care

The gendered nature of the obligation to provide care may be evident in the types of care relationships that men and women take on. Comprehensive data on relationships of all carers and care recipients is challenging to extract from the ABS SDAC, as some carers may be caring for more than one person, although the ABS SDAC does provide data on the relationship to the main recipient of care for primary carers. Men and women are identified in this data as taking on caring roles for different types of recipients. Existing analysis shows that women comprise 92 per cent of primary carers for children with disability, 70 per cent of the primary carers for parents and around half (52 per cent) of the primary carers of partners. Men constitute a significant proportion (48 per cent) of the primary carers for partners, particularly in older age.
The types of care relationships for carers aged 15-64 years among primary carers in the ABS SDAC 2009 differ by gender. Men were most likely to be caring for their spouse (55 per cent) or a parent (31 per cent). This contrasted with the care relationships of female primary carers, around one third (34 per cent) of whom were caring for a child with disability or long-term illness, while one quarter (27 per cent) cared for their parent, and a further one quarter cared for their spouse (26 per cent). The gender profile of caring relationships differed according to age: over half the younger women primary carers (under 45 years) provided care to a child with disability or illness, whereas the most common forms of care for female primary carers aged 45 years and over were caring for a spouse or parent (Figure 6). By contrast, male primary carers in both age groups, but particularly the older age group were most likely to be caring for a spouse. A significant proportion of male primary carers in both age groups cared for a parent.

Figure 6: Primary carers aged 15-64 years: relationship to main recipient of care by gender and age

![Diagram showing the percentage of male and female primary carers aged 15-64 years in 15-44 years and 45-64 years, by relationship to main recipient of care (Spouse, Parent, Child, Other).]

Source: Generated from ABS, Survey of Disability, Ageing and Carers, Australia 2009 (2009), Basic CURF, Version 3, CD-Rom. Findings based on SPRC’s analysis of ABS CURF data. Note: ‘Parent’ denotes that a carer is caring for a parent and ‘Child’ denotes that a carer is caring for a child.

(b) Duration of care for people with disability, chronic illness or frailty

Australia lacks comprehensive data on the caring histories and trajectories of individuals. ABS SDAC provides data on the duration of care to the current main recipient of care, but this does not provide adequate information about how long individuals have taken on caring roles in the past or how they have combined these caring roles for a person with disability with a parental caring role. Sixty-one per cent of female primary carers and 52 per cent of male primary carers had provided care for 5 years or more. Reflecting their age group, primary carers aged 45 years and over were more likely than younger carers to have provided care for very long periods: 8 per cent of male primary carers and 14 per cent of female primary carers in this age group had provided care for over 20 years. Perhaps reflecting parental obligations more broadly, 71 per cent of female primary carers caring for children with disabilities had provided care to this child for more than 5 years and 39 per cent had provided care for over 10 years.
3.4 Unpaid care amongst Aboriginal and Torres Strait Islander Peoples

(a) Caring for children

Data from the 2006 Census show that around one third (32.9 per cent) of Aboriginal and Torres Strait Islander peoples aged 15 years and over had provided unpaid child care for their own or another person’s child/ren within the past two weeks. Parental care was higher amongst women, with 40.5 per cent providing such care, while one quarter (24.7) of males provided parental care. The rates of parental caring were highest in the 25-44 years age groups where between 54-58 per cent of women and 35-38 per cent of men provided unpaid care for children (Figure 7).

Figure 7: Aboriginal and Torres Strait Islander Peoples: provision of unpaid care for children aged less than 15 years in the previous two weeks by sex and age, Census 2006

(b) Care for people with disability, illness or frailty

Existing research in Australia suggest that the concepts of disability and caring in Aboriginal and Torres Strait Islander communities may differ from concepts used by policy makers and statistical definitions. In addition the research suggests that many Aboriginal and Torres Strait Islander people may not identify with the term carer as the caring role is part of family and community obligations and is shared amongst the community. National data on caring for people with disability, chronic illness or frailty due to older age amongst Aboriginal and Torres Strait Islander peoples is currently limited to the 2006 and 2011 Census. The data from the Census 2006 and Census 2011 indicate that unpaid caring for people with a core activity limitation is more prevalent in Aboriginal and Torres Strait Islander communities than the non-Indigenous population. In 2006, 13.2 per cent of the Aboriginal and Torres Strait Islander population indicated that they provide care compared with 11.2 per cent of the non-Indigenous population. The explanations for the higher rates of caring in these communities are likely to include the higher rates and earlier onset of disability and illness among Aboriginal and Torres Strait Islander communities. In the Census 2011 overall, 12.9 per cent of Aboriginal and Torres Strait Islander peoples aged 15 years and over provided unpaid care. Higher rates of caring were evident for women than men in these communities, with one in 10 men (10 per cent) and one in seven women (15.6 per cent) providing care. Rates of caring increased with age, peaking for women and men in the aged group 35-64 years, in which around 20 per cent of women and 13 per cent of men were carers.
3.5 Unpaid care amongst culturally and linguistically diverse communities

(a) Caring for children

In the ABS SDAC 2009, 29 per cent of men and 33 per cent of women aged 15-64 years who spoke a language other than English at home had a child aged under 15 years.56

(b) Care for people with disability, illness or frailty

The ABS SDAC 2009 indicates that 26 per cent of carers were born overseas and that 8 per cent of carers aged 15 years and over reported speaking a language other than English at home.57 Data from the Census 2006 indicates that just over one in ten or 11.2 per cent of those who spoke a language other than English at home were carers, a rate that was the same as those who spoke English only at home.58 Men and women who were born in Southern and Eastern Europe and North Africa and the Middle East had the highest rates of caring at around 13.0 per cent.59

3.6 Data gaps

Key gaps in data on unpaid caring in Australia include:

- Gender analysis of all aspects of unpaid caring in regular ABS publications of data on unpaid caring across the life cycle from all ABS sources.
- Comprehensive gender analyses of the time spent in unpaid caring roles, both parental care and care for people with disability, chronic illness or frailty across the lifecycle.
- Research on the concept and impact of unpaid care, both parental care and care for people with disability, chronic illness or frailty, in Aboriginal and Torres Strait Islander and culturally and linguistically diverse communities.
- Comprehensive data and gender analyses on care relationships and networks of care for children and people with disability, chronic illness or frailty.
4. Technical Paper C: The impact of unpaid care on workforce participation in Australia

This paper reviews the data on the workforce participation of parents and carers and the number of employees who have unpaid caring responsibilities.

4.1 Workforce participation of parents

(a) Labour force status of parents by gender

In Australia in 2011, according to estimates from the Labour Force Survey, there were an estimated 2.3 million couple families and 632,800 lone parent families with dependants (defined as children aged under 15 years or with children aged 15-24 years who are full-time students and living with their parents). In opposite-sex couple families with dependents, 90 per cent of fathers were employed, predominantly in full-time work, whereas 67 per cent of mothers were in paid employment, with only 28 per cent of this group in full-time employment.

(b) Labour force status of parents by intensity of care

The rate of full-time employment of mothers varied with the age of the youngest child with only 18 per cent of mothers with children under the age of 5 years in full-time employment, a figure that increased to 42 per cent of mothers who had dependent children aged between 15-24 years. Women comprised 83 per cent of all lone parent families. Lone fathers had higher rates of employment than lone mothers, with lone parents with young children also having the lowest rates of full-time employment.

Existing studies show that the gender gap in labour force participation rates is most evident when children are under the age of six years, with the labour force participation rates of female parents being 39 percentage points lower than male parents who had a youngest child under six years. When employed, female parents are more likely to work part-time than male parents: 66 per cent of employed females with children aged under six years worked part-time compared to seven per cent of employed males with children of this age. The reduction in hours of paid work for employed female parents continues for a long duration: for parents with a youngest child aged 6-14 years the rates of part-time employment were 55 per cent for female employees compared to 8 per cent for employed male parents.
The gendered responsibility for care of children and the impact of the intensity of care responsibilities on workforce participation is evident with the presence of young children. Estimates from the HILDA survey indicate that while fathers’ labour force participation remains at around 90 per cent, mothers’ labour force participation is 58 per cent with one child aged under five years and reduces to 39 per cent if there are two or more children aged under 5 years (Figure 1). The gendered impact on rates of full-time employment is even more pronounced. Rates of full-time employment for fathers stay around 85 per cent whereas for mothers of one child under 5 the rate is 21 per cent, which further reduces to 9 per cent for mothers of two children aged under 5 years (Figure 2).

Figure 1: Men and women aged 15-64 years: Employment rates by sex and age of children

Source: Generated from HILDA release 10.
Figure 2: Men and women aged 15-64 years: Full-time employment rates by sex and age of children

Source: Generated from HILDA release 10.
4.2 Workforce participation of carers of people with disability, chronic illness and frailty

(a) Labour force status of carers by age and sex

Previous research has noted the lower rates of participation in employment of carers for people with disability, illness, or frailty compared with their non-carer peers. While some researchers have suggested that the lower rates of participation in employment by carers may be due to socio-demographic factors aside from caring that reduce carers’ employability, recent research from the OECD using Australian data has indicated that ‘carers are less likely to be in paid employment even after controlling for employment status in the previous year and other individual observed and unobserved characteristics’. Figure 3 outlines the employment rates of men and women by their caring status across the ‘traditional working age’ lifecycle.

Figure 3: Men and women aged 15-64 years: Employment rates by age, sex and carer status

Female primary carers have the lowest rates of employment over the lifecycle, followed by male primary carers and then female carers. Less than 60 per cent of female primary carers are employed at any point across the lifecycle.
(b) Full-time and part-time work

Reducing hours of work is one strategy that carers use to undertake both paid work and unpaid care commitments, although this imposes an earnings penalty with subsequent impacts on superannuation contributions and retirement incomes. Across most countries in the OECD, except northern Europe, caring leads to reduced hours of employment. In Australia in 2009, less than 23 per cent of female primary carers were in full-time employment at any point across the lifecycle, compared with between 25-45 per cent of women who were not carers, 30-52 per cent of men who were primary carers and 57-85 per cent of men who were not carers (Figure 4). The gap in full-time employment rates will translate into a large gender gap in earnings.

Figure 4: Men and women aged 15-64 years: Proportion working full-time by age, sex and carer status

(c) Employment status of carers by intensity of care

Analysis for the OECD suggests that ‘increasing hours of care by 1% results in carers being more likely to stop working by 10%’. Further, caring for more than 20 hours per week is associated with a decrease in the employment rates of primary carers, particularly for men (Figure 5). A further decrease in employment rates is noted for all groups of primary carers who are caring for 40 hours a week or more: less than 30 per cent of primary carers aged 45 years and over who provided 40 hours per week or more of care were in paid employment.

Figure 5: Primary carers aged 15-64 years: Employment rates by age, sex and numbers of hours caring per week

(d) Employment status of carers by relationship to care recipients

The nature of the caring relationship may affect the sense of obligation and the social expectation around caring roles and thus impact on the capacity to undertake employment alongside the caring role. Female primary carers providing care to a partner had the lowest employment rates with less than 45 per cent of these groups in paid employment (Figure 6).

Figure 6: Primary carers aged 15-64 years: Employment rates by age, sex and relationship to main care recipient

Source: Generated from ABS, Survey of Disability, Ageing and Carers, Australia 2009 (2009), Basic CURF, Version 3, CD-Rom. Findings based on SPRC’s analysis of ABS CURF data. Note: ‘Parent’ denotes carer is caring for a child and ‘Child’ denotes carer is caring for a parent.
4.3 Number of employees with caring responsibilities

The gendered rates of employment for parents and carers will be reflected in the statistics on the number and proportion of employees who have unpaid care responsibilities. Tables 1 outlines the number and proportion of employees who have unpaid caring responsibilities as either parents or unpaid carers.

(a) Parental care responsibilities

In SDAC 2009, an estimated 3.21 million or 29.9 per cent of employees aged 15-64 years were parents of children aged under 15 years. This included 1.76 million men and 1.45 million women in employment (30.3 per cent and 29.3 per cent of male and female employees respectively).

(b) Care responsibilities

In ABS SDAC 2009, nearly 1.3 million (comprising 695 thousand women and 602 thousand men) or 12 per cent of all employees aged between 15 and 64 years had care responsibilities for people with disability, illness or frailty due to older age. Overall 14 per cent of female employees and 10 per cent of male employees provided care. Rates of caring among employees increased with age for both men and women. Just seven per cent of young employees aged 15-24 years had care responsibilities while around one in five female employees and 15 per cent of male employees aged 45 years and over provided care.
(c) All unpaid care responsibilities – parents and carers

Overall, 4.1 million employees or 38.2 per cent of employees had unpaid caring responsibilities. Nearly 2.2 million male employees and 1.9 million female employees were either parents or carers.

Table 1: Employees with unpaid care responsibilities sex and type of care, 2009

<table>
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<tr>
<th></th>
<th>Parents of children under 15 years</th>
<th>Carers of people with disability, chronic illness or frailty</th>
<th>Total unpaid care: parents and carers</th>
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<tr>
<td>Male employees</td>
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5. Technical Paper D: The impact of unpaid care on retirement incomes in Australia

5.1 Current retirement income architecture

(a) Introduction

The Australian retirement income system is made up of three pillars or tiers: a publicly funded social assistance-style age pension that was introduced in 1908 and has formed the bedrock of Australia's retirement income system; a mandated occupational superannuation scheme that was introduced in 1992 that also has wide coverage (but great disparities in value); and additional voluntary contributions or savings, which only a small proportion of wealthier individuals have access to.

(b) Age pension

The central pillar of Australia's retirement income system is the social assistance-style public age pension. The age pension has been the cornerstone of Australia's retirement income architecture throughout the twentieth and twenty first centuries. Coverage of the age pension is high at around 85 per cent and Treasury projections suggest that in 2050 up to 70 per cent of individuals will still be in receipt of a full or part pension. The public age pension is non-contributory and is funded from general taxation revenue. Individuals are entitled once they reach the age of 65 for men and 64.5 for women (rising to 67 between 2017 and 2024) and provided they meet a means test.

The means test includes both an income and an assets test and pension entitlement is based on whichever of the tests results in the lower level of payment. The family home is exempt from the assets test. Individuals may have income and assets up to a minimum threshold before it begins to affect their pension entitlement. Between the minimum threshold and a maximum threshold, the individual is entitled to a part pension which decreases as the value of their income or assets increases. The maximum thresholds are high, with pension eligibility cutting out at an income of $1,863 per fortnight for a single and $2,546 per fortnight for a couple or assets of $696,250 in excess of the family home for an individual homeowner and $1,032,500 for a couple (for non-homeowners, these thresholds are $835,750 and $1,172,000 respectively). Under a scheme called the Work Bonus, individuals in receipt of an age pension can have the first $250 of their fortnightly income earned from paid work disregarded for the purposes of the income test. This is designed to provide an incentive for individuals to remain in the workforce after reaching pension age.
The value of the pension is flat rate, currently set at a fortnightly rate of $695.30 for a single and $524.10 per person for members of a couple. The value of the pension is reduced as individuals have income or assets in excess of the minimum threshold. Recipients of the age pension who are in rental accommodation may also be eligible for Rent Assistance, an additional fortnightly payment based on the cost of their rent and on their living circumstances. The value of the pension includes a ‘pension supplement’ that incorporates previously separate supplements for: the Pharmaceutical Allowance, the Utilities Allowance, the Telephone Allowance, and the GST Supplement. People of age pension age whose incomes preclude them from access to the age pension but that fall below $50,000 for a single or $80,000 for a couple are entitled to a Commonwealth Seniors Health Card. A Commonwealth Seniors Health Card provides subsidies for pharmaceuticals and some health costs (such as GP visits) and transport. Commonwealth Seniors Health Card holders are also entitled to the Seniors Supplement, a quarterly payment to provide assistance with bills such as energy and telephone bills and car registration. The payment is $842.40 per annum for an individual and $643.40 per annum for a member of a couple.74

There is also an incentive scheme set up to encourage individuals to delay claiming the age pension. Under the scheme – labelled the Pension Bonus Scheme – for each year that an individual decides to continue working and defer claiming the age pension, they accrue a bonus that they can claim in the form of a lump sum when they leave the workforce and claim the age pension. The value of the bonus increases significantly for each year that the individual defers claiming the age pension, up to a maximum of five years.

The family home, which is exempt from the assets test on the age pension, provides a great deal of security for a large number of those who have retired from the workforce (particularly women) and for this reason it has been described by some as an additional pillar of Australia’s retirement income system.75

(c) Compulsory occupational superannuation

Since 1992, Australia has had a second major pillar in its retirement income system in the form of a fully-funded, mandated occupational superannuation scheme – the Superannuation Guarantee (SG).76 The SG mandates employers to pay a proportion of their employees’ wages into an approved superannuation fund. The employer contribution is set at nine per cent of an employee’s salary, rising to twelve per cent by 2020. A charge is placed on employers who do not contribute and the government uses the charge to fund a contribution made on behalf of the individual employee.77

(d) Contributing to superannuation

The scheme covers all employees and most employees: individuals between 18 and 69 years old and earning $450 or more (before tax) in a month are entitled to SG contributions from their employer. The employer pays nine per cent of the employee’s ordinary earnings up to a maximum threshold into an approved superannuation fund. The employer is not obliged to make superannuation contributions on the proportion of an employee’s earnings that falls above the earnings threshold, which is currently $45,750 per quarter.78

Low and middle income earners may also be eligible for the superannuation co-contribution. This measure is designed to augment the superannuation savings of low and middle income earners and to act as an incentive to save. The co-contribution involves the payment by the government of 50 cents into an individual’s superannuation savings for every dollar voluntarily contributed by the individual to their account in a given year, up to a limit of $500. In order to be eligible, the individual must be earning less than $46,920 per annum.79 The rate of co-contribution is calculated according to a scale based on an individual’s annual income. Individuals who have a total income of less than or equal to $31,920 are eligible for the full $500. For those earning between $31,920 and $46,920, the rate of co-contribution decreases until no co-contribution is payable.80 Superannuation contributions can also be made on behalf of a non-working spouse and a rebate is available for contributions made on behalf of a low income spouse.

(e) Taxation of superannuation

Superannuation is treated concessionally for taxation purposes in three ways. Superannuation contributions are subject to a flat rate tax of 15 per cent. This includes the mandatory nine per cent contribution and additional contributions made by individuals up to an annual cap. The annual cap on contributions that can receive concessional taxation treatment is $25,000 per annum for people under 50 and $50,000 per annum for those 50 and over. The rationale for this is that it provides older individuals with an opportunity to put larger amounts into their super as they get nearer to retirement and as their responsibilities for child-related expenses or mortgage repayments become lighter. The flat rate tax means that those in the higher tax brackets receive a considerable concession compared with the tax they would pay if this proportion of their wages were not contributed to super. Those in the lowest tax bracket (15 cents in the dollar), however, effectively receive no tax concession. Those earning below the tax free threshold (many of whom may not be entitled to have their employer pay the SG because they are unlikely to be earning about the minimum of $450 per month) but who choose to make contributions receive a tax penalty of 15 cents in the dollar for each dollar that they contribute to superannuation.81 In 2012, a change was introduced in an attempt to compensate for this, called the low income superannuation contribution. Here, those earning less than $37,000 per annum can receive a (government) contribution to their superannuation account at the rate of 15 per cent of their concessional superannuation contributions, up to the value of $500 per annum.82 Those exceeding the annual cap on concessional contributions pay 46.5 per cent tax on the sum in excess of the $25,000/$50,000 limit.
The income earned on the investment is also treated concessionally for tax purposes. The rate of tax on the annual interest or return on the investment is a flat rate 15 per cent. This is lower than what most individuals would be paying on their wages or on interest earned from other sources. Finally, an individual may pay tax when withdrawing their superannuation savings. If the super is drawn as a lump sum, the individual pays no tax up to a cap (on the first $165,000) and pays a flat rate 15 per cent tax on the balance in excess of the cap limit. If the super is drawn as an income stream it is treated as assessable income and taxed according to marginal tax rates but the individual receives a 15 per cent tax offset. However, if the individual defers drawing their super from the preservation age of 55 to the age of 60, the withdrawal – whether it is in the form of a lump sum or an income stream – will be tax free.

(f) Drawing down superannuation

Individuals are able to access their superannuation savings upon reaching a ‘preservation age’ of 55 (rising to 60 between 2015 and 2025) if they have retired. If the individual is still working, they must wait until the age of 65 to access their super but may continue to work and access their super simultaneously once they reach the age of 65. There are also ‘transition to retirement’ rules whereby an individual, once reaching the preservation age, may reduce their working hours and begin to draw a certain type of income stream from their superannuation to supplement their earnings from paid work.

Upon withdrawal, superannuation savings can be claimed as an income stream (or pension) paid by the superannuation fund or as a lump sum payment which may be used to purchase an annuity from a life insurance office or other financial institution.

(g) Voluntary superannuation contributions and savings

The third tier of the Australian retirement income system is voluntary private superannuation and savings. Voluntary superannuation refers to those contributions made to superannuation that take place in addition to mandatory contributions through the SG. These contributions, like those of the SG, are unable to be accessed until on or after preservation age. They are also encouraged through the provision of tax concessions. Other forms of voluntary savings, such as shares and investments, may also attract concessions for tax purposes.

5.2 Gender gap in retirement incomes and savings

The gender gap in retirement incomes and savings is caused by differences in lifetime earnings for men and women, and opportunities to contribute to occupational superannuation, which in turn depends on participation in employment, qualifications, hours worked, occupational and career trajectories and the gender wage gap.

Australian and international research has identified women’s unequal rates of unpaid caring responsibilities, and the impact these responsibilities have on workforce participation and career progression, as a fundamental contributor to the gap between women and men in retirement savings. Unequal workforce participation is not the only factor, as it has been estimated that even if women’s workforce participation rates were the same as men’s, gender gaps in superannuation would still exist due to lower lifetime earnings.

Previous research has highlighted the time and role commitments of care as a barrier to educational and workforce participation. Young people (particularly young women) who have caring responsibilities are less likely to be participating in either study or employment, than those who do not. This has implications for transitions into independent living and initial transitions into the workforce that may affect their future careers.

Caring roles may restrict both the time available to work and potential job choice due to constraints on travel time and inflexible workplace conditions and workplace cultures. The timing and length of years spent in part-time work and accumulated time out the workforce to provide care may lead to interrupted careers and to reduced earnings upon return to the workforce. Long-hours work cultures and lack of family friendly workplace arrangements in some occupations impede attempts to meet employment and caring roles. Individuals with caring responsibilities may be less well rewarded when they do undertake paid work, with evidence of a motherhood pay penalty and carer pay penalty.

Australia’s retirement income system is built on three pillars: the age pension subject to income and assets test; superannuation, the value of which is directly linked to lifetime earnings; and private savings. Australia’s superannuation system has been designed around male patterns of workforce participation and does not reflect the diversity and complexity of women’s dual unpaid caring and paid employment roles. Individuals who leave the labour force to provide child care or care have less opportunity to accumulate superannuation.
(a) Age pension

In 2009-10 only 10.3 per cent of women aged 65 years and over and 17.4 per cent of men had the main source of income at retirement as superannuation or annuity.29

In 2011, women comprised 56.5 per cent of the 2.23 million recipients of the age pension.28 Just over half (53.6 per cent) of female age pension recipients were single and 71.8 per cent of single age pension recipients are women.26

Sixty-one per cent of female age pensioners received the maximum rate, and 27.3 per cent of female age pension recipients were not home owners.29 In 2008, 28.9 per cent of older women (aged 65 years and over) were in poverty compared to 24.6 per cent of men in this age group.102 In 2006, women comprised just over one third (36 per cent) of homeless older people (aged 65 and over).101

Data from the ABS 2007 Survey of Employment Arrangements, Retirement and Superannuation indicates that carers and non-carers have similar rates of reliance on the government pension as their main source of income (around 50 per cent). A similar percentage of currently employed carers and non-carers aged over 45 expect that their primary source of income in retirement will be superannuation or an annuity, while around one quarter expected their main source of income to be a government pension.102

(b) Lifetime earnings of women

It has been estimated that men aged 25 years would, over the next 40 years, earn between one and a half to double the earnings of women over their working lifetime.103

Factors contributing to differences in the lifetime earnings and retirement incomes for women include:

• The timing of periods of withdrawal from the labour market. The gender gap in employment rates over the lifecycle is still prominent during the key career development years of age 25-44 years.104
• The persistence of, and the reasons for, the gender wage gap in Australia. For the last 20 years the size of the gender wage gap in Australia has fluctuated between 15-17 per cent and, in 2009, discrimination accounted for approximately 60 per cent of this gap, with another 25 per cent of the gap being accounted for by industrial segregation.105
(c) Lifetime earnings of unpaid carers

While Australia lacks comprehensive data on the histories of care and employment for women or men, models calculating the forgone earnings for mothers,\textsuperscript{106} and lifetime earnings capacity of carers,\textsuperscript{107} indicate that the lifetime earnings loss due to caring roles is very substantial. In both cases these studies of lifetime earnings losses were compared to women without children and women who were not carers, not men as the comparator. Thus they represent a lifetime earnings penalty based on comparing women who provide one type of care – mothering or caring – with women who do not. The lifetime earnings penalties described thus do not encapsulate all aspects of the gender gap in lifetime earnings.

Lifetime earnings penalties for women compared to childless women are estimated to vary according to the educational qualification levels and small difference for age at first birth.\textsuperscript{108} The impact of having two children on life time earnings forgone is less than 40 per cent if highly educated, and nearly 60 per cent for women with lower levels of education.\textsuperscript{109} Nepal et al, estimated that a women caring for a child with a disability would earn between one quarter and one half of income as women without the primary carer role, depending on the education level.\textsuperscript{110}

Statistics from the OECD suggest that carers in Australia are ‘more likely to hold a temporary job’ and have ‘on average nearly three years shorter working career than non-carers’.\textsuperscript{111}

The estimate of lifetime earnings outlined above do not take into account of the additional costs of care for children or persons with disability, illness or frailty and the impact of these costs on private savings. A more comprehensive approach to assessing the impact of unpaid care on lifetime earnings would require:

- considering all aspects of unpaid care women undertake – both as parents and carers – and the combined impact of this care on lifetime earnings prospects;
- estimating the additional financial costs of caring for children and people with disability, illness or frailty due to older age and the impact of these additional costs on private savings.

(d) Superannuation balances

A wide range of studies have estimated gender differences in projected superannuation outcomes for women and men.\textsuperscript{112} Estimates for baby boomers suggest that women spend about 35 per cent less time in the labour market than men, with a similar proportional cost to their superannuation accumulation.\textsuperscript{113} The average value of women’s superannuation in 2006 was half that held by men.\textsuperscript{114}

Analysis of the ABS Survey of Income and Housing 2009-10 shows that the average (mean) superannuation balance for all men aged 15 years and over was $71,645, whereas the comparable figure for women was $40,475.\textsuperscript{115} A gender gap in average superannuation balances was evident at all ages.\textsuperscript{116} The median superannuation balance was considerably lower for men at $10,000 and women at $3,000 due to the large proportion of individuals who have no or very little superannuation.\textsuperscript{117} Women were more likely to report having no superannuation than men, with an estimated 38.5 per cent of all women and 31.6 per cent of men having none.\textsuperscript{118} Amongst women aged 65-69 in 2009-10, 60 per cent had no superannuation.\textsuperscript{119} It is estimated that 50 per cent of women approaching retirement (aged 55-59 years) have superannuation balances of $25,000 or less.\textsuperscript{120}

Clare reports that the average retirement payout in 2009-10 was likely to be about $198,000 for men and $112,600 for women, which means that the current cohort of retirees will need to rely on the age pension for their retirement.\textsuperscript{121} In 2010-11 just under half of retired women in Australia had made no contributions to a superannuation scheme compared to 25 per cent of men.\textsuperscript{122}

Recent analysis of the HILDA survey for 2010, examining superannuation balances for non-retirees, shows that the average superannuation balances for men and women increase with age, with the gender gap in superannuation balances starting after age 30.\textsuperscript{123} In this study, the average balance for men aged 58-62 was just over $200,000, while for women in this age group, the average balance was less than $100,000.\textsuperscript{124}

Data from the ABS 2007 Survey of Employment Arrangements, Retirement and Superannuation indicate that only 79 per cent of carers aged 35-44 years had superannuation coverage compared with 88 per cent of non-carers in this age group. In addition, carers in the age group 35-54 years had lower median superannuation balances than non-carers in this age group.\textsuperscript{125}

(e) Future data collection and research

The research to date provides clear evidence of gender differences in superannuation balances. Future research could consider more information on the historical experiences of caring for men and women to understand the impact of unpaid care on the gender gap in retirement incomes. There are also few estimates of the costs of caring for episodic and transitional periods of care for people with disability, frailty or illness.
Currently, Australia lacks comprehensive historical data on the paid work and unpaid care trajectories of men and women:

- The HILDA data collects histories of family formation and dissolution, but not comprehensive data on histories of annual work hours, nor histories of the supply of care for people with disability, illness or frailty.
- The SDAC data identifies the duration of care for the current main recipient but not the history of all caring roles.

Future data collections could consider how best to collect more comprehensive work and care histories to enable analysis of the gendered impact of the full spectrum of unpaid care on retirement incomes and savings.

(f) Possible models for Australia

There is not enough existing evidence in Australia in order to be able to recommend a particular approach to ameliorating the inequalities generated by the superannuation system. The most common method of doing so internationally is through credits to a person's pension account during periods spent caring (see Technical Paper G). It is suggested that the Productivity Commission, or a similar independent body, undertake research into the most appropriate method of introducing a system of carer credits in Australia's superannuation system, into the impacts of such a model in the Australian context, and into the way in which it would interact with Australia's existing institutional contexts.

In particular, two possible approaches to introducing carer credits in Australia should be considered:

1. Reforming the taxation treatment of superannuation before introducing a system of carer credits;
2. Introducing a system of carer credits into the superannuation system as it is currently organised.

Option 1 will have greater equalising effects for carers, women, and more generally. As part of the inequality in the superannuation system derives from the current taxation treatment of superannuation, which disproportionately benefits higher income earners will full working lives, reforming these taxation arrangements would create more equal outcomes for carers and indeed other groups with low superannuation contributions over the lifecourse. This would create a fairer foundation on which to build in carer credits that specifically recognise periods spent caring.

The taxation treatment of superannuation could be reformed in a number of ways. One model is presented in the Commonwealth Government’s 2010 Review of Australia’s Future Tax System ("The Henry Review"). This model proposes that the current system of taxing superannuation be replaced by a system of tax offsets. This model would create more equitable outcomes for all Australians with lower superannuation contributions, including carers. However currently, it does not address the specific needs of those outside of the workforce providing care. This is one model that should be inquired into: implementing the system of tax offsets suggested by the Henry Review and then building in a system of carer credits. The proposed system of tax offsets may provide the administrative structure into which carer credits could more easily be accommodated.

This Technical Paper presents two examples of how carer credits might operate under Examples 1 and 2. However, these are examples only and the full range of options and their projected outcomes that should be explored.

(g) Example 1

In this example, the Australian Government replaces the existing system of taxing superannuation with a new system of tax offsets (ie as recommended by the Henry Review 2010). Here, rather than treating superannuation concessionally at the time of contribution, superannuation contributions would be treated as employee income, taxed at an individual's marginal tax rate. The individual then receives a tax offset on their superannuation contributions each year to ensure that superannuation still receives preferential treatment over other types of saving. This is a more equitable approach to taxing superannuation.

The scheme recommended by the Henry Review applies only to those in the workforce. There are no provisions for those who are outside of work providing care. In response, this example extends the Henry Review (and ACOSS) proposals to include a system of ‘carer credits’ in the form of direct credits to the superannuation accounts of those who are out of the workforce providing care that would be paid annually at the end of the tax year by the government into the individual's superannuation account through adult life.

(i) For parents

For parents out of the workforce providing care, the government would contribute the equivalent of 12 per cent of the minimum wage into their superannuation accounts.

- Eligibility: recipients of government PPL scheme and baby bonus.
- This could also be extended to grandparents providing a minimum number of hours of care to their grandchildren.
- Duration: maximum 12 months.
• On return to part-time employment while providing care, their superannuation contributions would reduce the tax credit until it is reduced to zero. This effectively means that the government tops up the parent’s superannuation contributions so that the value equals that of contributions of 12 per cent of the full-time minimum wage.

(ii) For carers

For carers out of the workforce providing care, the government would contribute the equivalent of 12 per cent of the minimum wage into their superannuation accounts.

• Eligibility: Holders of a Carer card\footnote{or, in the first instance, recipients of Carer Payment}.
• Duration: Duration of caring status or capped at a certain number of years.

On return to part-time employment while providing care, their superannuation contributions would reduce the tax credit until it is zero. This effectively means that the government tops up the carer’s superannuation contributions so that the value equals that of contributions of 12 per cent of the full-time minimum wage.

This change would be a complex one and the details are in the section below:

(iii) Details of Example 1

This example involves the replacement of the existing system of taxing superannuation with a new system of tax offsets. This is based on the model proposed in the Henry Report on Australia’s Future Tax System\footnote{and developed by ACOSS.} and developed by ACOSS.\footnote{The model proposes that, rather than treating superannuation concessionally at the time of contribution, superannuation contributions are treated as employee income, taxed at an individual’s marginal tax rate. The individual then receives a tax offset on their superannuation contributions each year to ensure that superannuation still receives preferential treatment over other types of saving.} The flat rate, refundable tax offset would be 20 per cent of the total annual superannuation contribution (ie employer and employee contributions including the compulsory contribution) up to a cap. This means that for those on the standard marginal tax rate, the effective tax rate on their superannuation contributions (ie marginal tax rate minus the offset) would be 15 per cent (up to a cap).\footnote{The offset would be paid by the ATO into the individual’s superannuation account. The offset would be calculated at the time of the individual’s tax return and the individual would nominate a preferred superannuation fund on the form.}
The tax offset would be more progressive than the existing system of taxation concessions. For example, an individual on the average wage would make a 12 per cent compulsory superannuation contribution of approximately $8,400 on which they would pay approximately 35 per cent tax (approximately $2,940). They would then receive a 20 per cent tax offset (approximately $1,680) paid as a lump sum into their superannuation account at the end of the year. The tax offset is refundable which means that individuals with very low contributions could receive a tax credit. For example, an individual on the minimum wage would make a 12 per cent compulsory superannuation contribution of approximately $3,600 on which they would pay approximately 15 per cent tax (approximately $540). They would then receive a 20 per cent tax offset (approximately $720) paid as a lump sum into their superannuation account at the end of the year. Above the cap, which could be set at $21,500 per annum, individuals would pay their marginal tax rates.

This would be accompanied by the following measures, as suggested in the Henry Review:

- The halving of the tax on income earned on the investment, from 15 to 7.5 per cent
- The abolition of the superannuation co-contribution and the low income spouse rebate (these would be replaced with the tax offset)

The new system would also provide a carer credit in the form of direct credits to the superannuation accounts of those who are out of the workforce providing care that would be paid annually at the end of the tax year by the government into the individual's superannuation account through adult life. For those out of the workforce providing care, the government contributes the equivalent of 12 per cent of the minimum wage into their superannuation accounts. The contribution is not taxed and does not attract the tax offset.

For parents, the government would make contributions at the value of 12 per cent of the minimum wage for a period of 12 months from the birth or adoption of a child ($3,600). Parents on parental leave and parents out of the workforce would have the same entitlement. The rebate is provided by the ATO at the end of the year to those who have claimed either the statutory Parental Leave Payment or the Baby Bonus.

If parents return to work within the 12 month period and work a minimum number of hours per month, their superannuation contributions reduce the tax credit dollar for dollar until the credit cuts out when they contribute more than $3,600. This effectively means that the government tops up the parent's superannuation contributions so that the value equals that of contributions of 12 per cent of the full-time minimum wage. Entitlement to the carer credit will therefore cut out when parents begin to earn more than the equivalent of the full-time minimum wage. This ensures that parents returning to work part-time within 12 months are no worse off. The total contribution (i.e. the combined individual and state contributions) attracts the tax offset, so that those returning to work are in fact slightly better off (by at least $180) than those who remain outside of the workforce, so there is no disincentive to return to work.

The full-time credit is only available for the first 12 months after the birth or adoption of a child. However, the partial credit operates as a top up to superannuation contributions until the child turns eight. Until the youngest child turns eight, the parent providing the greater proportion of the care, if they are earning less than the full-time minimum wage, has their contributions topped up the value of 12 per cent of the minimum wage. This operates to ameliorate the impact of care on the lowest income earners. It also operates as an incentive to return to work part-time, as the credits cease at 12 months otherwise.

For full-time carers, the government will also provide a carer credit in the form of a tax credit to the value of 12 per cent of the minimum wage into their individual superannuation account. Provided they meet certain conditions, the credit is paid for each year that they are a full-time carer (or up to a capped number of years). The carer's eligibility for the credit would be determined through a Carer assessment.

People who provide care for at least 35 hours per week for a person with a certain level of care need would be entitled to a full tax credit for each year that they are in the caring role. The credit is not taxed and is not subject to the tax offset. If the carer chooses to work simultaneously, the contributions they make to superannuation would reduce the tax credit (of $3,600) dollar for dollar until it reaches zero and they become eligible for the tax offset.

Part-time carers, or people who provide care for between 20 hours per week and 35 hours per week, and who work a minimum number of hours per month are entitled to the partial credits. Each dollar that they contribute to superannuation reduces the value of the credit by one dollar. Like parents, the total contribution (i.e. the combined individual and state contributions) attracts the tax offset, so that those returning to work are in fact slightly better off (by at least $180) than those who remain outside of the workforce, so there is no disincentive to return to work. Eligibility would be determined through a Carer Assessment.
(h) **Example 2**

The second example is a system of government-funded credits to individual superannuation accounts made during periods outside of the workforce due to caring responsibilities. The government would provide a credit to an individual’s superannuation account equivalent to 12 per cent of the minimum wage while they are outside of the workforce under the following conditions:

(i) **For parents**

- If they are on parental leave (and are entitled to the government’s paid parental leave payment) and out of the workforce for a period of up to 12 months. This is the statutory job-protected leave period.
- If an individual has received the baby bonus and has been out of the workforce for 12 months.
- The full credit is only available for the first 12 months.
- If a parent returns to work within the 12 month period (for a minimum of 32 hours per month), the government credit is reduced by 85 cents for each dollar that is contributed to superannuation in that 12 month period until the credit reaches zero (at $4,500).
- A parent who returns to work after the 12 month period (for a minimum of 32 hours per month) is also entitled to the partial credit. The full government credit is reduced by 85 cents for each dollar that is contributed to superannuation each year, until the credit reaches zero (at $4,500). This credit is available until the youngest child turns eight.
- These credits are paid by the ATO into an individual’s superannuation account when they submit their tax return.

(ii) **For carers**

- If an individual has undergone a Carer Assessment and provides care to a person with a disability or long term illness for at least 35 hours per week, and is outside of the workforce, the government will provide a credit to an individual’s superannuation account equivalent to 12 per cent of the minimum wage. This credit is paid into their superannuation account for every year that they are a full-time carer (or up to a capped number of years).
- For carers who work part-time, the government credit is reduced by 85 cents for each dollar that is contributed to superannuation each year until the annual credit reaches zero.
- Carers who combine fewer hours of care with part-time work are also entitled to the partial credit (but not the full credit). For carers who provide care for between 20 hours per week and 35 hours per week and who work a minimum number of hours per month (32 hours), the full government credit is reduced by 85 cents for each dollar that is contributed to superannuation each year, until the credit reaches zero.

As any changes to the superannuation system will not benefit those transitioning out of paid work now, it is also suggested that the possibility of an immediate change to the age pension system, such as a care bonus scheme, also be considered.

It must be noted once again that the purpose of this material is to provide two concrete examples of what carer credits might look like should they be introduced in Australia. It also provides a suggestion for reform of the age pension that needs considerable exploration. The examples and suggestion have not been assessed on the basis of their feasibility or potential outcomes. They are among many options that should be considered in detail.
6. Technical Paper E: Laws and policies on caring in Australia

This technical paper draws on government and administrative policy documents and information, reports and peer reviewed articles to document the legislative and policy context for recognising and valuing unpaid carers in Australia. The paper is set out in two parts: recognising and valuing parental care in Australia’s institutional context; and recognising and valuing care for people with disability, chronic illness and frailty in Australia’s institutional context. It focuses on key legislation in which unpaid care is recognised and mechanisms, in the employment and workplace relations system, tax and benefit system and the service infrastructure that support parents and carers, provide income support, and facilitate combining paid work and unpaid care responsibilities.

6.1 Parents or guardians

In Australia parental care is recognised in the policy and legislative framework through provisions that enable those with parental responsibilities access to entitlements in paid employment and various income support payments and some protection against discrimination in relation to employment.

(a) Legal recognition of parental care

(i) Fair Work Act and the National Employment Standards

The Fair Work Act 2009 (Cth) established a new national workplace relations system. The National Employment Standards (NES) contained in the Act consist of ten minimum entitlements for employees with respect to: maximum work hours; requests for flexible working arrangements; parental leave; annual leave; personal/carer’s leave and compassionate leave; community service leave; long service leave; public holidays; termination and redundancy; and the Fair Work Information Statement. Recognition of parental care is encompassed in at least four of the NES: parental leave, personal/carer’s leave and compassionate leave, requests for flexible working arrangements and maximum hours worked.

Parental leave

Under the NES, at a minimum, employees are entitled to up to 12 months unpaid parental leave. Biological and adoptive parents are eligible for this leave. They can also request an extension of another 12 months of unpaid leave, although this can be refused by the employer due to ‘reasonable business grounds’. To be eligible an employee must have been continuously employed for at least 12 months with that employer. Casual employees are also entitled to unpaid parental leave if they have been employed regularly and systematically by the same employer for over 12 months. Couples can take three weeks leave at the same time immediately after the birth or adoption, but the remainder has to be taken separately.
Personal/carer’s leave

Personal/carer’s leave refers to both sick leave and carer’s leave. All employees except for casual employees are entitled to at least 10 days of personal/carer’s leave. This leave accrues over the year and can be accumulated if it is not taken. Personal/carer’s leave can be taken ‘to provide care or support to a member of their immediate family or household, because of a personal illness, injury or unexpected emergency affecting the member’. If a minimum an employee must be paid at their base rate when taking personal/carer’s leave.

Employees, including those causally employed, can access two days of unpaid carer’s leave each time a member of their immediate family or household needs care or support due to an injury, illness or an emergency. This leave must only be taken when all paid leave has been used, except for casuals, who are not entitled to paid leave. In some instances parents may have to use all of their personal/carer’s leave to look after a sick child resulting in no leave for themselves if they become ill.

Requests for flexible working arrangements

An employed parent, who is responsible for the care of a child under school age, or aged under 18 years with disability, can request a change in their working arrangements. These changes include reduced work hours or changes to start and finishing time, changes in patterns of work or work location. Only employees who have worked continuously for 12 months or more with their employer are eligible to request changes. However, casual employees can make requests if they have been employed regularly for 12 months and there is a reasonable expectation that they will continued to be employed on a regular basis. Casual employees may be eligible if they have been employed for 12 months or more on a continuous or systematic basis, and with a reasonable expectation of the continuation of employment. Therefore many women are not eligible for these minimum entitlements as they work casually or have been in their jobs for less than 12 months.

The requests for flexible working arrangement have to be made in writing and a written response has to be received within 21 days. Requests can be refused due to ‘reasonable business grounds’. Fair Work Australia has the power, through the Act, to handle disputes as to whether the employer has reasonable business grounds. However, there is no right of appeal and a review of the decision is only possible if an employer consents. The ‘right to request’ does not place obligations on employers, it is not enforceable and no definition of what constitutes ‘reasonable business grounds’ is provided.

Despite the introduction of this legislation in January 2010, a survey in March 2012, found that 66 per cent male employees and 77 per cent of female employees with preschool aged children were not aware of the new right to request flexible work. Women employees are more likely to request flexible work (24.2 per cent) than men (17.3 per cent) and gender differences in requesting changes to working arrangements are particularly stark among parents of pre-school aged children (43 per cent of women compared to 19.8 per cent of men). However, the rate of requesting a change in working arrangements had declined slightly for women overall between 2009 and 2012, possibly suggesting that legislative change may not be sufficient to encourage behaviour change in some workplaces. Overall, the majority (61.9 per cent) of requests for flexible work in Australia are fully approved, although the approval rate differs for men and women. In 2012, 9.8 per cent of requests for flexible work arrangements by women and 17.4 per cent of requests by men were declined. Lack of access to reduced hours of work may lead to women changing occupations and to more insecure work.

State and Territory laws still apply to employees if they provide better entitlements than the NES with respect to flexible working arrangements.

Submissions by the ACTU and the Australian Human Rights Commission to the Post Implementation of the Review of the Fair Work Act 2009 have noted several limitations of the Act that impact adversely on employed parents including: the restrictive eligibility conditions attached to the right to request, a lack of an employer’s duty to consider requests for changes in work arrangements and to reasonably accommodate these requests, lack of a right to review an employer’s decision if an employee’s request is refused. Recent developments have indicated greater recognition for unpaid carers and support for expanding the availability of the right to request flexible working arrangements to a range of caring responsibilities. The final report of the Fair Work Act Review, released in August 2012, recommended amending s.65 of the Act ‘to extend the right to request flexible working arrangements to a wider range of caring and other circumstances, and to require that the employee and the employer hold a meeting to discuss the request, unless the employer has agreed to the request’. However, the Review did not make recommendations to establish an appeals mechanism nor to define ‘reasonable business grounds’ in legislation.

Maximum weekly hours

The maximum hours a full-time employee can be required to work under the NES is 38 hours per week, ‘unless the additional hours are reasonable’. If the additional hours are deemed unreasonable an employee can refuse to work. Family responsibilities are one of the factors that can be taken into account in deciding whether additional hours are reasonable. Sharp et al. note that with respect to maximum hours of work the Fair Work Act 2009 provides some protection to workers in contrast to Work Choices. However, there is no clearly defined limit to the maximum number of hours an employee could be required to work and there is no definition of ‘reasonable’ additional hours. The culture of long hours of work and poor quality jobs exacerbate the difficulties faced by parent and carers attempting to do both paid work and care.
Modern Awards

Under the Fair Work Act 2009 existing state and federal awards are to be replaced with 122 Modern Awards in which terms that discriminate against due to sex, pregnancy or family or carer’s responsibilities cannot be included. ‘Transitional provisions are provided for and are designed to address differences in conditions of employment, rates of pay that may occur as a consequence of the award modernisation process. Specifically, transitional provisions provide for a five year period in order to phase in any changes, while employers and employees gradually move from their old state and federal awards to a modern award’.171 Sharp et al. state that:

Under the Fair Work Act, employees and their unions are still not free to negotiate and argue for any industrial matter to be included in an award. Award content remains severely restricted to provisions relating to the National Employment Standards, minimum pay and classification scales and 10 additional matters.172

However, some aspects of the Act such as the protection from losing provisions in the bargaining process offer employees some income security and assist them to undertake paid work and carer responsibilities.173

Unlawful workplace discrimination

Family and carer responsibilities are also recognised in section 351 of the Fair Work Act 2009 with respect to unlawful workplace discrimination. The Fair Work Ombudsman can investigate ‘allegations of unlawful workplace discrimination and may initiate litigation against a national system employer for contravening the Fair Work Act 2009’174 for instances that occurred after 1 July 2009. Unlawful workplace discrimination relates to an employer taking:

adverse action against a person who is an employee, or prospective employee, of the employer because of the person’s race, colour, sex, sexual preference, age, physical or mental disability, marital status, family or carer’s responsibilities, pregnancy, religion, political opinion and national extraction or social origin.175

Adverse actions by employers include: dismissing an employee, altering an employee’s position to their disadvantage and refusing to employ a prospective employee.176 Chapman notes that these provisions ‘are linked to, and potentially draw on, anti-discrimination law in complex, and as yet unexplored, ways... In addition, the FW [Fair Work] Act provides an exception to ‘adverse action’ where the action is ‘not unlawful under’ applicable anti-discrimination law including the SDA [Sex Discrimination Act] and State and Territory anti-discrimination law (s 351(2), (3)). The grounds in the FW Act, including ‘family or carer’s responsibilities’, are not defined in the Act’.177

Overall, Sharp et al. conclude that the Fair Work Act 2009 contains some employee rights and entitlements such as safety net provisions, increased flexibility to manage family responsibilities and the ability to bargain for pay equity by sector which have the potential to assist women better manage paid work and caring responsibilities, address gender pay inequity and maintain attachment to the labour market but the strict eligibility criteria undermines their potential benefits. In addition, if a more equitable integration of work and care is to be achieved, the issue of job quality and design with enforceable minimum employment standards, including leave entitlements and work hours, for both men and women are required.178

Part-time work

Part-time work is an important mechanism for women and men to use to facilitate between unpaid care and paid work responsibilities. In 2010-11, mothers were much more likely to be in part-time employment than fathers: 66 per cent of mothers with child aged 0-5 years worked part-time compared with seven per cent of fathers, 55 per cent of mothers with a child aged 6-14 years worked part-time compared with 8 per cent of fathers.179 While the promotion of opportunities to combine part-time work and care is important, it can lead to inequitable outcomes for women both in their labour market attachment and in their retirement incomes. Women in part-time work can experience significant disadvantage in pay and opportunities for professional development and progression.180 Australia has ratified the International Labour Organisation (ILO) Part-time Work Convention, 1994 (No.175) which requires that part-time workers receive pro-rata equal remuneration and the same protection as full-time workers.

According to Charlesworth many women with caring responsibilities work part-time. ‘The gender disparity of work time is also overlaid with a shift to casual or contingent contracts, one of the major barriers to job quality in Australia’.181 Casual employees have no security around hours of work or continuing employment and have no entitlements to paid leave, although they receive a ‘casual loading’ instead.182

Pay equity

Enhancing provisions to improve pay equity may assist in reducing the gender gap in life-time earnings. The Fair Work Act 2009 contains several provisions that contribute to advancing pay equity, including strengthening provisions to make equal remuneration orders for work of equal or comparable value.183 A recent example of the potential of this Act is the successful application made by the Australian Services Union regarding employees in the Social and Community Services (SACS) industry resulting in pay increases in the SACS Modern Award which benefited a largely feminised workforce.184 In its submission to the Post Implementation Review of the Fair Work Act 2009, the Commission recommended ‘that there is no requirement for a male comparator to be identified in order to make an equal remuneration order’.185 The report of the evaluation of the Fair Work legislation, Towards more productive and equitable workplace, noted this submission but made no recommendation to amend the existing provisions.186
(ii) Anti-discrimination legislation

Provisions aiming to prohibit discrimination against persons with unpaid caring roles may be found within the terms of anti-discrimination legislation, such as the *Disability Discrimination Act 1992* (Cth) (DDA) and the *Sex Discrimination Act 1984* (Cth) (SDA).\(^{187}\)

The DDA provides for protection against discrimination in relation to a person who has an associate with a disability.\(^{188}\) The definition of associate includes: ‘a spouse, another person living with the person on a genuine domestic basis, a relative, a carer or another person who is in a business sporting or recreational relationship with the person’.\(^{189}\) This definition of carer does not distinguish between paid and unpaid carers, but encompasses unpaid carers as defined within this report. The definitions are broad enough to capture discrimination against people who are caring for relatives with a disability, as ‘relative’ in this sense includes a person related ‘by blood, marriage, affinity or adoption’.\(^{190}\) The Act also provides for protection against discrimination in relation to a person with disability ‘to having a carer, assistant, assistance animal or disability aid in the same way as it applies in relation to having a disability’.\(^{191}\)

Since the 1970s and the mid 1980s the category of sex was enacted into discrimination legislation at both the State and Federal levels respectively.\(^{192}\) More recently provisions have been passed relating to discrimination with respect to employees who are pregnant or may become pregnant and those with family responsibilities.\(^{193}\)

The SDA was amended to include ‘family responsibilities’ in 1992 to give effect to Australia’s ratification in 1990 of the ILO *Workers with Family Responsibilities Convention, 1981* (No.156). However, this amendment provided only limited protection from discrimination with respect to family responsibilities, in terms of dismissal from employment (direct discrimination).\(^{194}\) In 1995 the SDA was amended to provide for protection against discrimination relating to potential pregnancy.\(^{195}\) In 2011 the *Sex and Age Discrimination Legislation Amendment Act 2011* (Cth) established breastfeeding as a separate ground of discrimination.\(^{196}\) Also direct discrimination of employees, both male and female due to family responsibilities was extended to include all facets of employment.\(^{197}\) The bill introduced in 2010 included direct and indirect discrimination but only direct discrimination was passed.\(^{198}\) The Australian Human Rights Commission Report, *It’s About time*, it is noted that few men and women make use of the provision of family responsibilities, however, women can utilise:

the indirect sex discrimination provisions of the Act as an alternative form of redress for disadvantage arising from their family/carer responsibilities. This is because as women continue to carry out the bulk of unpaid caring work, acts of discrimination which disproportionately impact on people with family responsibilities, disproportionately impact on women as a group.\(^{199}\)

Chapman argues that the concepts of work, care and family within Australian anti-discrimination law impede the reconciliation of work and care. The domains of employment and work are located within the public sphere and care and family in the private sphere.\(^{200}\) The use of comparators in direct discrimination produces a normative worker in the labour market who has no care responsibilities and thereby separates the normative worker from care responsibilities. For example with respect to direct discrimination the:
In addition, the manner in which equality is interpreted by tribunals and courts does not take account of ‘new forms of leave and working hour arrangements’. Charlesworth notes ‘...part-time work has become the norm for mothers and other women with caring responsibilities’.

All States and Territories have amended their anti-discrimination legislation to either include family responsibilities, parental status and/or carer responsibilities or status. Queensland, Western Australia and Tasmania have included the attribute of ‘family responsibilities’ and the attribute of carer responsibilities or status has been included in anti-discrimination laws in Victoria, New South Wales, South Australia and the Australian Capital Territory. Parental status or parenthood have been included in anti-discrimination laws in Victoria, Tasmania, the Northern Territory, Queensland and ACT.

Overall the scope of protection for State and Territory and also Commonwealth sex discrimination legislation varies with respect to care responsibilities and contain different wording of attributes and concepts of discrimination that is unlawful. Smith notes that variations in anti-discrimination laws at the Commonwealth and State and Territory levels mean that the level of protection a worker has depends on where he or she lives, or whether they are employed by federal or State/territory governments.

The Commission’s submission to the inquiry into the Sex and Age Discrimination Legislation Amendment Bill 2010 recommended including: making direct and indirect family and carer responsibilities discrimination unlawful, extending the definition of family responsibilities to include family and carer responsibilities which is more inclusive; a positive duty to reasonably accommodate the needs of workers with care and family responsibilities, introduce a positive obligation, which is enforceable, on employers to reasonably accommodate the needs of workers with care and family responsibilities. These recommendations reiterated recommendations made by the Commission in their submission to the Senate Legal and Constitutional Affairs Committee on the inquiry into the effectiveness of the SDA in eliminating discrimination and promoting gender equality in 2008.

Similar recommendations for change have been made by relevant Senate committees. In 2011 the report by the Legal and Constitutional Affairs Legislation Committee on the provision of the Sex and Age Discrimination Legislation Amendment Bill 2010 (Bill) suggested that amendments be made to the Bill to implement some or most of the recommendations of the Senate Report including... imposing a positive duty on employers to reasonably accommodate requests by employees for flexible working arrangements, such as family or carer responsibilities, modelled on section 14A of the Equal Opportunity Act 1995 (Vic) (Recommendation 14). Since the publication of this report the Victorian legislation has been replaced with the Equal Opportunity Act 2010 (Vic).

The Exposure Draft Human Rights and Anti-Discrimination Discrimination Bill 2012 makes discrimination on the ground of family responsibilities unlawful only in connection with work and work related areas and does not expressly cover discrimination on the grounds of caring responsibilities. The Commission has recommended that the Bill cover discrimination on the basis of family responsibilities in all areas of public life and that discrimination on the basis of carer responsibilities be expressly covered.

Despite legislated anti-discrimination provisions in place, discrimination against women for being pregnant and their caring responsibilities is still an issue. For example, in 2011-2012, 15 per cent of all complaints related to the Sex Discrimination Act received by the Australian Human Rights Commission were on the grounds of pregnancy and 6 per cent were on the grounds of caring responsibilities. Based on the area of the complaint, 85 per cent of all complaints were in relation to employment.

Women continue to face discrimination at the time of returning to the workforce after the end of their parental leave. It is often difficult for women to find part-time work and work that is at a similar level to that they were doing before going on parental leave. Many women settle for paid work that is below their skill level or is an insecure nature, such as a casual work, as this is the only type of work that provides them with the flexibility to attend to their parental responsibilities.

In December 1998 the Australian Human Rights Commission commenced the Pregnancy and Work Inquiry. The terms of reference included examining, regarding pregnancy at work, the policies and practices of employers in relation to recruitment, the rights and responsibilities of employers and employees, and developing guidelines for employers and employees.

The final report of the Inquiry entitled Pregnant and Productive: it’s a right not a privilege to work while pregnant found that there was a need for clear practical and educative guidelines to assist employers and employees. The report recommended the immediate need for education, guidance and awareness raising programs around pregnancy and work. The guidelines were published by the Commission in 2001. It may be timely for the Commission to conduct a new inquiry to assess the contemporary issues regarding pregnancy and returning to work after parental leave.

Strengthening anti-discrimination laws to encompass all family and carer responsibilities may lead to broader social benefits. The benefit to society is greater gender equality; greater equity for unpaid carers and enhanced protection from discrimination.
submit their tax returns. The amount varies depending on income.

There are supplements that may be paid on Family Tax Benefits A and B at the end of the financial year when the family members

secondary earner may only earn up to $4891 per year before he payment is affected.

an income test. The payment is limited to families (single or couple) in which the primary earner earns $150,000 per year or less. The

(iii) Other relevant legislation recognising caring

Caring responsibilities are recognised in the Workplace Gender Equality Act 2012 (Cth) (which replaced the Equal Opportunity for

Women in the Workplace Act 1999 (Cth)).

The ‘objects of this Act are:

(a) to promote and improve gender equality (including equal remuneration between women and men) in employment and

in the workplace; and

(b) to support employers to remove barriers to the full and equal participation of women in the workforce, in recognition of the

disadvantaged position of women in relation to employment matters; and

(c) to promote, amongst employers, the elimination of discrimination on the basis of gender in relation to employment matters

(including in relation to family and caring responsibilities); and

(d) to foster workplace consultation between employers and employees on issues concerning gender equality in employment

and in the workplace; and

(e) to improve the productivity and competitiveness of Australian business through the advancement of gender equality in

employment and in the workplace.

(b) Income support and tax benefit support

(i) Parenting Payment

Parenting Payment is to assist low income families with the cost of caring for children. It is paid to the person who is the main carer of

the child. A parent or guardian is eligible if they are in one of two situations after which they are required to transfer to Newstart and look

for part-time work: single and caring for at least one child under eight; partnered and caring for at least one child under 6; provided that

their single or combined income falls below a certain amount. Parenting Payment is therefore means tested on the couple income. At

March 2012, the maximum rate of payment for a single person was $648.50 per fortnight and for a partnered person was $442.00 (for a

partnered person who is separated from their partner due to illness, respite care or prison, the payment was $529.80).

Recipients of Parenting Payment have access to a range of training programs through the Commonwealth Government’s Job Services

Australia. There are a number of national training programs available to all jobseekers, including to parents as they transition from

Parenting Payment to Newstart Allowance. There are also several programs targeted specifically at parents, including Training Places

for Single and Teenage Parents, a program providing concessional access for single and teenage parents on Parenting Payment to

access vocational training at the Certificate II level and above (DEEWR website), and the Jobs, Education and Training Child Care

Fee Assistance (JETCCFA) provides assistance with child care fees for parents on income support (including Parenting Payment and

Newstart while they are studying or training to get the skills they need to find a job (the funding for this program was increased in the

last Federal Government budget).

(ii) Family Tax Benefit Part A

Family Tax Benefit Part A aims to assist with the costs of raising children. It is paid to one parent in a household who cares for at least

35 per cent of the time for: a dependent child under 16; or a dependent child aged 16-20 who has completed year twelve or who is

undertaking full-time study leading to a Year 12 or equivalent qualification (or be exempt from this requirement); or a dependent

time student aged 21, provided the household income (including the income of the child) falls below a certain threshold. The income tests are complex and depend on the number, age and educational status of the children but the limits are reasonably high, but do not apply if the person is in receipt of a pension or benefit. At July 2012, the maximum rate of payment was $169.68 per fortnight for each child between 0 and 12 years, $220.64 for each child aged 13-15, and for each child aged 16-19 who is in secondary education, $54.32 for each child aged 16-17 who has completed secondary education, and $220.64 for per fortnight for each child aged 18-21 who has completed secondary education. Parents or guardians of children and young people up to 21 years old in approved care facilities (residential care for children young people with disability, who are homeless, or who are refugees) receive a maximum payment of $54.32 per fortnight. Parents may not claim Family Tax Benefit Part A while on the government’s paid parental leave, but may begin claiming at the time that the paid parental leave period ends.

(iii) Family Tax Benefit Part B

Family Tax Benefit Part B is an additional payment for single parents and families in which there is only one parent earning and the other is outside of the workforce caring for the child/children. Eligibility depends on having care of the child for at least 35 per cent of the time and having: a dependent child under 16 or a ‘qualifying’ dependent child up to the age of 18 who is in full-time secondary education, (provided that the child does not receive Youth Allowance or any other pension or benefit), and providing the parent or guardian meets an income test. The payment is limited to families (single or couple) in which the primary earner earns $150,000 per year or less. The secondary earner may only earn up to $4891 per year before he payment is affected. At July 2012, the maximum rate of the payment was $144.34 per fortnight if the youngest child is under five, or $100.66 per fortnight if the youngest child is aged 5-18 years old.

There are supplements that may be paid on Family Tax Benefits A and B at the end of the financial year when the family members submit their tax returns. The amount varies depending on income.
(iv) **Child Care Benefit**

Child Care Benefit aims to provide support with the cost of child care in approved or registered care including long day care, family day care, outside of school hours care, occasional care, vacation care and registered care. The payment can be paid directly to the child care provider to reduce the fees or can be paid as a lump sum at the end of the financial year. To be eligible, the applicant must be responsible for paying the child care fees of the child, must be using approved or registered child care and must have their child immunised (or exempt from the immunisation requirements). The payment is income tested. The maximum payment is payable to families with an income under $41,026 per annum or families on income support. Families earning above this amount have the payment reduced until it reaches zero at the family income of $142,426 for families with one child, $147,594 for families with two children and $166,656 for families with three children plus $31,656 for each additional child.

For approved child care, the payment for a non-school age child in up to 50 hours of care per week is $3.90 per hour or $195 per week. Payments for non-school age children are 85 per cent of this rate. However, the payment is limited to 24 hours of care (rather than 50) per child per week unless the parent (in single parent families) or both parents are engaged in work, training or study for at least 15 hours per week.

Families with their children in registered care (ie care provided by nannies or by grandparents or other relatives who are registered as carers with the Government, alongside some forms of centre-based care such as care provided by individuals in pre-schools) receive considerably less. The payment is $0.652 per hour or $32.60 per week for up to 50 hours of care. This payment, in contrast to the one for approved care, can be claimed as a direct payment into your account upon lodging a claim and providing receipts of child care expenditure. Child Care Benefit for registered care can only be claimed if the person claiming is working, training or studying.

(v) **Child Care Rebate**

The Child Care Rebate aims to support parents with out-of-pocket expenses on approved child care when they are working, training or studying. The Rebate covers 50 per cent of out-of-pocket child care expenses up to a maximum of $7,500 per child per year from July 2011. Out-of-pocket expenses are the cost of child care fees less the Child Care Benefit. To be eligible, the parent/s must have used approved child care in the year before claiming, must meet the residency requirements, and must have worked, studied or trained at some time during the week in which they used child care. The parent/s must also be eligible for the Child Care Benefit (ie the applicant must be responsible for paying the child care fees of the child, must be using approved or registered child care and must have their child immunised (or exempt from the immunisation requirements), even if they are excluded from entitlement to the Child Care Benefit because of their income. The Child Care Rebate is not means tested. Moreover, if the claimant’s income is the only factor precluding them from access to the Child Care Benefit, then they may still be entitled to the Child Care Rebate.

Grandparents who are primary carers of their grandchildren and foster parents are also entitled to Family Tax Benefit payments, Child Care Benefit, and the Child Care Rebate. They are also entitled to receive Parenting Payment.
(vi) **Baby Bonus**

The Baby Bonus is an income tested payment that aims to help with the costs of a new baby or adopted child and is paid following the birth or adoption of a child. Effective from September 2012, the value of the bonus is $5,000 in total, paid in thirteen fortnightly instalments ($846.20) in the first fortnight and $346.15 every subsequent fortnight). As of July 2013, the baby bonus for a second child will be reduced from $5,000 to $3,000. It can be claimed within 52 weeks of the birth of the baby. The payment is available to those who: have care of the child for at least 35 per cent of the time; are eligible for Family Tax Benefit for the child within 26 weeks of the child’s birth or of the time that an adopted child was entrusted to their care (they do not need to meet the FTB income test); and those who meet the income test. Eligibility for the baby bonus cuts out when the family’s estimated combined income in the six months after the birth or adoption exceeds $75,000. A person receiving Parental Leave pay will not be eligible for the Baby Bonus.

(vii) **Paid Parental Leave scheme**

Prior to the introduction of the Paid Parental Leave (PPL) scheme the main forms of parental leave were unpaid parental leave through the *Fair Work Act 2009* (as outlined above) and employer provided paid parental leave. Paid parental leave was available to certain employees, some government employees through legislation and in the private sector through a number of enterprise agreements and company provisions for varying periods. Over half of the organisations reporting to the *Equal Opportunity for Women in the Workplace Agency* in 2010 provided some form of paid maternity leave for their employees.

Since January 2011, in Australia the PPL scheme provides 18 weeks of government funded pay for parental leave at the rate of the National Minimum Wage which at 1 July 2012 was $606.50 per week before tax. It is available to men or women who are primary carers of a newborn or recently adopted child and who meet the work test, whereby the individual must have worked for at least 10 of the 13 months prior to the birth or adoption of the child and worked for at least 330 hours in that 10 months period). The type of position (ie full-time/part-time etc) has no bearing on the entitlement. To be eligible, the individual claimant (not the household) must also have earned less than $150,000 in the financial year preceding the birth. The scheme is conditional on leaving the workforce, as the claimant must be on leave or outside of the workforce. The individual is entitled to up to ten ‘keeping in touch’ days of work during their period of paid parental leave but these days are not added to the end of the parental leave period.
The primary carer must apply for the payment, which at the beginning is most likely to be the mother. However, if the birth mother or initial primary carer would like to return to work before the paid parental leave period is complete, the remaining pay period can be transferred to their partner, the other legal parent of the child, or the other legal parent’s partner.241 If an individual is eligible both for Baby Bonus and paid parental leave, they may choose which payment to receive. The government paid parental leave scheme does not affect any existing leave entitlements.

The Paid Parental Leave and Other Legislation Amendment (Dad and Partner Pay and Other Measures) Bill 2012 was passed by the Senate and House of Representatives.242 This legislation expands the existing PPL scheme to include Dad and Partner Pay. From January 2013, it will provide eligible working fathers or partners with two weeks Dad and Partner Pay at the rate of the National Minimum Wage. This government-funded payment will be able to be taken at any time during the first year from the birth or adoption and can be taken at the same time as the Baby Bonus, Family Tax Benefit, or while the mother is on paid parental leave. The eligibility criteria will be largely the same as those for paid parental leave: it is subject to the same work test and income test. Like the PPL scheme, Dad and Partner Pay will also be dependent on leaving work and can only be paid if the individual is on unpaid leave or is not working.243

During the debates about the introduction of PPL, a number of parties recommended a period of 26 weeks. For example, a number of submissions in response to Human Rights and Equal Opportunity Commission’s interim paper, Valuing Parenthood: Options for paid maternity leave, supported this recommendation on the grounds that it enhanced mothers’ and babies’ health and wellbeing.244 In addition the 2009 Productivity Commission report on Paid Parental Leave stated that: ‘The evidence is most compelling that there are child health and wellbeing benefits from exclusive parental care in the first six months of life’.245 Key findings from a recent Australian study by Whitehouse et al. show that there was an association between the duration of mothers’ leave after childbirth in two-parent families and reductions in levels of maternal distress. The researchers suggest that ‘an optimal leave duration for mothers of more than 6 months (although not necessarily more than 12 months), with more than 3 months being paid leave’.246

Other submissions noted the possibility of continuing superannuation benefit during paid parental leave period.247 The current PPL Scheme has no provisions for superannuation payments, although some employees may have access to this benefit through their employer.248

Some of the other issues surrounding the introduction of the PPL scheme include: the lack of a job guarantee so that the scheme provides pay for parental leave but does encompass access to leave entitlements.249 Baird and Williamson note ‘as the work test to receive parental leave pay is broader than the NES entitlement to unpaid parental leave (which arises only after 12 months’ continuous service with the same or a related employer), there will be workers who can receive parental leave pay, but are not guaranteed job protection’.250 In addition, extending women’s time out of the labour market without addressing men’s take up of parental leave has implications for women’s career and retirement savings and may further entrench gender roles.251

Some employers have developed entitlements beyond the PPL scheme. For example, in Australia in 2012, Insurance Australia Group Limited (IAG) introduced a ‘welcome back payment’ for employees returning from parental leave of six week of double pay, once they return to work, with the stated aim of retaining employees and reinstating women’s pre-leave salaries.252

(c) Services

In Australia, access to early education and care services assists parents to combine paid work and unpaid care. The difficulties associated with attempting to combine employment and care responsibilities can be exacerbated by a lack of quality, accessible and affordable services which are flexible and designed to meet the needs of working parents, particularly those working in non-standard hours and in non-metropolitan areas.

(i) Early childhood education and care services

Unlike some other countries that have a legal right to public early childhood education and care services, such as Denmark and Norway, Australia has no formal right to an early childhood education and care place. Centre-based early childhood education and care is provided by a collection of private for-profit and not-for-profit providers and the government is not a provider.

Access to high quality, affordable and flexible early childhood education and care services is vital for parents to combine paid work and care responsibilities. Working parents, who satisfy the Government’s work, training, study test are eligible for priority of access to early childhood education and care places. This is only for approved early childhood education and care services when there is a waiting list.253

In Australia the National Quality Framework for Early Childhood Education and Care established in 2012 by the Australian Government aims to improve quality standards in early childhood and care services including most long day care, family day care, preschool and outside of school hours care. It establishes: a national legislative framework; a National Quality Standard, a national quality rating and assessment process; and the Australian Children’s Education and Care Quality Authority. It establishes a national approach to ‘the regulation and quality assessment of education and care services’. The National Quality Standard establishes new national benchmarks for quality across seven areas: educational program and practice; children’s health and safety, physical environment, staffing arrangements, relationships with children, collaborative partnership with families and communities; and leadership and service management.254 This information may potentially help parents to identify high quality early childhood education and care services.
Research has shown that parents experience a number of difficulties accessing early childhood education and care. Data from the ABS Childhood Education and Care Survey 2008, shows that in 2005 the main reasons for not accessing or organising additional early childhood education and care services was due to lack of available places for around a third of parents and, for around 16 per cent cost was the main barrier. In 2008, although the data is not comparable, costs were again one of the main reasons parents did not access or organise additional early childhood education and care for just over one in five parents. Difficulties associated with the costs of early childhood education and care were also found in the analysis of HILDA data over time. In addition, in 2009 over half the couple households, and just over 60 per cent of lone-parent households, experienced difficulties with the availability of early childhood education and care. Although couple households experienced difficulties with the quality of early childhood education and care, this was more common in lone-parent households. Local difficulties with early childhood education and care, in terms of availability, quality and cost, have been found to be associated with lower hours and reduced participation of women in employment. The difficulties associated with attempting to combine employment and care for parents can be exacerbated by a lack of high quality, accessible and affordable services, which are flexible and designed to meet the needs of working parents, particularly those working in non-standard hours and in non-metropolitan areas.

A number of subsidies to reduce the costs of child are available in Australia such as the Child Care Benefit and the Child Care Rebate, as outlined previously. The Government provides the Child Care Benefit and Child Care Rebate to individuals and families (in the case of Child Care Benefit, individuals can elect to have the government pay the benefit directly to the child care provider) and they are expected to purchase their child care from the private market. Government funding can be used to pay for approved centre-based care or family day care, and Child Care Benefit can be used to pay for home based care provided by registered carers (e.g. nannies, grandparents or other relatives who are registered as carers with the Government).

According to ACOSS the Child Care Benefit is an example of a ‘well-designed’ subsidy for a vital service that covers the costs of targeted service for households on low and middle incomes, particularly if they are capped at an appropriate level. In contrast ACOSS refers to ‘top up’ subsidies such as the Child Care [Tax] Rebate as upside down welfare as they ‘disproportionately benefit people on higher incomes and inflate the cost of the services for everyone else’. To remedy this ACOSS proposes that the Child Care Tax Rebate, which reduces gap fees for child care after Child Care Benefit entitlements have been paid, be integrated with the Child Care Benefit into a single payment, as proposed in the Henry report. This would not be a cost cutting measure – the goals would be to increase support for low and middle income families with child care costs and reduce inflation in child care fees.

ACOSS notes that high early childhood education and care costs are more likely to deter lower and middle income parents from participating in paid employment compared to high income parents. So redistributing child care subsidies to low and middle income families would boost employment participation as well as improving the system’s fairness. Research shows that women who live in areas where access to high quality, accessible and affordable early childhood education care services is limited are more likely to work part-time than full-time. Further research on whether the interaction of the cost of early childhood education and care with the benefit system for early childhood education and care and women’s incomes is a disincentive to women’s workforce participation is required.

6.2 Carers
(a) Legal recognition of carers
(i) Carer recognition legislation

National legislation pertaining to carers was introduced in 2010. The Carer Recognition Act 2010 (Cth) and the National Carer Strategy and its Implementation Plan form part of the National Carer Recognition Framework. A carer is defined in the Act as:

- an individual who provides personal care, support and assistance to another individual who needs it because that other individual (a) has a disability; or (b) has a medical condition (including a terminal or chronic illness); or (c) has a mental illness; or (d) is frail and aged.

The Act aims to ‘increase recognition and awareness of carers and to acknowledge the valuable contribution they make to society’ and includes a set of principles in the Statement for Australia’s Carers that acknowledges that:

- all carers should have the same rights, choices and opportunities as other Australians, regardless of age, race, sex, disability, sexuality, religious or political beliefs, Aboriginal or Torres Strait Islander heritage, cultural or linguistic differences, socioeconomic status or locality.

In addition the Act recognises that: children and young people who provide care should also have the same rights as all children and young people; the valuable economic and social contribution of carers; that they should be supported to enhance their health and social wellbeing and to participate in family and community activities; the relationship between carers and those they support should be respected; they should be accorded dignity and respect and acknowledged as partners in providing support; they should be helped to attain economic wellbeing and where appropriate assisted to participate in employment and education; and that ‘support for carers should be timely, responsive, appropriate and accessible’. The Act does not create any legally enforceable obligations. Policy to
support carers has been outlined in the National Carers Strategy and the National Carers Strategy Implementation Plan and Action Plan (2011-2014).

As Phillips and Magarey (2010) note the Act does not set up carers’ rights or obligations for public services to provide support that are legally enforceable. The Australian legislation differs in this respect to legislation in the UK. In the UK the role of carers was first recognised in the Carers (Recognition and Services) Act 1995. The Carers and Disabled Children Act 2000 gave carers the right to request an assessment of their capacity to provide support. The Carers (Equal Opportunities) Act 2004, extended the rights of carers and gave them the right to receive an assessment and mandatory obligations for councils to provide services and to take a carer’s wish to continue in, or re-enter, paid work into account.

Most Australian States and Territories except for Tasmania and the ACT have also introduced specific legislation recognising the contribution and role of carers: Carers Recognition Act 2004 (WA), Carers Recognition Act 2005 (SA), Carers Recognition Act 2006 (NT), Carers (Recognition) Act 2008 (QLD), Carers (Recognition) Act 2010 (NSW) and Carers Recognition Act 2012 (Vic). The definition of carers in the legislation is consistent at the national and state and territory levels. The Commonwealth legislation is not intended to exclude similar State and Territory laws. These acts, similar to the national legislation, do not contain enforceable obligations.

Recognition for carers may be supported through other mechanisms linked to the National Carer Recognition Framework. The report of the Inquiry into Better Support for Carers recommended that the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) ‘investigate the benefits of introducing a national carer card for recipients of Carer Payment and carer allowance in order to verify the relationship between a primary carer and care receiver’. The card was for use with government agencies, health professionals or other service providers, and provides concessions or discounts to holders. The Government response to this inquiry indicated that it would undertake this action. Recognition of carers may be enhanced with the introduction of a national carer card. It may be timely to consider whether a carer card could be used for a range of other purposes and extended to carers who do not qualify for the Carer Payment or Carer Allowance.

(ii) Anti-discrimination legislation

As outlined above in the section in relation to anti-discrimination legislation with regard to parents, amendments to anti-discrimination legislation at the state and territory level have made it unlawful to treat someone unfairly due to their caring, family or parental status or responsibilities. In some states and territories, for example, New South Wales, Victoria and the Australian Capital Territory discrimination against carer responsibilities or carer status is specifically referred to within the legislation. In other states discrimination against carers falls within definitions of family responsibilities and or parental status or parenthood.

However, the definition of recognised carer relationships varies within the different pieces of legislation in the States and Territories. For example in Victoria under the Equal Opportunity Act 2010 it is against the law to discriminate against someone due to their parental status or carer status.

A carer means:

- a person on whom another person is wholly or substantially dependent for ongoing care and attention, other than a person who provides that care and attention wholly or substantially on a commercial basis.

In contrast in South Australia in the Equal Opportunity Act 1984, a person with caring responsibilities is defined as:

(a) a person has caring responsibilities if the person has responsibilities to care for or support:

(i) a dependent child of the person; or

(ii) any other immediate family member of the person who is in need of care and support; and

(b) an Aboriginal or Torres Strait Islander person also has caring responsibilities if the person has responsibilities to care for or support any person to whom that person is held to be related according to Aboriginal kinship rules or Torres Strait Islander kinship rules, as the case may require.

As outlined previously, the Sex Discrimination Act 1984 offers carers only limited protection. Carers Australia note that ‘some carers may be theoretically protected from discrimination in employment under the Commonwealth Sex Discrimination Act 1984 as a result of their ‘family responsibilities’ this is restrictively defined and it is only based on the concept of an ‘immediate family member’. Carers Australia argues that this definition is too narrow and does not take account of care provided by extended family networks particularly evident in Indigenous Communities and carers from culturally and linguistically diverse backgrounds. Carers Australia suggests that the legislation should ‘recognise individuals with caring responsibilities’ as does the Carer Recognition Act 2010 (Cth). Carers Australia believes that carers should be protected against both direct and indirect discrimination over a range of areas of public life... All carers should be protected from discrimination in their own right’. They suggest that all anti-discrimination legislation should offer carers the same protection contained in some state legislation. For example, in Victoria, carers are provided with additional protection with respect to employment as there is a positive obligation for employers to reasonably accommodate requests for flexible working arrangements.
Overall the current legislative context acknowledges the social and economic contribution of carers and the vital role they play in sustaining those in need of support through carer recognition and amendments to anti-discrimination legislation at the Commonwealth and State and Territory level. However, variations in the definitions used and provisions mean that the level of protection provided by these laws varies.

(iii) Fair Work Act and the National Employment Standards

Carers are also recognised in the Fair Work Act 2009. Of the ten NES outlined previously currently only two are of direct relevance to recognising carers: personal/carer's leave and compassionate leave, the right to request flexible working arrangements, but only with respect to carers of a child with a disability aged under 18 years.

Personal/carer's leave and compassionate leave

All employees including carers are entitled to a minimum of 10 personal/carer's leave and two days of unpaid carer's leave. The eligibility criteria is the same as for parents as outlined previously. In order to be eligible, the carer must be providing care for a member of their ‘immediate family or household’ (ie a spouse, de facto partner, child, parent, grandparent, grandchild or sibling of an employee; or a child, parent, grandparent, grandchild or sibling of the employee’s spouse or de facto partner). As a result, a number of care relationships in wider kinship networks are not recognised in carer’s leave provisions.

Many working carers may not be eligible for carer’s leave due to the requirement that they must be employed continuously for 12 months with the same employer. As discussed previously, due to their caring responsibilities, a high proportion of women occupy casual and precarious employment and are therefore not entitled to access leave provisions. In addition, it has been argued that, ‘the consolidation of personal and carers’ leave has resulted in a depletion of personal leave for employees with caring responsibilities’. International studies report that carers use their annual and sick leave to provide support. Employees supporting people with high levels of need may use all their personal/carer leave entitlement to care for others. An additional period of dedicated paid carer’s leave would reduce the pressure on carers’ overall leave entitlement. Carers can also access 2 days of unpaid carer’s leave if a family member or a member of their household becomes ill. The adequacy of these leave entitlements in assisting carers to remain attached to the labour market may be problematic given the number who leave employment due to caring responsibilities.

An employee, including casuals, can take two days of compassionate leave for an immediate family member or a member of their household who has life-threatening illness or injury or who has died. The employer must pay the employee (except for a casual employee) at his/her base rate of pay. Although access to unpaid leave during this period no doubt assists carers in Australia at this emotionally difficult time, carers in other countries such Belgium and Sweden have access to paid palliative care leave over a considerably longer period of time. Australian employees do not have legislated access to longer leave periods for palliative care.

Access to, and use of, carer’s leave is important to support gender equality in unpaid caring responsibilities. In 2007, paid carer’s leave was available to both parents in around one-third of couple families, while neither parent had access in around 12 per cent of couples. Just over one-third of mothers and nearly one quarter of fathers had used unpaid leave to provide care.

Request for flexible working arrangements

The right to request flexible work arrangements is only available to those caring for a child who is under school age and those caring for a child with a disability under the age of 18 years. Therefore a substantial group of carers are not entitled to request flexible working arrangements. The ACTU and Australian Human Rights Commission submissions to the Post Implementation of the Review of the Fair Work Act 2009 recommended extending the right to request flexible working arrangements to employees caring for someone with disability, chronic illness and frailty. As outlined above with respect to parents, the request for flexible working arrangements can be refused by an employer due to reasonable business grounds, which is not defined in the Act, nor is there a formal appeals process if requests are refused.

In countries such as the UK and New Zealand the right to request flexible working arrangements has been extended to include the care of adults. Evidence from the UK suggests that many workers have access to some form of flexible working arrangements, including those not covered by the legislation. Evidence suggests that most requests for flexible working arrangements have been accepted by the employer. However, there is limited data available specifically examining the impact of the right to request on carers, but anecdotal evidence points to employers having a positive attitude to flexible working practices and that this assists carers to combine care and paid work and remain attached to the labour market. In addition employers also benefit from flexible working arrangements in terms of reduced staff turnover, higher retention rates and increased productivity.

(b) Income support and tax benefit support

There are three income support payments specifically for carers in Australia: Carer Payment, Carer Allowance, and Carer Supplement. However, carers may also receive other forms of income support such as the age pension or Disability Support Pension.

(i) Carer Payment

Carer Payment is divided into two categories: Carer Payment (adult) and Carer Payment (child under 16). Carer Payment (adult) is an income support payment for those who are precluded from supporting themselves in paid work because they are caring for someone...
with a disability, severe medical condition or who is frail or aged. In order to be eligible, the carer must be providing constant care in the home of the person they care for (and the care recipient must also be over the age of 16). The payment is means-tested on the income and assets of both the carer and the recipient of care. Carer Payment (child under 16) is an income support payment for people who are unable to support themselves in paid work because they are caring for a child with a profound disability or medical condition who has extremely high care needs. The payment is income and asset tested and paid at the same rate as Carer Payment (adult). The Government’s Pension Review recommended that eligibility for Carer Payment be linked more closely with the level of care provision rather than the use of a cap on the number of hours worked.

At March 2012, the maximum rate of payment for a single person was $695.30 per fortnight and for a couple was $524.10 each. Recipients of Carer Payment are only permitted to undertake up to 25 hours of education, training or employment per week. The strict eligibility criteria of providing constant care and the limited number of hours recipients can participate in paid employment may act as a disincentive to combining paid work and care responsibilities, especially if alternative care arrangements are not available or are too costly. Research reveals that carers in receipt of Carer Payment frequently work irregular or varying hours that may vary across weeks and fortnights, often determined by the changing nature of their caring responsibilities. Currently the work test on the Carer Payment does not allow for flexibility in the limits on hours worked.

Carer Payment can only be received by the primary carer. However, in some circumstances care may be provided by more than one carer. This is particularly the case in Indigenous communities. Thus the restrictive eligibility criterion does not recognise care provided by an extended network of support.

After the cessation of care provision due to the death of the person in receipt of support, a carer may receive an income support payment for a further 14 weeks. Although this provides carers with a transition period it is possible that they may find it difficult to re-enter the labour market if they have been out of the workforce for a considerable period of time. Research shows that the negative impact of caring on employment does not cease once caring ends.

Carers are eligible for assistance with training and skills development through Job Services Australia, although the effectiveness of these types of support for assisting carers to re-enter the workforce remains unknown.

(ii) **Carer Allowance**

Carer Allowance is divided into two categories: Carer Allowance (adult) and Carer Allowance (child under 16). Carer Allowance (adult) is a supplementary payment for carers who provide daily care and attention to an adult with a severe disability or medical condition or who is frail or aged. The payment may be paid on top of other government income support payments, including Carer Payment. To be eligible, the carer must be providing care in their own home or in the home of the care recipient. The payment is not means-tested, and at September 2012 was currently paid at the rate of $114.00 per fortnight.

Carer Allowance (child under 16) is a supplementary allowance paid to parents or carers who provide care for a child with a severe disability or medical condition who needs a lot of care and attention in the home. A parent or carer’s entitlement varies depending on the severity of the child’s disability. They may be entitled either to a Carers Allowance plus Health Care Card or to a Health Care Card on its own. The allowance is paid at the same rate as Carer Allowance (adult) and is also not means-tested.

However, in spite of the absence of a means test, eligibility hinges on the strict requirements concerning the recipient’s level of care need, with the carer providing a health professional’s report on the condition of the person receiving care and consequent level of care required. In 2007, the Allowance was accessed by less than 15 per cent of the total carer population. Recipients of Carer Allowance provide care for people with a wide range of medical conditions for adults the four largest of which include the following types of conditions: 28 per cent mental/behavioural, 23 per cent circulation, 23 per cent musculo-skeletal and 18 per cent nervous system conditions, which suggests a range of costs associated with the condition of the person receiving care. However, there is no flexibility in the amount of the Carer Allowance to accommodate those carers for whom the care expenses are considerably higher. Research has suggested that approximately a third of recipients of Carer Allowance were experiencing financial difficulty and some have suggested that the Allowance is too low, and should be increased.

(iii) **Carer Supplement**

Carer Supplement is an annual lump sum payment to assist carers with the costs of caring for a person with a disability or medical condition. It is paid on 1 July each year to people in receipt of Carer Allowance or Carer Payment. For those on Carer Payment, the supplement is $600. Those on Carer Allowance receive up to $600 for each person for whom they provide care. Those in receipt of part rate Carer Allowance may receive less than $600.

(iv) **Carer Adjustment Payment**

Carer Adjustment Payment is a one-off non-taxable payment to assist families with additional care needs for children aged between 0 to 6 years old who have had a sudden or severe illness of accident.
(c) Services

There are a number of government-funded services that are available to provide temporary or ongoing support for carers and people with disability, people with a long term illness or older frail people, however research shows that overall carers’ service use is low.\textsuperscript{318} The service system is complex and fragmented and many carers have to undergo multiple assessments.\textsuperscript{319} Services predominantly provide temporary or short-term relief from the demands of caring than support carers to participate in employment.\textsuperscript{320} Access to services is predicated on being identified as a carer and being assessed as requiring support. Often carers do not self-identify as a carer because they perceive the support they provide as an extension of an existing relationship.\textsuperscript{321} Many services within the health system often do not have effective strategies to identify carers, particularly young carers.\textsuperscript{322} One of the primary sources of support for carers in Australia is through the National Respite for Carers Program.

(i) National Respite for Carers Program

The National Respite for Carers Program (NRGP) aims to provide support to people who care for a friend or relative in the home. It provides carers with access to short term and emergency respite support in the community. The respite can be provided in the home, in day care centres, community cottage respite for overnight stays or in community activities. The program is funded by the Commonwealth Government but individuals using respite may be asked to pay a fee depending on the type of respite. It also provides information and support such as carer information and counselling services. Carers can access the program through their local Commonwealth Respite Carelink Centre.\textsuperscript{323}

(ii) Home and Community Care Program

The Commonwealth HACC program provides a number of care services to frail aged people and people with disability and their carers in the community. The Program provides services such as personal care, nursing care and allied health services, domestic assistance and home modification and maintenance, meal preparation, transport, and respite care. The Program was previously jointly funded by the Commonwealth and State governments. From July 2012 the Commonwealth Government assumed responsibility for the administration and funding of the program for people aged 65 years and over and Aboriginal and Torres Strait Islander people aged 50 years and over except in Victoria and Western Australia. State and territory governments will be responsible for the funding and administration of the services for people under 65 years or Aboriginal and Torres Strait Islander people under 50 years.\textsuperscript{324}

(iii) Community Aged Care Packages

Community Aged Care Packages (CACPs) are individually tailored care packages providing care to older people with low level care needs living in the community. They are provided for the most part by private not-for-profit providers and can provide a combination or personal care, social support, transport, help with meal preparation and help with the home and garden tailored to meet the needs of the recipient. In order to be eligible, an individual has to undergo an assessment by an Aged Care Assessment Team and be assessed as being in need of low level care. The Commonwealth Government provides a daily subsidy towards the cost of a CACP and the individual may be asked to pay a co-contribution depending on their means. The co-contribution is capped for full aged pensioners.\textsuperscript{325} The Commonwealth also funds packages to support people with high care needs to remain in the community. These are called Extended Aged Care at Home (EACH) packages.

(iv) Consumer Directed Care

A more recent development in support for people with disability, chronic illness and frailty and their carers is Consumer Directed Care (CDC). CDC is funded by the Australian Government to provide care recipients and carers with more control over the way in which the services they receive are provided. CDC is delivered through community aged care packages and through respite care (Consumer Directed Respite Care (CDRC)).\textsuperscript{326} CDRC are specifically designed to support carers of frail older people and people with dementia. Commonwealth Respite and Carelink Centres are funded to provide CDRC packages. The aim of the CDRC packages is to give carers more control over choosing which service they receive and when they are provided, although the Centres administer the budget and coordinate the provision of support.\textsuperscript{327} The evaluation of the program found qualitative and survey evidence that carers benefitted from receipt of the packages, particularly in terms of satisfaction. However, it was noted that CDRC participants had an annual CDRC package allocation to spend over a period of six months or less, and it is likely that the benefits and outcomes realised were to some extent due to the level of resources available during this initial period.\textsuperscript{328}

(v) Residential Aged Care

If an older person in need of care is assessed by an Aged Care Assessment team as requiring low or high level care, they can enter into a residential aged care facility. The Commonwealth Government pays a daily subsidy to the aged care facility – most of which are privately run by for profit and not-for profit organisations- for each resident based on the resident’s care needs. Residents will pay one or more fees based on their income and assets.\textsuperscript{329}
The current policy and legislative context in Australia acknowledges the social and economic contribution of unpaid carers and the vital role parents and carers play in sustaining those in need of support. A number of aspects of employment and anti-discrimination legislation provide recognition of employees’ caring responsibilities, by both parents and carers. This legislation provides some protection to employees with family and carer responsibilities with respect to access to paid and unpaid leave and the right to request changes in working arrangements for certain employees. However, variations in the definitions used and provisions mean that the level of protection provided by these laws is governed by where a carer resides. Access to many workplace entitlements does not take account of the working conditions of many women who are employed casually and in non-traditional employment. Therefore, these frameworks often reinforce, rather than positively address, the gendered nature of the distribution of care responsibilities, perceptions of the ideal worker and the types of jobs available to parents and carers. If parents and carers are to have a real choice about participation in paid work and providing care in order to ameliorate the inequalities embedded in women’s retirement income, the current and future legislative frameworks and policy development must also address the following issues: more equitable sharing of care responsibilities across gender and over time, pay equity, decent working condition that recognise workers’ multiple responsibilities which vary over the lifecourse and the provision of accessible and appropriate services to support combining these responsibilities.
7. Technical Paper F: Workplace initiatives and workplace culture

“The public ‘crisis of care’ is not that no one is providing care but rather that this care is costly for those who provide it.”

Demographic and policy changes have resulted in increasing numbers of women, and men, who have caring responsibilities while employed. However, the provision of care has a negative impact on unpaid carers’ participation in employment and work hours. In addition, carers are more likely to leave employment than reduce their work hours when taking on caring roles. This has a significant impact of carers’ income over the lifecourse putting them at risk of poverty in later life and poor mental health. Trying to juggle paid work and care responsibilities can adversely impact on carers’ career progression and work performance. The provision of support also has a long-term negative impact on participation in employment and income. When caring stops or the level of need decreases, carers often find it difficult to re-enter the paid workforce.

This paper first provides an overview of current entitlements in the Fair Work Act that value and recognise unpaid carers (parents and carers). Policies and initiatives designed to facilitate combining work and care, such as flexible work hours, together with workplace cultures and barriers to reconciling paid work with care are then discussed. Next case studies of Australian and international innovative practices in businesses and corporations based on flexible work policies, return to work programs and initiatives to support carers which are designed to enhance their capacity to undertake both working and caring roles, while also assisting carers to remain in or re-enter paid work when the level of support required decreases, are outlined. The final section reviews some evaluative research on the effectiveness of these practices and policies.

7.1 Current workplace mechanisms

(a) Overview of entitlements available to parents and carers in the Australian context

Carers require time to undertake their caring responsibilities. Access to paid and unpaid leave entitlements are crucial for parents and carers if they are to have a choice about the nature and extent of their caring activities, while providing job protection to maintain their attachment to the labour market and facilitate workforce re-entry. Access to paid leave lessens the impact of time spent caring on both current and future income and retirement savings.

In Australia parents and carers are recognised within employment legislation through their entitlement to various leave provisions in the Fair Work Act 2009. These provisions, outlined in more detail in Technical Paper E, include: parental leave, personal/carer’s leave and compassionate leave and requests for flexible working arrangements. Under the National Employment Standards (NES) at a minimum each parent can access a separate period of up to 12 months unpaid parental leave after the adoption or birth of their child. Parents have the option to begin their unpaid parental leave six weeks prior to the birth or adoption, on the date of birth or adoption or within 12 months of the birth or adoption. The parents have to take most of the leave at separate times, and the leave has to be taken in a single continuous period, except for ‘concurrent leave’ which is a maximum of three weeks of unpaid parental leave which can be taken at the same time starting after the birth or adoption of the child. All employees including parents and carers, who have been employed continuously for 12 months or more with the same employer, are also entitled to up to 10 days personal/carer’s leave to support a member of their immediate family or household if they are ill or if an emergency arises. In addition all employees including parents and carers are entitled to two days of unpaid leave per occasion, once their paid leave entitlement have been exhausted.
Parents of children under school age and carers of children with disability under 18 years of age also have a right to request flexible working arrangements under the NES. This provision assists parents and carers to meet both their paid work and care responsibilities by providing flexible options in terms of work hours, varying start and finishing time and the location of work. As noted in Technical Paper E the right to request legislation has been introduced in response to the needs of parents returning from parental leave and has only recently been extended to some carers. As a result, to date the needs of a significant number of carers of adults with disability, chronic illness and frailty due to ageing to work flexibility have been overlooked. However, in August 2012 the final report of the Fair Work Act Review, recommended amending s.65 of the Act ‘to extend the right to request flexible working arrangements to a wider range of caring and other circumstances, and to require that the employee and the employer hold a meeting to discuss the request, unless the employer has agreed to the request.’

(b) Part-time work

Part-time work is an important mechanism for women and men to undertake unpaid care and paid work responsibilities. Nearly half (46 per cent) of female employees worked part-time compared with 16 per cent of employed men. Australia has ratified the ILO Part-Time Work Convention, 1994 which requires that part-time workers receive pro-rata equal remuneration and the same protections as full-time workers.

Many parents and carers work part-time to better manage their care responsibilities. However, many work in casual positions and are precariously attached to the labour market due to their caring responsibilities. This has a negative impact on their income levels over the lifecourse and therefore retirement income and savings.

While the promotion of opportunities to combine part-time paid work and care responsibilities through part-time employment is important, the inequitable outcomes for carers with respect to retirement incomes and savings must be considered.

7.2 Barriers

(a) Workplace culture

Workplaces that promote a culture of long hours of work and a perception that workers should be unencumbered by responsibilities outside of their job make it difficult for carers to ask for assistance to undertake their work and care responsibilities. Research has found that carers are dedicated employees but excessive work pressure and a lack of flexibility are barriers to combining paid work and responsibilities.

Research shows that access to flexibility in the workplace assists carers to remain in and re-enter employment. Research has found that carers tended to use policies which were available to all employees so as not to highlight their caring responsibilities at work. Workplace flexibility can also be beneficial for employers in terms of reducing staff turnover and increased employee satisfaction and productivity. Supportive management and human resources departments are vital and influence the take up of workplace flexibility options by carers.

If employed carers are to have real choices about participation in paid work they require decent work conditions. The organisation of work and the structure of job design based on the notion of an ideal worker who is male and works full-time without other responsibilities fail to take account of the lived experience of many workers, both women and men. To better accommodate care and work responsibilities changes to workplace cultures are required including: realistic work hours; reasonable workloads; increased options for flexibility; and support for employed parents and informal carers.

7.3 Case studies of Australian and international workplace initiatives to support unpaid carers

A number of innovative mechanisms have been implemented in a range of businesses and corporations in Australia and internationally. These include integrated carer strategies operating at all levels within the organisations; time to care through access to flexible work schedules; reduced work hours; changes in work location; access to support, such as information and referral to services, and direct services provision to support employed carers; and financial assistance such as cash payments for services and subsidies.
There are three main types of support for employed carers in the workplace. These can be categorised as provisions that provide time, support and financial assistance. Carers need time to provide care and entitlements to paid and unpaid leave provisions, the ability to vary work hours and access to flexible working arrangements, such as flex-time and job-sharing, that enables them to juggle both work and care responsibilities as needs change over time. In some instances employers also provide services to support employed carers, including training programs to increase awareness of the needs of carers and the provision of information about services through toolkits. Direct services can also be provided by employers to assist carers, such as on-site day care and eldercare facilities. Some employers offer financial assistance to carers in the form of cash subsidies to assist them with the costs of caring. Financial assistance can also include dependent care tax credits.

A number of companies have a strategic and integrated approach to supporting carers that encompasses leadership and a commitment from senior managers to raise awareness of the importance of supporting carers within the workplace. Table 2 contains examples of companies that provide such support. For example RailCorp in Australia has a Carer’s Register designed to assist employees who support an immediate family member or member of their household who have a permanent or long term illness or disability. The aim of the register is to reduce the level of bureaucracy attached to approval processes for carer’s leave, provide relevant information to carers and opportunities for carers on the register to network. In addition RailCorp holds an annual forum for employees with carer’s responsibilities with speakers from organisations such as Carers NSW, Alzheimer’s Australia, Working Carers Gateway, Life Institute and the Employee Assistance Program to provide relevant information.

A number of companies, particularly overseas companies, such as Johnson and Johnson (US), offer services to employees free of charge in order to retain employees. The services provided include:

- an assessment of the care recipients’;
- help with planning and coordinating services;
- respite care -fixed number of hours annually; and
- referrals to services.

Another form of support available to employed carers from employers is financial assistance. For example, Novartis France in France provides staff with material and financial support for care costs, to a maximum amount of €900.
7.4 Overview of workplace initiatives that support unpaid carers

A summary of the different types of support available to unpaid carers is provided in Table 1.

<table>
<thead>
<tr>
<th>Integrated Carers’ Strategy</th>
<th>Time and Leave</th>
<th>Services Information and Advocacy</th>
<th>Direct to support carers</th>
<th>Financial Assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>A strategic and integrated approach to support embedded at all levels of the organisation.</td>
<td>Flexibility is mainstreamed and tailored to the needs of the employee.</td>
<td>Information and advice is provided to employees and carers’ networks are encouraged, funded and supported.</td>
<td>Care-related support and direct services are freely available to employees.</td>
<td>Financial assistance provided to carers.</td>
</tr>
</tbody>
</table>

Integrated Approach:
- Survey employees with caring responsibilities
- Advice from a specialist consultancy
- Evaluation of existing workplace mechanisms
- Carer Strategy
- Carer Policy
- Carer Register to identify and assist employees with caring responsibilities
- Carer strategy - monitored, evaluated and updated.

Leadership Commitment:
- Dedicated position to focus on advocacy and programs for working carers
- Senior business champions to raise awareness of the carers strategy
- Internal and external advocacy for support for carers

Flexible Work Schedules:
- Compressed work weeks
- Flex-time
- Cross-trained employees

Reduced Work Hours:
- Part-time work
- Job-sharing
- Voluntary reduced time
- Phased retirement and return to work

Leave:
- Paid family leave
- Paid carer’s leave
- Personal time (earned time)
- Extended unpaid leave as required

Work Location:
- Work from home
- Work in the same location as the person requiring care

Education and Training:
- Education seminars tailored to employee needs
- Awareness-raising via emails, publications, research partnerships
- Training programs/modules to raise awareness and to increase the capacity of managers to support carers
- Training programs/modules for carers – face-to-face, on-line, CD

Information resources:
- Toolkit for employees with caring responsibilities
- Toolkit for managers
- On-line caring resources and community
- Corporate libraries
- Newsletters, guides, factsheets

Networks and Forums:
- Employee Carers Network
- Annual carer’s conference for employees

Employee assistance programs:
- Individual counselling
- Family counselling
- Wellness programs
- Support groups
- Crisis intervention

Direct Services:
- Carers Assessment
- Professional advice and information
- Referral services
- Partnerships with community groups or organisations
- Access to health services
- Resources for long distance carers
- Back-up or emergency care
- Before/after school and vacation care

On-site facilities:
- Child care centre
- Adult day centre
- Transport services

Cash and Subsidies:
- Cash or payment for costs related to caring work
- Subsidies, monthly allowances, vouchers, discounts for care
- Interest free loans

Tax and Insurance:
- Dependent care tax credit
- Insurance products and benefits
- Tax-related incentives and benefits

Note: Data in the table was compiled by the Australian Human Rights Commission, based on information reproduced from the Eurofound database and various reports and internet sources.
Table 2: Case studies of workplace initiatives to support carers

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<tr>
<th>Integrated Carers’ Strategy</th>
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<tr>
<td>UBS (US) implemented a carer’s strategy, including appointing a top-tier carers champion to raise awareness and drive forward the strategy.</td>
<td>US Chamber of Commerce (US) provides 10 days paid family leave to assist a family member of any age.</td>
<td>East Sussex County Council (UK) has a comprehensive toolkit for managers to support employees with caring responsibilities.</td>
<td>East Sussex County Council (UK) offers a Carers Assessment – a chance for employees to tell the County Council what they need as a carer, and find out what services might be available to help them. Carers can have their own assessment even if the person they care for has refused an assessment or support services for themselves.</td>
<td>Hertfordshire County Council (UK) offers child care vouchers through salary sacrifice.</td>
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<td>Emory University (US) undertook a planning process to determine how they would design their eldercare program. The university completed several assessments and evaluations of employees to identify need among its workforce including:</td>
<td>Johnson and Johnson (US) provides employees a week of paid work, family and personal time – in addition to sick leave. Managers are expected to support caregiving employees, as aligned with the company's culture and support for work, family and personal life.</td>
<td>Emlem Health (US) has a 'Share the Care' group which is managed by a social worker and includes a series of sessions that last 10 weeks. This program assists employees to support each other in their caregiving effort and help one another develop solutions to problems that arise.</td>
<td>ATandT (US) offers employees and their spouse access to telephonic elder care support group which meets weekly. The Group is facilitated by an elder care counsellor.</td>
<td>Nova Gráfica (Portugal) has a financial support scheme which assists employees with additional expenses related to informal care on a case-by-case evaluation, e.g. travel and accommodation expenses when obtaining medical assistance located away from the region.</td>
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<td>UBS (US) surveyed its employees to identify the numbers and types of carers within the company; audited its care support policies; and held focus groups with carers to elicit their concerns.</td>
<td>Intel (US) 'Life Event Leave,' telecommuting options to expand flexibility and flexibility in managing doctor's appointments or other required work-schedule appointments.</td>
<td>East Sussex County Council (UK) has a comprehensive toolkit for managers to support employees with caring responsibilities. The toolkit covers support provided by the Council, other organisations and what the manager should do to support the employee.</td>
<td>Fannie Mae (US) offers Eldercare consultations (in-person or remotely). The consultation service can be used for any care situation facing the employee including care for in-laws and grandparents. Consultations can also include conference calls with siblings and joint consultations with spouses.</td>
<td>Gebalis (Portugal) provides monthly subsidy of €100 to employees with children who have a disability; pays 80 per cent of employees’ monthly contributions to private health insurance.</td>
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<td>Nova Gráfica (Portugal) extended the paid period of leave has been provided to assist family members beyond legislative minimum.</td>
<td>Nova Gráfica (Portugal) has a financial support scheme which assists employees with additional expenses related to informal care on a case-by-case evaluation, e.g. travel and accommodation expenses when obtaining medical assistance located away from the region.</td>
<td>Novartis France (France) has a working cheque service which provides staff with material and financial support for care costs, financed to a maximum amount of €900.</td>
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<td>RailCorp (AUS) maintains a Carer’s Register assisting employees who are caring for an immediate family member or member of their household who have a permanent or long term illness or disability. This allows for a less bureaucratic approach to approving carer’s leave, the processing of medical certificates and the ability to offer up-to-date information and network opportunities for registered carers.</td>
<td><strong>Gebalis</strong> (Portugal) implemented a policy so carers have 10 hours of special leave per year, and one day of leave after or before any national holiday to support family events.</td>
<td><strong>University of Auckland</strong> (NZ) has a portal to provide resources and initiatives for employees with carer and family responsibilities; provides a toolkit to employees on combining parenting and career.</td>
<td><strong>US Chamber of Commerce</strong> (US) provides back-up care consisting of subsidized in-home care for older adults. The employee out-of-pocket cost for the care is approximately $6 per hour and each employee is eligible for up to 20 days of subsidized care.</td>
<td><strong>Warsaw City Hall</strong> (Poland) provides repayable aid in the form of a loan for housing covers costs such as adapting a home to meet the needs of a family member with a disability. The City Hall also provides non-repayable material aid, provided in financial form or non-cash form. Finally, co-financing of various forms of leisure for employees and members of their families is also available.</td>
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<td><strong>UBS</strong> (US) is planning to engage a specialist consultancy with the expertise to apply a ‘care lens’ when developing policies and processes. They would also provide industry market research to help evolve the strategy; offer advice on producing a tracking tool to measure progress and highlight changing trends; and deliver an employee helpline.</td>
<td><strong>T-Mobile Austria</strong> (Austria) Work time flexibility is embedded in the workplace culture and actively encouraged. Policy of making as many positions as possible available on a part-time basis.</td>
<td><strong>Weleda NL</strong> (Netherlands) Savings plan to finance leave of absence in the future. Carers can buy extra leave hours, up to 37.5 hours per year. Five extra paid care leave days per year are available for specific situations.</td>
<td><strong>Johnson and Johnson</strong> (US) the program is offered free to employees to maximize participation. Services are provided by a third-party vendor and include:</td>
<td><strong>Edward Szczeklik</strong> Specialist Hospital (Poland) offers co-financing of a stay in a rehabilitation centre for children with a disability and their guardians. The hospital covers 50 per cent of the total cost to employees who have children with a disability. A non-repayable benefit may be granted in cases of financial hardship because of an illness suffered by themselves or a member of their family.</td>
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<td><strong>Nova Gráfica</strong> (Portugal) is a member of the national network of social responsibility, and various other company networks. It has benchmarked its practices in the regional context as well as at national level.</td>
<td><strong>Novartis France</strong> (France) ‘Credit-hours scheme’ provides two hours paid leave per month for carers.</td>
<td><strong>East Sussex County Council</strong> (UK) offers employees a carers’ website with a range of guidance and to help their dependent with everyday living, their safety and wellbeing and making it easier to get around. There is also guidance on eligibility for support services, assistance to locate providers of care and support services to help them remain in their own homes, or information about finding care homes if dependents are unable to remain in their own home.</td>
<td><strong>Bank Pekao SA</strong> (Poland) ‘Let’s help each other’ makes innovative use of a provision in Polish tax regulations. The scheme allows employees to donate their 1% to employees who are either chronically ill themselves or whose children have a long-term illness.</td>
<td><strong>RailCorp</strong> (AUS) holds annual forums specifically for employees with carer’s responsibilities with speakers from Carers NSW, Alzheimer’s Australia, Working Carers Gateway, Life Institute and the Employee Assistance Program to provide vital information for our employees with carer’s responsibilities.</td>
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<td><strong>Gebalis</strong> (Portugal) has a policy of social responsibility and is a member of various networks of companies, and collaborates with other organisations to exchange experiences and disseminate best practice. <strong>T-Mobile Austria</strong> (Austria) has the role of a Commissioner for work-life balance and leave management, with responsibility for ‘leave and reintegration’, all issues concerning work-care reconciliation. <strong>Novartis France</strong> (France) launched a set of measures to provide more effective support to working carers, with an internal document published and distributed to all employees that uses the concept of a ‘care life cycle’ to describe how working carers can address care-related challenges. Proposed measures are designed to support working carers at each stage of a typical caregiving arrangement. <strong>Warsaw City Hall</strong> (Poland) established an ‘Employee Social Benefit Fund’ providing various kinds of financial assistance to employees, intended for those in a difficult living, familial or material situation.</td>
<td><strong>US Navy</strong> (US) – has piloted a ‘career intermission program’ in 2012, which provides for up to three years unpaid leave for further education or care purposes. <strong>Caltex</strong> (Australia) has a Baby Care Bonus – which provides workers with four 3 per cent return-to-work bonuses over the first year a primary carer parent return to work after parental leave. <strong>Westpac Group</strong> (Australia) provides parental leave benefits comprising up to 104 weeks parental leave (13 weeks paid and the remainder as unpaid), and was the first private sector company to pay up to 39 weeks superannuation contributions on the unpaid parental leave portion. The Group also offers unpaid grandparental leave of up to 52 weeks to be the primary care giver of a grandchild. This leave can be taken flexibly.</td>
<td><strong>Kimberly-Clark</strong> (US) has a family caregiver network which supports the informational needs of family caregivers and increases awareness of managers about employees with caregiving responsibilities. <strong>First Market Bank</strong> (US) developed ‘Lift Caregiving’ (liftcaregiving.com) which is now available to the public. It includes online social support network with resources, discounted products that can be purchased by caregivers, and professional FAQ. <strong>Fannie Mae</strong> (US) provides lunch-time education seminars for carers that can be accessed in person, online or dial-in. <strong>Novartis France</strong> (France) has a guide which provides information and practical advice to working carers at each phase of the caring situation as it evolves. Novartis also provides specific training module for managers developed with the support of a professional training organisation. In addition, two multimedia applications containing practical advice about common problems faced by working carers are provided.</td>
<td><strong>CBS</strong> (US) offer their employees back-up elder care through Bright Horizons. The services are available across the nation and provide in-home emergency care to the employees’ elder family members. Employees can use as many as 15 days a year for only $4 an hour. Employees are also supported by Health Advocate, a vendor that provides information about Medicare, benefits and insurance needs. Employees, their parents and parents-in-law are eligible to receive informational support from Health Advocate. <strong>Suncoast Hospice</strong> (US) provides a Pilgrimage program – a holistic spiritual approach to supporting caregivers which includes aromatherapies, massage, and energy work. <strong>EDF South-West</strong> (France) has an arrangement with housework services companies that help carers in a range of areas, i.e. shopping, making appointments with the doctor and dry-cleaning. Health and well-being modules are also available for carers through a referral from the company doctor.</td>
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<td><strong>EDF South-West</strong> (France) launched a set of measures for all kinds of working carers, which were developed and implemented in consultation with employees’ representatives, managers, OHS experts and the carers themselves.</td>
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<td><strong>EDF South-West</strong> (France) has a guide providing information on care issues to raise awareness among managers and other employees, and inform carers about their rights and the existing support services. EDF also has an online database, available on the intranet that lists websites and several support services to help carers to manage their daily activities. <strong>Eircom</strong> (Ireland) has ‘Diversity Share Point’ – an internet portal for employees, providing information for carers, including lists of nursing homes, social welfare entitlements, and available supports. <strong>General Local Health Insurance Fund – AOK Hessen</strong> (Germany) has a training module comprising five parts – need of care/types of care, financial and legal issues, dementia, the recognition and treatment of depression in old age, and practical support in everyday care.</td>
<td><strong>General Local Health Insurance Fund – AOK Hessen</strong> (Germany) An ‘emergency care file’ is intended to prepare employees for a ‘sudden need’ of relatives, due to an accident, disease, or care requirements. The Diversity Management Unit provides consulting services, with a view to assisting the process of developing individual solutions for private care. For intermediation, an external company is contracted to help employees find specific care facilities, when the need arises.</td>
<td><strong>5 Boroughs Partnership Trust</strong> (UK) a ‘Carer’s assessment’ gathers information about each employees’ specific responsibilities and any gaps in their benefits. <strong>Centrica</strong> (UK) provides a confidential helpline available to all employees and, specifically for carers, advice is provided on financial assistance and support. Family members can also use the helpline. Counselling for carers can also be made available through their line manager.</td>
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**Eircom** (Ireland) has initiatives focus on the broad range of carer needs that apply to employees, including those who care for disabled or sick children and adults, as well as elderly relatives. Carer support initiatives are managed in an integrated manner across the organisation. **Edward Szczeklik Specialist Hospital** (Poland). Support measures are financed by the hospital’s Employee Social Benefit Fund (ZFSS). **General Local Health Insurance Fund – AOK Hessen** (Germany) ‘Profession and Care Service’ initiative comprises four types of services for carers – information, consultation, intermediation, and training. **Centrica** (UK) provides a confidential helpline available to all employees and, specifically for carers, advice is provided on financial assistance and support. Family members can also use the helpline. Counselling for carers can also be made available through their line manager. |
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<td><strong>BT (UK) ‘Helping You Care’</strong> outlines the policy and approach to supporting employees who are carers.</td>
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<td><strong>5 Boroughs Partnership Trust (UK) The ‘Carers Inside Out’ policy.</strong></td>
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<td><strong>BT (UK) offers a toolkit of support for working carers which includes:</strong> a ‘carer’s passport’ describes the nature of the caring responsibilities and adjustments that the individual might need to make; factsheets provide guidance on practical tasks relating to caring, such as where to apply for carer’s allowances.</td>
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<td><strong>Eircom (Ireland) an in-house EAP support service provides advice and guidance to employees and their families.</strong></td>
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<td>BT carers’ network has over 200 members and runs a ‘knowledge call’ – teleconference for carers to find out what works for them in their working life.</td>
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<td><strong>5 Boroughs Partnership Trust (UK) conducts staff training events for carers; developing a ‘carers’ champion’ initiative – rolling programme of workshops focusing on carers’ issues and work with other agencies to support local carers’ strategies.</strong></td>
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<td><strong>Westpac Group (Australia) – has developed a number of toolkits including a Working Parents Toolkit, an Eldercare Kit and a Flex-E Toolkit, which provide information on the Group’s policies and available services in the community.</strong></td>
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**Note:** Data in the table was compiled by the Australian Human Rights Commission, based on information reproduced from the Eurofound database and various reports and internet sources. [565]
(a) Programs and initiatives that support flexible work

Workplace flexibility is promoted in a number of companies. For example at T-Mobile Austria flexible work time is embedded in the workplace culture and flexibility is actively encouraged through their policy to make as many positions as possible available on a part-time basis. Further details are provided in Table 3.

In Australia a number of companies have a range of policies promoting flexibility such as IBM. IBM offers flexible work options which allow employees to make changes to the way they work and manage their work and personal needs. These include: individualised work schedules, compressed or flexible work weeks, part-time work, job sharing, working from home and leave entitlements, such as paid parental leave, self-funded leave, personal work/life leave, study leave, leave of absence, religious observance and floating cultural holiday.

(b) Programs and initiatives that support return to work

Research shows that carers often find it difficult return to paid work when caring demands are reduced or cease. Table 4 provides examples of companies that have developed return to work programs, although the availability of these types of programs are limited and they are not specially designed to support carers. One company, Goldman Sachs in the US, has a ‘Returnship program’ which was launched in 2008. It involves a ten-week program aimed at preparing the employee to transition back into the workforce. Returning employees are able to up-date their skills or develop new skills.

In the UK Towry Law also has a ‘Return to work program’ which recruits and train people who have either taken a career break due to having children or those who are seeking to change their career. The program offers flexible working hours, choice of location, structured training programs and an opportunity to gain professional qualifications if the program is completed.
### Table 3: Flexible work programs

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<th>Organisation</th>
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| T-Mobile Austria      | 1,400              | Telecommunications          | Workplace flexibility is embedded in the workplace culture and actively encouraged, and appears to be the norm than the exception. The approach is based on the assumption that each case requires its own solution, and challenges are treated individually. The following initiatives/policies are in place:  
• operates a strict policy of making as many positions as possible available on a part-time basis, when a job becomes vacant, it is formally assessed whether it may facilitate part-time employment;  
• a strategy that aims to enable more men to work part-time;  
• employees are free to plan and initiate job-share arrangements;  
• a formal ‘Mobile Working’ scheme was to be launched in March 2011, in the medium term, the plan is to assess all job positions as to their general suitability for mobile working;  
• established a ‘Commissioner for work–life balance and leave management’, a part-time role with responsibility for ‘leave and reintegration’, with the responsibility for all issues concerning work–care reconciliation, providing expert advice to any stakeholder within the company, and representing the interests of employees on leave.  
In 2010, the company was ranked among the 10 ‘best places to work in Austria’ (in the category of companies with more than 250 employees) by the ‘Great Places to Work Institute’. | http://www.eurofound.europa.eu/areas/populationandsociety/workingcaring/cases/at001.htm  
http://www.t-mobile.at/unternehmen/karriere/benefits/index.html |
| IBM (Australia)       | 433,362 worldwide  | Information and technology  | Has a range of diversity and flexibility policies. Offers flexible work options which allow employees to make changes to the way they work and meet their work and personal needs. IBM underpins its work/life vision with, policies and programs to support our employees. Flexibility@work includes:  
• Individualised work schedule  
• A compressed or flexible work week including: part-time work, job sharing, working from home when your role allows, flexible Leave – offers a range of leave entitlements (paid parental leave, self-funded leave, personal work/life leave, study leave, leave of absence, religious observance and floating cultural holiday. | http://www-07.ibm.com/employment/au/diversity/worklife_integration.html |
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<td>Deloitte LLP (US)</td>
<td>45,000</td>
<td>Accounting and consulting</td>
<td>Deloitte has long had a culture that supports the work-life effectiveness of employees through informal flexibility and formal flexible work options. In keeping with its tradition of leadership, Deloitte is redefining how careers are built using an innovative framework, Mass Career Customization (MCC). MCC applies to all employees. MCC is mainstream and foundational, and it is embedded in the talent management systems and processes of the organisation. The MCC framework deconstructs careers into four dimensions: Pace, or how quickly an employee assumes increasing levels of responsibility (scale ranges from decelerated to accelerated). Workload, or the quantity of work performed (scale ranges from reduced to full). Location and schedule, or where and when work is performed (scale ranges from restricted to not restricted). Role, or the category of an employee’s position, job description, and responsibilities (scale ranges from individual contributor to leader). The MCC provides a structured approach that facilitates collaboration between employees and their managers to design career paths that make sense within their broader life contexts. Rather than a straight line, professional career trajectories increasingly look more like sine waves, with rising and falling levels of engagement over time.</td>
<td><a href="http://mycareer.deloitte.com/us/en/life-at-deloitte/careerlifefit/masscareercustomization">http://mycareer.deloitte.com/us/en/life-at-deloitte/careerlifefit/masscareercustomization</a></td>
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| DuPont (global)     | 67,000 worldwide | Science and innovation | Efforts to address the work-life issues of employees are a fundamental element that serves to attract, retain, and motivate a highly talented workforce. Work-life management has become a part of leadership training for new managers. The training helps managers see flexibility as a tool for driving performance and reinforces the idea of striving for mutual solutions that benefit both employees and the company. Work-life support is also embedded in the company’s diversity training, which emphasizes that respect is a core principle and that recognizing employees’ personal situations and need for flexibility is an extension of that organisational core value. DuPont’s approach to expanding work-life support to employees around the globe has been a success. It encourages employees to meet their work and personal responsibilities, through a range of programs, including the following flexibility measures:  
• Guidance Resources to manage work/life responsibilities with practical advice, useful materials and local referrals and offers personalized and confidential consultation with experienced counsellors on topics such as:  
  - Parenting  
  - Education information and college planning  
  - Caring for adults, parents and older relatives.  
  - Caring for yourself  
  - Career planning.  
Flexible Work Practices have been designed to help better balance the needs of both the business and the employee, and are encouraged because they can help employees juggle their personal obligations while managers try to seek a creative and productive means of meeting the business needs. A variety of options can be assessed. | http://www2.dupont.com/Career_Center/en_US/life_at DUPONT/worklife_balance.html |
| RSM McGladrey (US)  | 8,000         | Accounting and consulting | Consistently wins awards and receives recognition for the raft of its workplace flexibility policies and initiatives. Its Flexible Work Options programs are offered to employees at all levels of the organisation:  
• measuring WorkLife goals is an important component of every employee’s performance review process  
FlexYear enables employees to take a portion of the year off while working full-time the remainder of the time. They receive a prorated paycheck, along with full benefits, similar to a teacher’s contract. This is an attractive option for parents who want to spend time with children during summer vacations; also has adoption, paternity, wellness, Coach-on-Call and other family-friendly benefits; a culture of flexibility is created by senior executives encouraging employees to take advantage of these benefits. | http://mcgladrey.com/  
Mother%E2%80%99s-100-Best-Companies%E2%80%9D.aspx  
http://www.employflex.com/node/212 |
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<td>Commonwealth Bank (Australia)</td>
<td>52,000</td>
<td>Banking</td>
<td>As part of its Opening the Door for Gender Diversity initiative, the CBA embarked on a progressive approach to building a flexible workplace. CBA has implemented a range of practices that replace the traditional emphasis on face time and ‘presenteeism’ so common in financial services with a focus on results. Based on a 2011 survey, the number of women and men working a formal or informal flexible work arrangement has increased from 35 per cent in 2008 to 41 (of employees who responded to the question) in 2011. The percentage of men who reported using flexibility was 36 per cent in 2011. Innovative flexibility programs available to all employees include: • Formal Flexible Work Options and Leave Programs – include flexible working hours, location of work (including telecommuting), part-time work and job-sharing opportunities. • Maternity Leave Register – some business units have enacted specific programs, such as a Maternity Leave Register, a listing of open job opportunities accessible to women on leave that allows them to apply for roles and prevents them being passed over for critical advancement opportunities. • Career Breaks – anyone can take from several months up to three years off to pursue a goal through a sabbatical or general time-out. • Additional Purchased Leave – employees can purchase up to four weeks of additional leave a year as a form of self-funded leave. Also implemented the Unconscious Bias (UB) Training. Piloted in July 2010, this mandatory in-depth program for General Managers and above was rolled out in February 2011 to equip leaders with the skills to recognize and understand their internal biases, communicate about them with their teams, and take steps to overcome them. Integrated into CBA’s broader diversity strategy and endorsed by the Diversity Council as a specific tool to help achieve the diversity target, this program aims to change mindsets and behaviours and drive specific actions to counteract bias.</td>
<td><a href="http://www.catalyst.org/press-release/201/catalyst-honors-initiatives-at-commonwealth-bank-of-australia-and-sodexo-with-the-2012-catalyst-award">http://www.catalyst.org/press-release/201/catalyst-honors-initiatives-at-commonwealth-bank-of-australia-and-sodexo-with-the-2012-catalyst-award</a></td>
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<td>• Carer's leave policy – which allows employees to care for someone in their</td>
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<td>family or someone they live with who has no-one else to care for them,</td>
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<td>when they are sick or injured, recovering from surgery or involved in an</td>
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<td>emergency. Carer's leave can be taken as paid or unpaid leave, or employees</td>
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<td>can take paid carer's leave if they have accrued sick leave available.</td>
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<td>• Parental leave – employees are entitled to take up to 104 weeks of</td>
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<td>parental leave, including 13 weeks paid parental leave, any annual or</td>
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<td>long service leave they choose to take or unpaid parental leave. In 2010</td>
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<td>Westpac Group became the first private sector company to pay superannuation</td>
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<td>on unpaid parental leave.</td>
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<td>• Grandparental leave – allows eligible employees to take a total of 52</td>
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<td>weeks of unpaid grandparental leave for the birth or adoption of each</td>
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<td>baby/child or multiple births.</td>
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<td>7.5 A wide range of other flexible work options are also available,</td>
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<td>recognising that parents or those with other caring responsibilities may</td>
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<td>need different types of flexibility depending on who they are caring for</td>
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<td>and their circumstances. These may change during the lifetime of children</td>
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<td>or other dependants.</td>
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<td>7.6 The Westpac Group has also developed a series of Toolkits to provide</td>
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<td>employees with further information and support to assist with the demands</td>
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<td>of their caring responsibilities. These include:</td>
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<td>• The Working Parents Toolkit offers practical information on preparing</td>
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<td>for parenthood and support in thinking through their return to work options.</td>
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<td>A quarterly newsletter ensures individuals are informed on Westpac Group</td>
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<td>news and offers career management tips and tools. Employees also have</td>
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<td>access to a forum providing support for their return to work when parental</td>
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<td>leave finishes.</td>
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<td>• For employees who care for an older dependant, the Eldercare Kit helps</td>
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<td>people understand the services available to them such as what is available</td>
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<td>in the community, information on specific government and community services</td>
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<td>and checklists to guide their decision-making.</td>
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<td>• The flex-e toolkit is designed to help people leaders implement flexible</td>
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<td>working at The Westpac Group. It includes detail on available flexible work</td>
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<td>options such as part-time, job share arrangements, working from home,</td>
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<td>condensed hours, career breaks or leave without pay.</td>
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Note: Data in the table was compiled by the Australian Human Rights Commission based on information from the Eurofound database and various reports and internet sources.
### Table 4: Return to work programs

<table>
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<tr>
<th>Organisation</th>
<th>Size</th>
<th>Industry</th>
<th>Initiative</th>
<th>Links/comments</th>
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</table>
| Goldman Sachs (US) | >30,000 worldwide  | Finance  | Returnship program – launched in 2008:  
• ten-week preparatory program that draws on individual's skills in the process of transitioning back into the workforce;  
• provides returning individuals with an opportunity to sharpen their skills in a work environment that may have changed significantly since their last experience as an employee;  
• tailored to address many an individual's concerns including their ability to transition into a new area of expertise and the perception that their extended absence from the workforce is an indication of reduced momentum or ability;  
• able to hire 50 per cent of past program participants for positions in various divisions of the firm;  
• program run each year in the Americas and expanded globally with a program launch in Hong Kong and Singapore. | http://www.goldmansachs.com/who-we-are/diversity-and-inclusion/recruiting/returnship/index.html  
| Sara Lee (US)      | >40,000 worldwide  | Food     | Returnship program – launched in 2009:  
• initiative to attract and retain women and men mid-level career professionals re-entering the workforce after an extended leave;  
• open to both women and men, but recruits heavily for women to draw on this largely untapped talent pool to the company while providing innovative, flexible employment opportunities to qualified candidates;  
• designed specifically for mid-career professionals, and allows people to re-engage within the corporate world;  
• specifically focused on attracting outside talent to Sara Lee, effectively differentiating Returnships from current employee-focused flexible work opportunities. | http://blogs.wsj.com/frontlines/2008/10/23/sara-lee-launches-returnship-program-for-on-rampers/ |
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<th>Organisation</th>
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<tr>
<td>Eli Lilly (US)</td>
<td>38,000</td>
<td>Pharmaceuticals</td>
<td>Dependent care leave:</td>
<td><a href="http://lilly.com/CAREERS/Pages/benefits.aspx">http://lilly.com/CAREERS/Pages/benefits.aspx</a></td>
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<td>• employees with caring responsibilities for young children or elderly parents may take up to three years unpaid leave;</td>
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<td>• employee must have been with company for at least one year;</td>
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<td>• prior to returning to the company at the end of the leave, access to the internal position posting system is provided to help returning employees find a position;</td>
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<td>• generally employees who choose to return to work are successful in finding a position.</td>
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<td>PwC (US)</td>
<td>29,000 (US)</td>
<td>Accounting and consulting</td>
<td>Full Circle – extended leave:</td>
<td><a href="http://www.pwc.com/gx/en/womens-initiatives/us-full-circle.jhtml">http://www.pwc.com/gx/en/womens-initiatives/us-full-circle.jhtml</a></td>
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<td>• unpaid, voluntary arrangement designed for high-performing employees who want to devote themselves to full-time care giving;</td>
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<td>• allows participants (for a period of up to five years) to stay connected with their colleagues, by providing them with a 'coach' while they are gone;</td>
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<td>• makes available firm resources, such as certain training and events.</td>
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<td>• allows employees to take up to five years off for personal reasons and provides resources to keep participants connected with the firm and the industry to make their return to employment a smooth transition.</td>
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<td>Organisation</td>
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| Towry Law (UK)                   | 750  | Financial advice  | Return to work program:  
• recruit and train individuals who have either taken a career break to bring up children or are simply looking for a career change;  
• offer flexible working hours, choice of location, structured training program and opportunity to gain professional qualifications for successful completion of the programme;  
• annual intake and runs for three days per week, over six months;  
• incorporates classroom teaching, examinations and practical work alongside established advisers.                                                                                                                                                                                                                       | http://www.towry.com/about/return-work-programme  
| McCarthy Tétrault (Canada)       | 650  | Law firm          | Parental leave support programs  
New Parents Program includes:  
• Parental Leave Toolkit – contains useful information for before, during and after a parental leave.  
• Maternity Leave Buddy – each woman preparing for maternity leave is paired with a contact in her practice group who assists with winding down before maternity leave, provides contact during the leave and assists with reintegration.  
• Maternity Leave Top-Up – ‘tops up’ Employment Insurance during maternity leave for associate lawyers so they receive their full salary during this time.                                                                                                                                                                      | http://www.mccarthy.ca/Fostering_Gender_Diversity.aspx                                                                                           |
(a) Evaluation

Access to flexibility within the workplace and leave entitlements has been shown to assists carers to remain attached to the labour market. However the research tends to focus on whether employees have access to these benefits and fails to examine whether they use these benefits or if the workplace promotes their use.

A study by Cullen and Gareis examined 50 case studies of company initiatives designed to support employed carers from 11 countries: Austria, Belgium, Germany, Finland, France, Ireland, the Netherlands, Poland, Portugal, Slovenia and the UK. The key themes that emerged from the study included: providing both universal and targeted programs for carers were beneficial; the need to increase managers’ awareness of the issues facing employed carers; and promoting the issue of caring as relevant to both men and women. The authors concluded that a multi-faceted approach was required to address the issue of supporting carers to remain in employment which included:

- suitably organised long-term (community and homecare) care services to support dependent persons and their working carers;
- income support and other ‘flexicurity’ measures (flexicurity meaning flexibility combined with employment and social security);
- rights and regulations in the employment field; and
- practical measures that can be implemented by employers at company level.

7.5 Summary and conclusion

Increasing numbers of employees, predominantly women, have care responsibilities. A number of workplace mechanisms have been developed and implemented to assist unpaid carers to combine care and paid work such as flexible working arrangements and leave entitlements. Initially these policies predominantly focused on reconciling parental care and employment, and did not focus on the care of people with disability, illness and frailty due to ageing. Although these workplace mechanisms assist carers, the unpredictable and episodic nature of the support provided to those with disability, chronic illness and frailty require different types of initiatives to be developed. In response to this a number of innovative initiatives have been implemented in a range of businesses and corporations in Australia and internationally. These include: integrated carer strategies operating at all levels within the organisations; the provision of information and support to carers; access to flexible work schedules, reduced work hours, changes in work location; referral to services and direct services provision to support employed carers; and financial assistance, such as cash payments for services and subsidies. These initiatives together with flexible work arrangements and access to leave entitlements support carers to remain in employment.

However barriers to maintaining attachment to the labour market for carers include workplace cultures underpinned by a full-time male worker model encumbered by care responsibilities that promotes long working hours and assign a lower status to part-time and casual employees compared to full-time employees. Tackling these issues and promoting the benefits both for employers and employees of recognising and valuing care within the workplace is imperative if carers are to better undertake paid work and care and maintain their attachment to the labour market. Remaining in employment is one of the key means of addressing income inequality in carers’ retirement income. However, workplace reform, alongside a more equitable distribution of care responsibilities and access to quality, adequate, appropriate, accessible and affordable services are required to address the gap in carers’ retirement income. In addition for those who cannot remain in employment adequate income support is also required.
8. Technical Paper G: International models for recognising and valuing unpaid care

This technical paper reviews the international literature to understand the range of international models for recognising and valuing care. This has included a comprehensive review of scholarly articles about care in retirement income systems and about policies concerning paid work and family in a range of countries. It has also included a review of other scholarly literature such as books and reports, and of a range of ‘grey’ material from government departments, the OECD and international bodies such as the European Commission. The focus is on 18 countries in the OECD. Countries were selected based on a range of factors, including our knowledge of the extent to which their systems are particularly innovative or have well developed mechanisms for valuing care. They were also selected to include a range of models of welfare state provision and pension provision in order to provide us with a broad spectrum of reform options.

Some countries have been added to the original list of countries as research has found that they have mechanisms in place for valuing care in their retirement income systems. The 24 countries are: the United Kingdom, New Zealand, Canada, the United States, Sweden, Finland, Denmark, Norway, Iceland, France, Germany, Austria, The Netherlands, Luxembourg, Switzerland, Belgium, Spain and Italy. The paper also includes where useful a discussion of mechanisms in Poland, Hungary, the Czech Republic, Slovakia, Chile and Japan.

The paper focuses on international models that recognise and/or value both parental care and care for a friend or family member with a disability, long term illness or frailty due to old age. It has concentrated on several areas: retirement incomes policies such as carer credits in public and private pension schemes; statutory leave arrangements such as parental leave, carer leave and other family leave; statutory workplace mechanisms such as legislation covering right to request flexible employment arrangements, the protection of part-time work, and regulating working hours; and the provision of early childhood education and care services and formal care services. It also describes several other measures where relevant, such as anti-discrimination legislation, gender pay equity and other income support measures. For each type of mechanism, the paper sets out the aims of the mechanism and their characteristics including their value, duration and coverage. Based on the evaluative literature, it also provides a discussion of the ‘ideal-types’ of each mechanism.

The mechanisms in the paper contribute to one or more of several goals of this project: some mechanisms directly ameliorate inequalities in retirement incomes; other mechanisms improve the opportunities for women (and men) with caring responsibilities to enter, re-enter, or remain attached to the workforce, promoting greater equality in workforce participation; other legislation contributes to the more equitable sharing of care responsibilities between women and men. This paper discusses the extent to which the mechanisms surveyed contribute to one or more of the above goals.

Finally, these goals are not achieved or achievable through one mechanism alone. The goals are achieved through complex combinations of different mechanisms. The mechanisms in each of the countries in focus interact in complex ways. For example, evidence reveals that female labour market participation is influenced by a combination of policy areas, including early childhood education and care (and other formal care) services, leave provisions, flexible working time options, and financial allowances.
As a result, in the area of parental care, many countries have some combination of longer leave periods, publicly subsidised early childhood education and care available after the leave period ends, and flexible work options.\textsuperscript{366} For other forms of unpaid care, countries combine appropriate formal care services, flexible work arrangements, and access to care leave. This paper will therefore discuss the ways in which international mechanisms can interact to reach the goals discussed above.

While policies in the area of parental care are now well developed in many countries and the evidence base is building on their effectiveness, policies concerning other carers and evaluations of their effectiveness in meeting the goals listed above are in their early stages.\textsuperscript{364} As a result, the policies for carers will be placed in the broader context of the much better developed policies for parents, pointing to gaps in the supports for carers and revealing possibilities for extending the principles and objectives of parental care policies to other carers.

8.1 Retirement incomes arrangements

Retirement incomes arrangements include public pension schemes, occupational and private pension schemes, and other forms of voluntary retirement savings. There are two main forms of public pension schemes: contributory, social insurance-based pension schemes that may be flat rate or earnings-related; and non-contributory social assistance schemes that are in most cases means-tested (Australia has a means-tested social assistance scheme – see Technical Paper D). In public social insurance-based schemes, a person’s pension in old age is calculated according to the contributions they have made to social insurance throughout their lives. Public pension schemes are most frequently funded on a pay-as-you-go basis, where the pensions of the older generation at any one time are being paid for by the tax and social security contributions of the working generations.

Occupational or private pensions are contributory savings mechanisms that are (generally) fully funded, that is, individuals contribute throughout their lives to an individual savings account and when they reach an age at which they can claim their pension, it is paid for from their own contributions and employer contributions over their working life course (often heavily subsidised by the state through tax concessional treatment of private pension savings). Contributions to occupational or private pensions may be voluntary or may be mandated by the state (Australia has a compulsory system of contributions to occupational pension accounts – see Technical Paper D). Most countries have what is described as a ‘multi-pillar’ system of retirement incomes arrangements. Most have either a public social assistance-style scheme or a public social insurance-style pension scheme (often social insurance schemes are supplemented by a social assistance style payment as well) and this public scheme is complemented by a system of contributions to occupational or private pension accounts. Public social assistance schemes which are not based on workforce participation and contributions from earnings, and have flat rate benefits, produce fairly equitable gender outcomes. The most significant source of gender inequality in retirement incomes arrangements is the link between pension entitlement and workforce participation that exists in most public social insurance-based schemes and occupational or private pensions. In these schemes, the effects of periods outside the workforce providing care have a significant impact on income in old age. In response, most countries with social insurance-based public pension schemes have introduced a mechanism of crediting a person’s public pension scheme while they are out of the workforce providing care. In addition, as occupational and private pensions have become a more central part of many countries’ retirement incomes arrangements, several countries are beginning to introduce measures for crediting a person’s occupational or private pension while they are out of the workforce providing care.

(a) Public pensions: carer credits

‘Carer credits’ or ‘pension credits’ are a method of explicitly recognising in a country’s pension system years spent providing unpaid care for a child or a family member with a disability or long term illness. They are built into a number of contributory public pension schemes in the OECD and in most cases are in the form of state contributions towards an individual’s pension account. Carer credits are most commonly paid for through general taxation revenue\textsuperscript{365} however in a few countries they are shared by the individual, the state, and/or the employer. The main issues in the design of pension credits are: the value (ie how the credits will be calculated); the duration (ie the number of years that an individual will be entitled to credits); the coverage (ie who is entitled to receive the credits).

(i) Aims

There are several goals of carer credits. The primary objective is to improve the retirement incomes of those who provide care, particularly women. The ‘secondary objectives’ have included improving fertility, encouraging labour market re-entry after childbirth, and recognising unpaid care.\textsuperscript{367} Variations in the emphasis placed on each of these objectives\textsuperscript{367} alongside differing institutional structures have meant that there are a range of differences in how carer credits are designed.

(ii) Value

There are several different types of carer credits and the value of the credits varies a great deal across countries and depending on the structure of the public pension scheme/s. The credits may be in the form of time, points, or imputed earnings. In flat-rate social insurance schemes, the credits are usually in the form of years towards a contributions history. In these schemes, a person’s pension entitlement is based on the number of years that they have contributed to the social insurance scheme. In order to receive the full
pension, they must have contributed to social insurance (and therefore participated in paid work whether full-time, part-time, or casual) for a certain number of years. In Britain's flat-rate contributory scheme, for example, this is called having a full contributions record and is currently 30 years of contributions over the lifecourse. Those who have made fewer years of social insurance contributions receive a lower rate of pension. Women face a disadvantage in these schemes because they are more likely to take time out of paid work to care for children and/or family members with disability, long term illness or frailty due to old age, have fewer than 30 years contributions and therefore receive a lower rate of pension in their old age. To ameliorate some of this disadvantage, in these carer credit schemes, individuals who leave the workforce to provide care for a child or, in fewer countries, a family member with a disability or long term illness, have years ‘credited’ to their contribution records while they are out of the workforce providing care. This increases their pension entitlement. In some countries, rather than having years ‘credited’ to their contributions record, individuals have the number of years required for a full contribution record reduced.

Some pension schemes, such as Canada and the Czech Republic, are based not only on the number of years of contributions but also an individual's earnings throughout the lifecourse. For example, in Canada, a person's earnings-related pension is based on 25 per cent of their average lifetime salary less the 15 per cent of years with the lowest earnings. Women who take time out to provide care, therefore, have lower average lifetime earnings and therefore lower pensions. As a result, in some of these countries, years spent caring are excluded from the calculation of the pension. In Canada, for example, years spent caring for a child under the age of seven are excluded from the calculation of lifetime earnings. Excluding the years spent caring increases average lifetime earnings and therefore increases the value of the earnings-related pension.

Some countries provide credits in the form of ‘points’ rather than years. In Germany, for example, the calculation of pension entitlement is based on the number of pension ‘points’ an individual has, where one ‘point’ is based on a year’s contribution at the rate of average earnings (those contributing below average receive less than one point for a year’s contributions and those contributing above average receive greater than a point up to a maximum). In Germany and other countries with a ‘points’ system, credits are in the form of ‘points’ towards their pension balance. In social insurance schemes therefore, where pension entitlement is linked to the number of years of contributions, time-based carer credits (ie years or points credited to a contributions record) are an important mechanism for ameliorating differences in pensions due to time spent out of work providing care.

In addition to being in the form of time, carer credit schemes can also be based on earnings or imputed earnings while out of the workforce providing care. These credits take the form of a financial credit to the parent or carer's (notional) pension account while they are providing care. In earnings-related social insurance schemes, ‘the value of a carer’s credit depends on the notional contribution rate applied for the period covered, which may be a fraction of national average earnings or of the individual’s recent earnings’.

There is great variation in the value of the financial credit but the calculation is generally based on one of three methods: a proportion of earnings prior to leaving the workforce; a percentage of national average earnings; or the national minimum wage. In a few cases, credits are based on a proportion of the value of the social security payment that the individual receives while providing care. Because of these different methods, some systems provide credits of different value based on the person’s prior earnings and others provide a flat rate credit to each person’s pension balance. For example, in Luxembourg, credits are made based on the value of their earnings before they left the workforce whereas in France, credits are flat-rate: provided to all parents at the rate associated with the minimum wage.

Some schemes combine an earnings-related credit with a flat-rate one. These schemes offer a credit that is based on earnings prior to leaving the workforce for the first shorter period outside of the workforce and a flat-rate credit based on some proportion of the average wage or minimum wage if the individual opts to take a longer period. These schemes differentiate between paid and unpaid periods of leave. For example, in Finland, the earnings-related credit is provided to individuals receiving maternity, paternity or parent’s allowance for the duration of the paid parental leave period based on the individual’s prior salary. During unpaid periods of leave, once the paid parental leave period has ceased, the credit becomes flat rate. In this case, an individual's pension accrues as if they were earning about one fifth of national earnings. This is linked to receipt of home care allowance and can accrue until the child turns three.

Evidence suggests that there are greater benefits to earnings-related rather than flat rate credits schemes. Flat-rate schemes are less effective at boosting retirement savings as the contribution rates are low. In addition, evaluations have found that flat rate credits are more likely to encourage women to leave the workforce rather than men because women have lower average earnings than men so the loss in household income is smaller if the female leaves the workforce. However, this needs to be balanced against a concern that an earnings-related payment may create less equitable outcomes across different groups of carers.

In most carer credit schemes where a credit of financial value (rather than time) is made to an individual's pension balance, credits are made to notional accounts. That is, the credit is not a real contribution made to an individual pension account but rather a credit towards an individual’s notional pension balance in an unfunded pay-as-you-go scheme. This means that when an individual reaches pension eligibility age, the government pays their pension from the contributions of current working generations rather than from money that has been put aside in an account for that individual. For example, the credits system in Britain's earnings-related social insurance pension (the State Second Pension) operates in this way. People outside of work providing care are deemed to have earnings at a low threshold level and have credits made to notional accounts accordingly. Systems of contributions towards notional accounts could be more adaptable to the Australian context than systems in which contributions are measured in time, because credits of a financial value are made to individual accounts. However, Australia's superannuation system differs from these systems in that it is fully funded, that is, based on accumulated employee and employer contributions in an actual individual account from which the individuals’ retirement income is paid in old age.
Denmark has a public contributory system of notional accounts that is fully funded. However, the scheme is not earnings-related. Contributions are made on a flat rate basis linked to the number of hours worked rather than to an individual’s salary. The employer pays two thirds of the contribution and the individual pays the remaining third. The benefits paid in old age are also flat rate. During periods outside of the workforce on maternity/paternal/parental leave benefits, the individual must continue to contribute one third of the pension contribution and the state takes over responsibility for paying the remaining two thirds of the contribution. Denmark also has a system of quasi-mandatory contributions to private occupational pension accounts, but this system does not include carer credits. In recognition of the fact that individuals miss out on contributions to their occupational pension accounts while they are outside work providing care, the credits to the public contributory scheme are provided at double the normal rate of contributions. Like Finland, Denmark provides a second scheme of carer credits paid at a lower rate if an individual remains out of the workforce to care for children beyond the parental leave period. In these cases, they typically move onto another benefit that also carries a contribution credit.

Sweden combines an unfunded notional account with a funded account that more closely resembles Australia’s superannuation scheme. It has a public earnings-related pension scheme that has two components: a notional defined contribution and a small fund component (the premium pension). The scheme involves a contribution of 18.5 per cent of earnings or ‘pensionable pay’ (which is slightly less than gross earnings), 16 per cent of which is ‘contributed’ into a notional account and 2.5 per cent of which is contributed into a self-directed individual account. The employer pays the larger part of the 18.5 per cent contribution although there is seven per cent employee contribution. Upon retirement, the state provides a pension based on the value of contributions over the lifetime up to a ceiling, with a rate of return calculated according to average wage growth. The individual also receives their premium pension.

In Sweden, during periods when individuals are outside of the workforce for child rearing, individuals have their notional accounts ‘credited’ by the state. The value of the credits is based one of three ‘fictive incomes’ from which the parent or guardian of the child may choose the most advantageous. In addition to the above system of carer credits, for an individual in receipt of paid parental leave benefits (or any other form of social transfer payment) while they are outside the workforce, the benefits count as ‘pensionable pay’ on which pension contributions must be paid. The individual is required to pay the employee pension contribution of seven per cent from their benefit income. The government, like in Denmark, takes over the ‘employer contribution’ as a proportion of the parental leave benefit for the duration of the leave (up to 480 days). The combined employee/state contribution is divided as it would be under normal contribution conditions between the unfunded pension and the small fully funded premium pension. This is one example in which the state pays a credit that contributes to a fully funded private pension scheme that more closely resembles Australia’s superannuation schemes (to be discussed in more detail in section on Private Pensions).

In France, an interesting additional measure is a pension bonus associated with child bearing. Both parents can receive a 10 per cent increase in the value of their final public pensions if they have raised three or more children. While France has a social insurance scheme, a pension bonus based on caring (but not tied to number of children) has the potential to be explored in the context of a social assistance scheme like Australia’s public age pension.

There is wide variation in the duration of carer credits across countries. The duration is the number of weeks, months or years that a parent/parents/carers may be entitled to have credits made to their retirement savings. A large proportion of carer credit systems are based on the age of the child, providing credits to the retirement savings of the parent from the birth (or adoption) of the child until the child reaches a certain age. This length of time is usually provided per child. In these instances, the parent’s entitlement to carer credits cuts out when each child reaches a certain age and this age is significantly higher in some schemes than in others. The duration often depends on the type of credit that is provided. For example, if the credit is in the form of time, such as a year towards the individual’s contribution record or, in some countries, a year that is excluded from their contributions record, then the duration of the credits tends to be longer. If the credits are in the form of notional contributions to an individual’s pension balance in an earnings-related scheme, the duration of credits tends to be shorter. Some schemes combine a shorter duration of financial credits with a longer duration of time credits and others, such as Austria, do the reverse. For example, in France and Germany the parent is entitled to credits until the child turns three and in Sweden until the child turns four. While longer periods recognise the provision of care to young children and compensates pension incomes for time out the workforce during these three years, it is criticised as a ‘disemployment strategy’ because after three years many women have difficulty re-entering the workforce and as a consequence their pension balance suffers.

In a number of countries, the credits are linked to the duration of the parental leave scheme. In Sweden, for example, an individual is entitled to benefits for the duration that they are on paid parental leave. Other countries such as Canada, Finland and the UK ‘piggyback’ entitlement to carer credits to receipt of a family payment or tax credit.

There is some variation in who is entitled to receive the credits. Some credits are means-tested, some are dependent on exit from the workforce whereas others can continue being paid once the individual returns to the workforce. They can also be based on the age of the child, the condition of the person they are caring for, their relationship to the person they care for, or the amount of care they provide. In most cases, a complex mix of these factors determines eligibility for the credits.
Parents

In some countries, credits are available for each child and in others there is a cap on the number of children one can receive credits for. There is also great variation in how old the child can be before eligibility ceases, which is also linked to whether the credit is in the form of time or financial contribution. In Sweden, the credits are paid until the child is 4 years old. A parent who leaves the workforce to care for a disabled child is eligible for credits for up to 15 years. In the UK, parents of children under 12 are entitled to have contributions years (i.e., in the form of time) “credited” to their flat rate retirement pension. In Germany, parents with children under 10 are entitled to credits. In France, two years is credited to the individuals’ (either mother or father) pension record per child (i.e., towards a full lifetime contribution record of 40 years). In some countries, such as the UK, foster parents are included in eligibility for the credits.

Carers

While a large number of countries have mechanisms for crediting pensions during periods providing care for small children, there are far fewer countries that have provisions in their pensions systems that recognise other types of care. Countries that provide credits for care include the UK, Germany, Italy, Finland, Luxembourg, the Czech Republic, Poland, Slovakia, Italy and Norway. Notably, the most recent OECD Report Pensions at a Glance (2011) sets out pension provisions in OECD countries for people in situations that it calls ‘variant careers’ and it includes people caring for children, unemployed people and people taking early retirement, but not people caring for a family member or friend with a disability or long term illness. Caregivers should be recognised through their inclusion as a ‘variant career’ in the next OECD Report Pensions at a Glance.

Among the small number of countries with credits for other forms of care, entitlement generally depends on the level of care need or the amount of care provided by the carer. In Germany, for example, the calculation of the pension credit is based on the number of hours that the person provides care per week and the ‘level of nursing care dependency’. The carer must be providing at least 14 hours per week of care and the person receiving care must be co-residing with the carer and receiving carer benefits from the social insurance scheme. The value of the credit is fairly low (between about 25 and 80 per cent of the average wage) and increases with the number of hours of care provided. The carer may work part-time up to 30 hours per week. In Germany, credits paid to carers of people with disability or frail older people are paid for by the national long-term insurance program. In the UK, carers of people with disability who provide care for 20 hours or more are also entitled to have contributions ‘credited’ to their flat rate retirement pension for each year that they are providing care. They are also entitled to have credits towards their earnings-related state pension, calculated according to a complex formula based on a low fictional income.

In quite a different approach, Italy has a time limited credit of one month per year while out of the workforce to provide care for a family member with a disability or long term illness. The requirement that the carer provide a certain number of hours of care is important to take into consideration, as the higher the number of hours the less likely the policy is to provide the opportunity for carers to combine care with paid work.

More recently in the UK, the system of carer credits was extended to include grandparents who provide care for a grandchild under 12. These are colloquially known as ‘grandy credits’. The measure was introduced in recognition of the fact that many grandparents were leaving the workforce earlier than they would otherwise care for their grandchildren. The emphasis was not on ‘grandparent carers’ but on grandparents (and other relatives such as aunts and uncles) who provide care for their grandchildren so that the parents can participate in paid work.

In addition to parental status or the nature of care provision, credits can also be linked to workforce status. Some schemes, such as the scheme in Finland, are dependent on exit from the workforce. However, flexible carer credit arrangements in which individuals who engage in part-time work can retain their entitlement to the credits provide women with opportunities to transition back into the workforce and are more likely to improve women’s workforce participation. Some countries, such as Canada, permit part-time work and other countries, such as Japan, provide credits to the value of full-time work if an individual returns to work part-time. In Germany, individuals are actively encouraged to return to work part-time. In Germany, parents with children under ten who return to work part-time can have their account credited up to a full point if they are earning less than the average wage (and are therefore not earning a full point per year), up to the value of 0.33 per cent of a point. Here, women in part-time work with young children who earn less than the average income are treated as if they earn the average income for the purposes of the earnings related state pension.

Finally, some schemes target credits towards low income families on the presumption that high income families can afford to take the time out of the workforce. For example, linking the credits to family assistance payments or tax credits that are means tested as some countries (such as Canada) do, functions to target credits to those with low incomes. Replacing restrictions on paid work can also ensure that high income women returning to secure jobs are not eligible for the payment. In France, for example, credits are targeted towards parents on income support or with very low incomes. However, while these measures may target credits to those in need and reduce state expenditure, they may be less effective at meeting the goal of valuing (all) care.

(iv) Summary of ideal models

There have been few evaluations of the effectiveness of carer credits and those that have been conducted have found it difficult to draw definitive results, particularly because it is difficult to separate the effects of carer credits from the effects of other elements of the retirement income system design on women’s retirement incomes. Several studies have found that carer credits do have a modest but positive impact on women’s retirement incomes but that the extent of the impact varies between countries depending on the other structural features of the pension system. In Britain, Evandrou and Glaser found that the time credits in the basic state
pension scheme do to some extent improve women's pension entitlement but that women's entitlement was still significantly lower than men's.\textsuperscript{112} Studies have suggested that time credits are less effective in improving women's pension incomes than credits based on a fictional or actual salary.\textsuperscript{113} Credits based on fictional or actual salaries (e based on a percentage of average earnings, the minimum wage, or a proportion of actual earnings) have a greater positive impact on pension outcomes. Within these two options, credits based on actual earnings create greater equity in two senses: they provide greater equity between women with caring responsibilities and women without caring responsibilities by making higher contributions to the pension balances of women with caring responsibilities; they are also (but to a much lesser extent) more likely to reduce the effects of women's lower average incomes on household decision-making. Research reveals that flat rate credits are less effective at reducing old age poverty among low income women.\textsuperscript{414} Research shows that women are more likely to take advantage of carer credits than men\textsuperscript{418} and as a result it is important to consider measures that are likely to increase men's take up of the credits.

However, while credits based on actual salaries can improve equality in retirement incomes, this needs to be weighed against the unequal outcomes of an earnings-related scheme for different groups of carers, such as higher and lower income carers or parents taking short breaks from the workforce and people caring for a family member with high care needs who are out of the workforce on an ongoing basis. Notably, some countries provide a credit based on actual salary for the first period of care and this switches to a flat rate credit after a specified period, sometimes in the case of parents, aligning with paid and unpaid periods of leave. Evidence shows that the effects of credits vary between different groups of women. Both types of credits – time credits and earnings-related credits – are more likely to benefit higher income women.\textsuperscript{115} Research suggests that the overall effectiveness of carer credits could be improved by targeting credits to low income women.\textsuperscript{117} The design features of a scheme of carer credits that meets the needs of low income earners as well as higher income earners is an area in need of further exploration. While credits during periods of leave are an important potential method of ameliorating inequalities in retirement incomes, and some countries link their credits to their paid parental leave schemes, a scheme of carer credits that is not linked to leave or workforce participation is also necessary to meet the needs of carers with little or no attachment to the workforce, like in those countries where the scheme is linked to receipt of an income support payment or tax credit. In those countries in which carer credits are targeted towards low income earners only, the mechanism is one of redistribution from higher to lower income earners rather than valuing all care.

With respect to duration, evidence reveals that, like in the case of paid parental leave schemes (see Section on Parental leave), carer credit schemes that are too long in duration can have a ‘disemployment’ effect.\textsuperscript{418} Evaluations of the carer credit mechanisms are not specific about an appropriate duration. However, the evaluative literature does reveal that the continued provision of carer credits when an individual returns to work part-time is a measure in carer credit schemes that operates to promote workforce attachment. Some carer credit schemes permit and indeed encourage return to part-time work by continuing to provide carer credits when individuals return to work part-time. These are an effective mechanism for encouraging women's attachment to the workforce while providing care and helps to alleviate poverty in the present (through additional income) and in the future (through improving retirement income).\textsuperscript{119} These measures address the important issue that it is not only periods out of the workforce that damage women's retirement incomes but also periods of working part-time while caring, as they accumulate less in their contributory public and private pensions as a result. The measure whereby individuals returning to work part-time have their pensions topped up as if they were working full-time while they undertake caring responsibilities could prove a very effective measure here. Importantly, to take advantage of pension credits for returning to work part-time, individuals must have access to appropriate part-time work so an effective system of carer credits would need to be combined with flexible workplace policies such as ‘right to request’ policies (see Section on Right to Request legislation).

A further area in need of development is credits during periods of other forms of care for people with disability, long term illness or frailty due to old age. The mechanisms for crediting time spent providing care are in their fairly early stages and as a result there are no clear ‘best practice’ models. While earnings-related schemes are likely to provide some carers with higher pension balances than flat rate pensions, earnings-related schemes work well for carers with secure incomes, particularly high incomes. Some groups of carers, particularly those with intensive and ongoing caring responsibilities, have been precluded from participation in full-time work on an ongoing basis.

In some countries, carer credits are linked to carer payments, whereby recipients of carer payments are entitled to credits for the duration of the time that they are on the payment. The result in these instances is that the credits are only available to carers that are in receipt of carer payment which may exclude large groups of carers; in many carer payments, eligibility is dependent on a carer performing a high number of hours of care or on carers having a very low income, or both (see Section on Other income support policies, Carer Payment). In the UK, the carer credits have until recently been available to recipients of carer payment. However, in recognition of the problems listed above, in 2010, the credits were extended to people caring for a person with a disability, long term illness or frailty due to old age for at least 20 hours per week. The carer must apply for the credits and entitlement can be established by a ‘care certificate’, certifying the carer’s entitlement and signed by the care recipient and a GP or one of several other service providers. The extent to which the means test and high hours of care limit eligibility to the Carer Payment\textsuperscript{120} are discussed in the section on Other income support policies, Carer Payment.

Finally, research shows that credits need to be combined with other policies that support employees with caring commitments, such as parental leave, leave to care for dependents, and ‘long-term career breaks’, in order to be most effective.\textsuperscript{451}
(b) Private and occupational pensions: carer credits

In a large number of countries in the OECD, occupational or private pensions are becoming an increasingly important pillar of their retirement income arrangements. These are voluntary, mandated or quasi-mandated. These schemes widen inequities in pension outcomes (see Technical Paper D). No country has a comprehensive state mandated system for recognising care in the private pension system. However, some countries are developing mechanisms for crediting a person’s occupational or private pension while they are out of the workforce providing care. These mechanisms are in their very early stages and there is no consistent approach across the few countries that are developing these mechanisms, but they show encouraging signs in the area of parental leave, while not yet extended to include other forms of care.

(i) Aims

The primary mechanism for valuing care in the private pension scheme is to make contributions to an individual’s pension account while they are out of the workforce due to caring responsibilities. The aim is to ensure that the private pension balances of those who take time out of work to provide care are compensated to some extent during this time.

(ii) Characteristics

Very few countries have state-funded or employer-mandated systems of credits to occupational or private pensions while a parent is out of the workforce providing care. In the few examples that do exist, the credit is for child care, not other forms of care. In Sweden, the pension scheme involves a contribution of 18.5 per cent of earnings, 16 per cent of which is contributed into a notional account and 2.5 per cent of which is contributed into a self-directed individual account. The employee pays seven per cent and the employer pays the rest. When the individual is out of work providing care, the individual is required to pay the employee pension contribution of seven per cent from their benefit income and the state takes over the employer contribution. Hence the state pays a credit that contributes to both the notional public pension account and the fully funded private pension scheme that more closely resembles Australia’s superannuation scheme. Also in Sweden, employers are encouraged but not required to continue paying contributions to occupational schemes while their employees are on parental leave for periods of up to 11 months and most do.

France has an earnings-related public pension scheme and a system of mandatory contributions to occupational pension schemes. The mandatory occupational schemes are different from Australia’s in that they are defined benefit schemes that are not fully funded, and the contributions are managed by the state. The public earnings-related and mandatory occupational schemes are credited in the same way. Individuals that are out of work or working part-time due to child care responsibilities are awarded credits as if they had earned the minimum wage for a period of up to three years. Credits are available to both parents if they fulfill the criteria (although they are taken up more often by women than by men). The credits are means-tested – the parents need to be entitled to family benefits or parental leave and be earning below a threshold. While the credits do contribute to women’s (and men’s) retirement incomes while they are out of the workforce providing child care, their means-tested nature results in a system of credits that penalise return to the labour market. Scholars have suggested that this be taken into consideration in the design of the credits scheme. Like the pension credits in the public schemes, the provision of a credit based on the minimum wage rather than previous earnings is less effective at reducing the gender wage gap.

Germany has an earnings-related contributory public pension and a voluntary system of contributions to private pensions known as Riester pensions. The state offers incentives to invest in Riester pensions by offering allowances and tax deductions to individuals who contribute at least 4 per cent of their income to a Riester account (and a minimum of 60 euros per year). The subsidies and allowances attached to Riester pensions are funded from general revenue. The first subsidy is provided to all individuals who contribute 4 per cent of their income. It is a flat rate subsidy provided regardless of earnings claimed as a tax reduction or a lump sum payment once a year. In this sense, lower income earners receive a higher subsidy proportionate to their contributions. Individuals with children are paid a higher annual subsidy depending on the number of children they have. A subsidy of 300 euros per child is paid to an individual’s pension account each year. The subsidy is only paid to one parent; usually the mothers account unless the mother does not have a supplementary scheme or waives her entitlement to the subsidy, in which case it is paid to the father. These are in addition to the carer credits paid in the public scheme. However, research shows that the flat-rate child allowance in the private schemes is more likely to benefit higher income earners because a high proportion of the poorest households do not have Riester pension accounts so are unable to benefit from the subsidy. Research also suggests that the allowance does little to compensate for the loss in pension entitlements associated with child bearing and rearing. Private pensions in Germany therefore continue to be better for higher income earners and create poor outcomes for women.

Hungary and Poland both have systems of mandatory contributions to commercially managed individual savings accounts. Under both systems, part of an individual’s contributions to the public PAYG earnings-related scheme now goes towards a fully funded individual account. The private pension component therefore operates as a fully funded supplement to the contributory public schemes. In Hungary, employers and employees share the contributions to the public earnings-related scheme and 9.5 per cent of an individual’s earnings are diverted into their fully funded individual account. Parents who are outside of the workforce to care for children may receive a parental leave benefit based on a proportion of prior earnings up to a cap for the first 24 months, or a child care allowance (at the value of an income support payment) that is available until the child’s third birthday. After the child’s first birthday, grandparents providing child care to their grandchildren are also entitled to claim the child care allowance. Parents (and grandparents) on one of these...
two payments are required to pay 9.5 per cent of their parental leave or child care allowance into their individual savings account. This is not supplemented by any state or employer contribution. The sum is therefore very low, particularly for women with low previous earnings levels or women on child care allowance, and as a result it has very little impact in compensating for periods outside of the paid workforce.\(^{439}\)

In Poland, individuals must contribute 12.22 per cent of their earnings to the public earnings-related scheme and 7.3 per cent to a fully funded individual account. During periods outside of the workforce on maternity leave, the government credits both accounts (the notional unfunded account and the funded individual account) in the same way: based on a fictional salary of the minimum wage (currently 60 per cent of average earnings).\(^{440}\) The government therefore provides a credit to the individual’s private savings account at 7.3 per cent of the equivalent of 60 per cent of average earnings. However, research suggests that the provision of credits based on the minimum wage does not compensate adequately for time spent caring and provides poorer outcomes for middle and higher income women and no incentives for men to take parental leave.\(^{441}\)

In Chile’s system of mandatory defined contributions, individuals are required to contribute 10 per cent of their earnings into a fully funded individual savings account. The accounts are managed by private pension funds.\(^{442}\) The compensation for periods outside of work due to child rearing is paid to women at the time they retire.\(^{443}\) Upon reaching the age of 65, women receive a voucher towards their pension balance for each child they have had, funded from general taxation revenue. Each voucher is equivalent to contributions made to the individual savings account over 18 months at the fictional income of minimum wage plus interest accrued from the time the child is born until retirement.\(^{444}\) Moreover, the individual receives a voucher worth 10 per cent of the minimum wage over 18 months, plus interest, for each child.

Denmark has a fully funded, defined contribution public pension scheme and a system of mandatory occupational superannuation.\(^{445}\) There are no credits in the mandatory occupational scheme but the loss on savings in occupational pensions is compensated for by additional credits in the public defined contribution scheme in recognition that occupational schemes will undergo a period without contributions.\(^{446}\)

(iii) Summary of ideal models

There is very little evaluative literature on credits to private pension schemes during periods providing care and therefore inadequate evidence to point to ideal models. However, the small amount of literature suggests some emerging findings. Credits to private pension schemes can be made by employers, by the state, or in some instances individuals are compelled to make contributions from their parental leave or income support payments. At this stage, there are no compulsory systems of employer contributions to private pensions but in Sweden these are encouraged and a high proportion of employers comply. In several cases, the individual is required to contribute a proportion of their income support or parental leave payment and the result is contributions that are very low and do little to compensate for the period outside work. In several countries the state takes over the employer component of the contribution while the individual is outside of the workforce providing care. This model has varied across countries. In Sweden, the state pays the employer contribution which is earnings-related. In France and Poland, the state pays contributions to the individual’s private pension account based on a proportion of a notional salary (the minimum wage). The consequent low rate of credits is criticised for producing less effective outcomes in compensating for periods outside of work. The small amount of literature there is suggests that earnings-related credits could be more effective in reducing the gendered impacts of care on retirement incomes and may also improve incentives for men to leave the workforce to provide care\(^{447}\). While an earnings-related system may be more effective than credits based on the minimum wage, state-based credits of all forms (i.e. including credits based on the minimum wage) are more likely to compensate for time spent out of work than credits made by individuals from their (often low) income support or parental leave payments. Finally, the scheme in Germany provides higher state subsidies for contributions made by those with caring responsibilities. However, this is criticised for only being accessible to higher income earners – those with the means to contribute in the first instance in order to attract the subsidy. This raises an important issue in the area of credits to private pension schemes – a system of credits to private pension schemes must be accessible to lower income earners and those with precarious attachment to the workforce in order to compensate for the gender gap in retirement incomes.

8.2 Statutory leave arrangements

(a) Parental leave

Parental leave arrangements provide a combination of two entitlements: a period of paid leave; and a period of statutory unpaid leave which is often longer than the period of paid leave. There are a wide range of parental leave schemes internationally.

(i) Aims

Parental leave arrangements have several goals: to provide time for parents to care for young children, to improve women’s labour market attachment, and in some countries, to increase fertility. In some countries such as France, Germany and Denmark, parental leave schemes were introduced as an ‘anti-unemployment’ strategy, contributing to the redistribution of scarce jobs.\(^{448}\) Leave schemes can also contribute to improved lifetime earnings by improving workforce attachment and creating opportunities for career progression by allowing women to remain with the same employer at the same level.\(^{449}\) By improving lifetime earnings, parental leave schemes
also contribute to a secondary goal of improving the adequacy of earnings-related retirement pension balances. Most parental leave schemes are funded by the state which, according to Gornick and Meyers, distributes the cost more evenly, makes it easier for employers, and minimises the likelihood of discrimination against those who may be more likely to take leave.\textsuperscript{450} The schemes vary in value, duration and coverage.

(ii) Value

There is great variation in the value of the paid component of parental leave schemes. Some schemes are flat rate based on a percentage of the average wage or minimum wage, others are earnings-related and some are paid as a social assistance payment. For example, Sweden provides paid leave at 80 per cent wage replacement up to a cap which is set quite high\textsuperscript{451} and Canada provides paid leave at the lower replacement rate of 55 per cent of previous earnings.\textsuperscript{452} In New Zealand, in contrast, parental leave is calculated and paid according to previous earnings but is capped at average weekly earnings.\textsuperscript{453} In Austria, the payment is in the form of a Child Care Benefit that is means tested on the individual parent’s income and is designed to provide either for the cost of being out of work or the cost of formal child care if the individual returns to work.\textsuperscript{454}

Many parental leave schemes in Europe provide earnings-related paid parental leave based on a proportion of wage replacement up to an earnings cap. In social democratic countries like Norway and Sweden, wage replacement is between 80 and 100 per cent, up to a cap. Denmark and Finland provide about a two thirds wage replacement rate.\textsuperscript{455} In Denmark, enterprise agreements compel many employers to top up the leave payment to the rate of full pay.\textsuperscript{456} The caps on wage replacement rates operate to provide a more progressive scheme and to limit cost, but at the same time, high caps operate to minimise the economic impact on a larger group of women. In Norway and Sweden, for example, the caps are set at about 2 times average earnings.\textsuperscript{457}

In some countries, the value of the parental leave payment changes some way into the leave period, providing an earnings-related payment for the first period of time and a lower subsequent payment. In Hungary, for example, the first two years of leave are paid at 70 per cent of wage replacement and individuals who do not return to work at this time are then entitled to a low flat rate payment for the final year.\textsuperscript{458} In the UK, the Statutory Maternity Pay period of 39 weeks is comprised of the first six weeks paid at the higher of 90 per cent of earnings or the prevailing flat rate and the remaining period is paid at the lower of 90 per cent of earnings or the prevailing flat rate (set at approximately 20 per cent of average weekly earnings).\textsuperscript{459}

Evidence reveals that where periods of leave are paid, take up rates are higher. Paid periods are also more likely to encourage men to take up parental leave\textsuperscript{460} (this research has led some to argue that unpaid parental leave actually reinforces the male breadwinner model rather than replacing it).\textsuperscript{461} In addition to the leave period being paid, research shows that higher wage replacement rates also increase total take up of parental leave and the take up by men. Outcomes for women’s labour market participation are also improved if the period of leave is paid rather than unpaid.\textsuperscript{462} As a result, Gornick and Meyers suggest that paid parental leave should be paid at a 100 per cent wage replacement rate up to an earnings cap.\textsuperscript{463} High wage replacement rates (of at least 80 per cent) have been shown to increase gender equity in leave take up rates, because a flat rate payment often results in a household decision that the lower income earner takes the leave.\textsuperscript{464} However, evidence from countries with a high replacement rate reveals that this must be accompanied by other measures to successfully increase equity in take up between women and men,\textsuperscript{465} because men are still more likely to exceed the earnings cap and by a greater amount.\textsuperscript{466} This is why father quotas began to be introduced (see Coverage section).

(iii) Duration

There are two periods of leave that are of relevance here: paid leave and (unpaid) protected job leave. Protected job leave ranges from only 17 weeks in Switzerland to 300 weeks (approximately six years) in France.\textsuperscript{467} Paid leave varies in duration too. EU directive 92/85/EEC obligates member states to provide a minimum of 14 weeks paid maternity leave on childbirth\textsuperscript{468} and most countries provide paid leave for between three months and one year of FTE paid leave.\textsuperscript{469} Many countries combine more than one kind of paid leave, whereby after a period of paid maternity/parental leave, individuals can continue to be on leave to care for children for an additional year or sometimes two, often paid at a lower, flat rate\textsuperscript{470} (see Value Section). The paid and unpaid periods of parental leave can interact in different ways. In some countries, the paid and unpaid periods are aligned whereas in others, there is no relationship between the two periods.\textsuperscript{471} The UK’s parental leave scheme, for example, provides 26 weeks ‘ordinary’ maternity leave and 26 weeks additional maternity leave. While job protection is provided for the full 52 weeks, those returning after the 26 weeks ‘ordinary’ leave may be offered a different job at a similar level upon their return if their employer can show just cause. For 39 weeks of this period, the individual is paid Statutory Maternity Pay.\textsuperscript{472}

Evidence shows that leave policies increase the likelihood that women will be in work before having children, increase the proportion of women who return to work after having children and increase the speed with which women return to work.\textsuperscript{473} However, the duration of the leave period has an important influence on whether it is successful in improving women’s workforce participation and reducing the impact on earnings. If the leave period is too short (like the one in the US), the outcomes are weakened because many women are forced out of the labour market.\textsuperscript{474} However, at the same time, longer leave periods can result in a negative overall impact on women’s labour force participation.\textsuperscript{475} In Hungary, for example, individuals are entitled to a period of three years paid leave and the return to work rate is less than 45 per cent.\textsuperscript{476} Long leave periods can result in ‘reduced human capital’ with flow on impacts on career development and future earnings. In addition, a three year period can see considerable change in the employer organisation including unforeseen closure or restructuring.\textsuperscript{477}
Some have argued that longer leave periods, particularly those combined with payments such as the Home Care Allowance in Finland that is provided until the child turns three, can lead to gender segregated labour markets – with more women employed in the public sector and men in the private sector. Germany replaced its longer parental leave scheme paid at a low rate with an earnings-related scheme for one year and this improved labour market participation of women in the second year after birth. According to Gornick and Meyers, the evidence shows that six months paid leave per person is the period of leave that ‘is advantageous, but not harmful, to women’s labor-force attachment and longer-term employment trajectories’. Others have suggested 20-30 weeks as the ideal leave period.

Coverage

Entitlement to leave can vary depending on an individual’s workforce participation before or during child rearing and depending on the parent that may take the leave. Parental leave can be based on workforce participation prior to taking leave and during leave as well. Prior to taking leave, countries have a range of regulations about the workforce history necessary for entitlement. In Sweden, for example, an individual must have been employed for eight months before the child is born and Hungary requires 180 days of work within the two years prior to the child being born. In New Zealand, to be eligible for paid parental leave, ‘employees must have worked continuously with the same employer for an average of at least 10 hours a week (including at least one hour in every week or 40 hours in every month) in the six or twelve months immediately before the baby’s expected due date or the date the employee has assumed the care of a child they intend to adopt’. In the UK, a mother is eligible if ‘at the qualifying week (15 weeks prior to the expected date of delivery or adoption) a woman is employed, has had the same employer for at least 26 weeks, and is earning above the lower earnings limit for national insurance contributions’. UK fathers (and partners) who have been with their employer for 26 weeks at the qualifying week are entitled to two weeks paternity leave and Statutory Paternity Pay paid at the lower of 90 per cent of earnings of the same flat rate as Statutory Maternity Pay. Again, they are only entitled if they earn above the lower earnings limit for national insurance. In some countries the workforce history requirements exclude a significant proportion of women from entitlement.

Some countries have provisions for those who do not meet workforce history requirements. In New Zealand, women who are not working or who do not meet the work history test and are not in receipt of another government benefit are eligible for a parental tax credit which is a weekly payment for eight weeks. The tax credit is means-tested but the means-test limits are reasonably high. In the UK, those not qualifying for statutory maternity pay because of their workforce histories but who ‘have been in some form of paid work for 26 of the last 66 weeks, can apply for a Maternity Allowance (MA), which is paid at the lower of either the flat rate or 90% of previous earnings’.

Leave schemes can also be conditional upon full withdrawal from the labour market. For example, in the UK, Statutory Maternity Pay is conditional on workforce exit with the exception of up to ten discretionary days that a woman may work, known as ‘keeping in touch’ days. Other countries have options for taking their parental leave flexibly, including taking the leave incrementally (i.e. Denmark and Sweden), combining it pro-rata with part-time employment (i.e. Norway and Sweden) or permitting parents to use part of it to purchase private child care instead (i.e. Finland and Norway). Evidence reveals that greater flexibility can increase options for couples and improve women’s workforce participation. Evidence also reveals a greater preference for flexibility among males and as a result fathers are more likely to take their leave incrementally while maintaining their attachment to the workforce. This suggests that flexible options concerning how parental leave may be used are more likely to encourage men to take up leave.

Flexible options in the parental leave schemes vary between countries. In Austria, for example, the scheme provides a monthly Child Care Benefit to one parent independent of their work status for the first 30 months. The other parent may then apply for an additional six months. This payment is designed to cover either the cost of leaving work to provide child care in the home or the cost of institutional early childhood education and care if returning to work. The parent in receipt of the Child Care Benefit must have a low income as the benefit is means-tested. This is designed to create choice for parents in combining work and care. However, the payment is means-tested which places a limit on how much a parent can work and this, combined with the lack of appropriate publicly funded early childhood education and care, limits that choice. In conjunction with this, parents of a child born after June 2004 may work part-time until the child reaches primary school (age 6) but the details of this provision (such as the nature of the part-time work) must be negotiated between employers and employees and is only relevant for employees working in companies with at least 21 staff who have worked for that company for at least three years. Only around a quarter of women return to their positions after the period of parental leave because a large number of employers will not allow for part-time hours. In addition, a short school day, school holidays and lack of after-school care make this difficult. This suggests that parental leave policies need to be coupled with right to request legislation to be effective (see Section on Right to request legislation).

While the international momentum has been moving towards a parental rather than maternity leave model, often the outcomes are not gender equitable and women take a far greater proportion of parental leave periods. This is particularly true in countries with longer leave periods, such as France and Germany. There are two responses to this emerging issue: schemes that ‘encourage’ fathers to take parental leave; and schemes that include a non-transferable period of ‘daddy leave’. In some countries, the ‘shareable’ period of leave is increased if the father takes a portion (i.e Denmark, Norway and Sweden). In others, a period of the leave is reserved for the father and the right of the couple to that period of leave is lost if the father does not take it. In Austria, for example, the payment aims to redistribute care by making an extended six month benefit available only to the parent who has not provided care for the first
30 months. Evaluations show that these approaches create the best results for improving participation by men in parental care. Countries that have introduced father or ‘daddy’ leave (such as Iceland, Norway, Sweden and Germany) have all seen increases in male take up of parental leave.

In Iceland, families are entitled to three months earmarked for each partner and three months that either parent can take, paid at 80 per cent wage replacement. This is known as the ‘three by three model’ and, in 2006, 88 per cent of fathers took their three month leave, but only 17 per cent of men took the three month shared entitlement. The Norwegian parental leave scheme is made up of a number of components that are attached to the mother, the father, and both parents. The scheme entails 9 weeks of paid maternity leave reserved for the mother: 3 weeks before the child is born and 6 weeks after. It also entails 12 weeks of paid leave reserved for the father. The remaining period of paid leave may be taken by either the mother or the father for 27 weeks at 100 per cent wage compensation or 37 weeks at 80 per cent. The payment is funded by government through national insurance up to a ceiling (approximately EUR 50,000 in 2008). There is also an additional component of 2 weeks welfare leave for the father at the time of birth (known as ‘daddy days’). This is not state funded but negotiated with employers.

In Sweden, there is a father quota of two months and there are bonus parental leave payments to parents who split their parental leave period equally. The leave can be taken flexibly – full-time or part-time. Individuals can take a few days a week or stretch the leave over an extended period by reducing the rate of payment. Parental leaves are in addition to 10 days paternity leave and allowance at the time of childbirth. According to Hobson et al, men and women respond to the flexible arrangements in different ways. Men prefer flexible options because they can avoid prolonged periods in which they are completely detached from the workforce, whereas women prefer flexible options because it provides them with an opportunity to care for their children at home for a longer period (by accepting a lower payment). Sweden is also, however, given as an example of a scheme whose generosity creates difficulties for women’s labour market attachment.

Research has suggested that father quotas increase fathers’ participation in care and also put male employees in a much stronger position when negotiating parental leave with their employer. Notably, father quotas have in most cases been introduced in what O’Brien and Shemilt describe as a ‘gender collaborative context’ in which the father quota is added to the existing leave arrangements rather than making a part of the existing arrangements dependent on father take-up. This is due to concerns that the latter option may withdraw entitlements from mothers and increase the strain they may face, and create the perception among mothers that work-family policies are unhelpful. However, while fathers leave policies have generated a change in the gender balance of leave taking, particularly in countries like Sweden, in most cases women continue to take the majority of leave. In Austria, for example, research shows that in spite of the non-transferable period of leave, the percentage of fathers claiming the payment is low (and for women it is very high), probably because the payment is at a flat rate and because of cultural and workplace expectation. This suggests that daddy leave needs to be introduced in the context of other measures in order to be successful such as high wage replacement rates and is likely to take time as cultural expectations change.

Summary of ideal models

Evidence reveals that paid parental leave schemes improve both the prevalence and stability of women’s labour market attachment, reduce new mothers’ risk of dropping out of the labour market, and reduce gaps in pay between women with and without children. However, there are concerns about the extent to which paid leave periods, particularly longer paid leave periods, are predominantly taken by women and can be damaging to women’s career trajectory. As a result, design features in paid parental leave schemes can ameliorate some of the potential impacts on women’s labour market attachment and increase the involvement of men in the provision of care. Moderate lengths of paid leave (ie six to twelve months), options for taking leave periods flexibly and ‘decoupling’ eligibility for paid leave from labour market withdrawal are all features that can improve women’s labour market attachment. Research reveals that shared parental leave schemes are much more likely to be taken up by women than men. The provision of earnings-related payments with a relatively high level of wage replacement, quotas of ‘daddy leave’ and flexible options for taking paid leave are all features that are likely to increase the participation of fathers in care. Quotas for ‘daddy leave’ have been found to be the most effective mechanism for encouraging men to participate in child care. Longer non-transferable periods of leave (ie 6 months) are more likely to be successful in redistributing participation in care.

The ‘daddy quotas’, unlike wage replacement for example, also provide more scope for cultural change by opening up a more legitimate space in which men can negotiate leave with their employers. The increasing participation of men in child care is likely to have positive implications for women’s workforce attachment, particularly in light of evidence that fathers who take up parental leave are more likely to continue to have a greater involvement in the care of their children, and report greater family engagement and greater likelihood of part-time work beyond the cessation of the parental leave period.

The Scandinavian countries have been labelled ‘leaders’ in engaging fathers in child care and as a consequence, generating more equal outcomes in the gender distribution of care. According to O’Brien and Shemilt, the experience of the Nordic countries suggests that there are four factors that contribute to the increased involvement of fathers in care: father quotas, a high wage replacement rate, flexibility in the way that couples can take their parental leave, and government education and publicisation of male use of parental leave. Modelling by political leaders can also contribute to education and cultural change. Fathers in some industries or occupations, such as non-manual jobs compared with manual jobs, are more likely to take parental leave suggesting that a focus of publicisation could be in those sectors with lower uptake.
Finally, parental leave schemes, by improving women’s participation in the labour market and their consequent lifetime earnings, contribute to improving women’s retirement incomes in pension schemes that are linked to earnings (earnings-related schemes dominate in most countries). However, schemes that provide carer credits during paid and unpaid periods of parental leave will be more successful in meeting the goal of reducing the effects of parental care on incomes in old age (see Sections on Public pensions: carer credits and Private Pensions: carer credits).

(b) Carer leave (and leave for family responsibilities)

Leave provisions provide the opportunity for parents and carers to take time out of work to meet planned and unexpected needs for care of their children or other family members with a disability or long-term illness. It supports and recognises the ‘ongoing’ nature of family responsibilities. The EU Directive on Parental leave requires all EU countries to provide provisions for parents to take urgent leave for reasons of sickness or accident. Leave to care for another dependent family member is not currently regulated at the EU level. However, the EU is currently engaged in consultations on the possibility of EU measures in the area. As a result, at present, all EU countries have some form of leave provision for parents of children who are sick or who have a disability. However, significantly fewer have leave provisions to care for a family member with a disability or long-term illness. Internationally, there is a wide range of carer leave arrangements in place. Carer leave may be paid or unpaid the duration of the leave varies considerably from two days to two years. In many cases, the leave arrangements in a country differ depending on whether the care is for a child or whether it is for another dependent family member. The leave is funded in a range of ways, from employers, to the state, to individual savings (as in The Netherlands).

(i) Aims

Carer’s leave and leave for other family responsibilities aims to improve the capacity of parents and carers to undertake their caring and labour market responsibilities. In so doing, it aims to improve labour market attachment of parents and carers and reduce the likelihood that parents and carers are forced to drop out of the labour market. Depending on the nature of the leave, it may also reduce the impact of time spent caring on an individual’s earnings. The schemes vary in value, duration and coverage.

(ii) Value

Carer’s leave may be paid or unpaid and some countries combine periods of paid and unpaid carer leave. Parental leave to care for children who are sick or have a disability is more likely to be paid. Leave to care for other family members is less likely to be paid. Of the countries that provide paid leave periods, some are paid at a flat rate and others at a proportion of earnings. The Scandinavian countries provide the most generous earnings-replacement rate – at 100 per cent in Norway and 80 per cent in Sweden. Austria’s carer leave is also paid at 100 per cent of earnings and The Netherlands at 70 per cent. In Norway, Sweden and Austria and The Netherlands, the leave is paid by the employer. In Italy, the leave period is paid at 100 per cent of earnings but it is capped at an earnings ceiling. In several countries, particularly those with longer duration leave provisions, carer leave is paid at a flat rate by the state. In Canada, for example, the state pays the leave benefit from the social insurance fund at 55 per cent of average earnings for a set time. In Finland, the longer leave period is paid for by the state at the rate of 70 per cent of the unemployment benefit. In Denmark where, like Canada, the leave period is longer, employers are compelled to pay full wages for the duration of the leave and the government reimburses the employer a significant proportion of the cost.

(iii) Duration

In about three quarters of OECD countries, paid care leave is no longer than one month per year. Luxembourg, for example, provides five days of paid leave per year. The Netherlands provides 10 days per year. Austria provides two weeks per year for a sick child and one week per year for a relative with a disability or illness and Norway provides 20 days of nursing care leave and an additional 10 days of care leave. Several European countries have longer periods of paid leave. In Italy, individuals are entitled to take two years of paid leave to care for a dependent child or other relative over their lifetime. If the care is for a child, both parents are not permitted to take the leave at the same time. In Denmark, individuals may take paid leave to care for a family member with a terminal illness and while there is no limit on the duration of the leave, evidence must be provided at the start of the leave period that the sick family member has two to six months to live.

Belgium has the longest period of publicly paid carer leave. In Belgium, there is a system of ‘career breaks’ so that all employees are entitled to leave work for up to a year and receive a flat rate payment while on leave. The aim is to keep people with other responsibilities and needs in the workforce, primarily, to prevent women from dropping out of the labour market due to family circumstances. It also offers a ‘legitimate framework’ for men to take leave to care for children. In the Belgian system, this leave entitlement is called the ‘career break’ in the public sector and ‘time credit’ in the private sector. An employee who has been employed for at least a year may apply for leave under three ‘thematic’ reasons including leave to care for children, leave to provide palliative care, or leave for medical care, or an employee may apply for leave for general reasons. The leave scheme can therefore be taken for a range of reasons other than for children or other family members, and is available at any stage of the lifetime. The scheme is in addition to Belgium’s parental leave scheme, which provides each parent with three months leave per child which can be taken full-time for three months, part-time for six months or one day a week for 15 months paid at a flat rate – individuals are encouraged
In Ireland, in order to be eligible for leave, the carer must provide evidence that they provide full-time care. In Canada, for example, the person requiring care must be ‘gravely ill and at risk of dying’, in Sweden, leave must be for the person in need of care. In some countries, the possible relationships of the carer to the person receiving care are specified by the state. For example, in Slovenia, eligibility for paid leave is confined to care for a spouse. In France, unpaid leave is dependent on the condition of the person who requires care.

However, as yet, the Belgian system has done little to increase gender equality in care provision, with women taking up the scheme significantly more often than men. For women, the main reason for taking a full-time or part-time career break was family responsibilities. For men, among the small proportion who use the scheme, the main reason for taking a full-time break is to try out a new job, however those men taking the break part-time were more likely to do so for family responsibilities. These men were much more likely during the time of the career break to be heavily involved in domestic work and child care, suggesting that presenting fathers with options to reduce hours to undertake family responsibilities can be an effective way of increasing some men’s participation in caring tasks.

A large number of countries combine periods of paid leave with longer periods of unpaid care leave. France, for example, provides three months of ‘family solidarity leave’, of which 21 days is paid. The Netherlands combines 10 days of paid leave with 6 weeks unpaid leave. Fo Austria, in Slovenia, eligibility for paid leave is confined to care for a spouse. In France, unpaid leave is dependent on the person in need of care. In some countries, the possible relationships of the carer to the person receiving care are specified by the state. For example, in Slovenia, eligibility for paid leave is confined to care for a spouse. In France, unpaid leave is dependent on the condition of the person who requires care.

(iv) Coverage

Entitlement to carer leave can be linked to an individual’s workforce participation before taking leave or, in countries with social insurance style scheme, on individuals’ contributions to national insurance. In Finland, for example, the individual needs to have been working for at least 12 months prior to applying for paid care leave. In Canada, entitlement is dependent upon an individual’s national insurance contributions in the 52 weeks prior to applying for paid care leave. In Ireland, the period of unpaid care leave is dependent upon the individual being in continuous employment for at least 12 months.

There are also a number of eligibility requirements based on the individual’s relationship to the person they are providing care for or the condition of the person who requires care.

Parents

In most countries, leave to care for a child is available to parents, adoptive parents and foster parents. In a number of countries, there is a limit on how old the child can be for their parent to qualify for care leave. For example, in Italy, leave is available until their child reaches eight years old and in Hungary, care leave entitlement ceases when the child is 12 years old. For parents in some countries, there are two leave types: short periods of leave to care for a child who is sick, injured, or for some other reason, and longer periods of leave to care for children with a disability or serious illness. In France and Portugal, for example, parents of children with a disability or chronic illness are entitled to long periods of unpaid leave and Austria and The Netherlands provide long periods of unpaid leave to parents of a child with a terminal or life threatening illness.

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Some countries provide no paid carer leave, but provide only unpaid leave. In the UK, for example, ‘Time off for Dependents’ provides employees with the right to take a ‘reasonable’ amount of unpaid leave to deal with emergencies involving a dependent child or adult. Entitlement to carer leave can be linked to an individual’s workforce participation before taking leave or, in countries with social insurance style scheme, on individuals’ contributions to national insurance. In Finland, for example, the individual needs to have been working for at least 12 months prior to applying for paid care leave. In Canada, entitlement is dependent upon an individual’s national insurance contributions in the 52 weeks prior to applying for paid care leave. In Ireland, the period of unpaid care leave is dependent upon the individual being in continuous employment for at least 12 months.

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Research reveals that women are much less likely to use carer leave if it is unpaid, sometimes opting to take their paid recreation/holiday leave instead during periods where care is required._paid leave is therefore more likely to provide opportunities to more adequately manage work and care responsibilities. It is difficult to define the appropriate level of paid care leave. If the paid leave period is too short, it may not successfully prevent labour market drop out. However, if the leave period is too long, the carer may find it difficult to return to the labour market, particularly at the level at which they left. Long paid care periods like the one in Belgium (12 months) can create a risk of early retirement and so could benefit from being attached to return to work incentives. While Belgium's system provides a particularly long system, there are also a number of countries have longer paid periods than Australia and in some cases other countries provide considerably longer periods of unpaid carer leave (ie 12 months in Spain). While a number of challenges have been identified in Belgium's system of 'career breaks', it is unique in the extent to which it recognises the extent to which periods of intensive care provision may arise over the lifecourse.

There are a number of conditions on which entitlement to care leave may be attached. Several countries provide palliative care leave. Different countries have introduced the right to request flexible or reduced working hours. Right to request legislation means that employees have the flexibility to apply to change their working hours, including to reduce working hours for a specific period of time. Right to request legislation provides parents and carers with options to flexibly manage employment and caring responsibilities. It contributes to work and care arrangements, while creating greater options for parents in balancing work and care, have also been promoted as measures that boost the labour market by increasing flexibility and ‘spreading jobs across more people’ and improving the efficiency and productivity of the labour market.

To recognise the ongoing nature of caring responsibilities and the pressure they place on participation in paid work, some countries have introduced the right to request flexible or reduced working hours. Right to request legislation means that employees have the right to request from their employer flexible working and leave arrangements because of caring responsibilities, and employers must seriously consider the request. Some systems are broader than others, providing more extensive options from which individuals may request and there is also variation in the scope for employers to refuse the request.

Right to request legislation provides parents and carers with options to flexibly manage employment and caring responsibilities. It therefore has the potential to improve workforce attachment of carers and reduce the risk of workforce drop out among new parents or at the onset of caring responsibilities. For the most part, right to request legislation has been introduced in response to the needs of parents returning from periods of parental leave. As a result, the legislation has been considerably slower to recognise the needs of other forms of carers. However, some countries are beginning to extend the right to request provisions to carers of people with a disability or long term illness.
A number of countries have legislation providing the right to request flexible working arrangements. The EU Directive on Part-time Work (1997) encouraged (but did not require) employers to consider requests for part-time work and subsequently a number of European countries introduced rights to part-time or flexible work, although employers have the right to refuse. Right to request legislation exists in Sweden, the UK, New Zealand, Norway, Finland, Austria, Belgium, the Netherlands, Poland, the Czech Republic, Greece, Slovenia and Germany. However, in a number of them, the right is restricted to parents with respect to their children. In Italy the Government pays a subsidy to employers who provide options for part-time work to parents returning from parental leave.

Some right to request legislation is broader or more robust than others, providing more extensive options from which individuals may request and providing fewer grounds on which employers may refuse the request. In the Netherlands, for example, employees have the right to request a decrease or an increase in their working hours and a redistribution of those hours after one year with their employer. They are not required to provide a reason, ‘mainstreaming’ the needs of carers with those who have other reasons for requesting a change in hours. In Germany, a similar scheme exists whereby an individual can request an increase or decrease of hours and a redistribution of hours can only be considered in conjunction with a reduction in hours. Some countries (ie the Netherlands, Sweden and Germany) include the right to request to return to full-time work after a time of working part-time. This approach can respond to concerns that women can become ‘trapped’ in long-term part-time work by offering the option of part-time work as a ‘short-term solution, allowing individuals to transition into and out of part-time work as necessitated by their care needs across the lifecourse’ (for further details on appropriate part-time work, see Section on Protecting part-time work).

In the Netherlands, the employer must consider the request and may refuse the request if there are reasons based on the ‘serious interests of the enterprise or service’ such as, in the case of reduced hours, if the request would create serious problems in safety, in scheduling, or if the hours are not re-staffed and in the case of extra hours, if this creates serious financial problems for the organisation, if the work does not exist, or if the financial or physical capacity is not there. An employer must provide a decision within a month of the request or the employee’s wishes are granted. An employer can agree to the increase or decrease of the hours but not to their distribution if the interests of the business outweigh the reasons for the request being made. In Germany, employers must accept the request unless there are ‘business reasons’ and not adhering to the appropriate process results in the granting of the employee’s request. In The Netherlands and Germany, the case may be examined by a court if the outcome is considered by one party to be unsatisfactory.

In the UK, the current right to request legislation has narrower criteria under which individuals may request a change in working hours, and fewer options for changes. In the UK, the Flexible Working Regulations stipulate that parents of children under six, or children under 18 if the child is disabled, or carers of adults have the right to request flexible working. There is no obligation on employers to agree, and no recourse to the courts if there is an unsatisfactory outcome. In November 2012, the UK Government announced that it planned to extend the right to request flexible work to all employees, to be implemented in 2014. The stated aim of the proposal is ‘to give greater choice and freedom to workers and businesses. This will remove the cultural expectation that flexible working only has benefits for parents and carers, allowing individuals to manage their work alongside other commitments and improving the UK labour market by providing more diverse working patterns. For example, grandparents could apply for flexible working to help care for their grandchildren’.

New Zealand has a similar system, in which employees with caring responsibilities for children or other family members have the right to request flexible working arrangements and employers have an obligation to ‘consider requests seriously and accommodate them accordingly’. Some argue that over time, even the ‘softer’ right to request legislation in the UK is generating cultural change by encouraging employers to ‘consider the possibilities of change in the workplace’, and to begin to focus on the task of workplace adaptation. The British Government has suggested that even with the softer approach, the proportion of requests being granted since the law was introduced doubled to almost 90 per cent. In fact, the more generous entitlements of countries like Germany have not necessarily meant higher take-up: the take-up of the less generous UK scheme was higher than that in Germany’s more generous scheme.

However, preliminary evaluative research has shown successful outcomes may be unevenly distributed, and that rights to request may be more successful in medium level jobs than in challenging the long-hours culture of managerial positions and the inflexible hours of men. Research in the UK reveals that flexible work options are likely to increase men’s participation in child care, with men having made more use of the UK Right to Request provision with respect to flexitime and compressed hours. Men are less likely to take a reduction in hours if it means a reduction in pay, but are likely to accept more flexible ways of organising their existing hours. However, research has also suggested that fathers’ use of flexible work arrangements is higher in the public sector, and in certain industries such as community services and transport and distribution. They also had higher usage in workforces that were female dominated. Evidence from the UK suggests that, while a high proportion of requests are granted by employers, many people are not aware of their right to request. Research suggests that where the organisation provides written communication to its staff about their flexible work entitlements, rather than relying on word of mouth, awareness among employees’ of their rights is likely to be higher.
Finally, while flexible work possibilities may improve carers’ incomes in the present by improving their attachment to the workforce, it may not necessarily improve their pension incomes. In some countries, governments provide credits to those who return to work part-time after a period of caring.

(iii) Summary of ideal models

Right to request legislation provides opportunities for parents and carers to flexibly combine their employment with their caring responsibilities. Some countries provide a wider range of options that employees may request, providing greater flexibility in accommodating their needs. For example, several countries provide the right to request a ‘reversal’ of the request – back to full-time work when their caring responsibilities change. This is in response to concerns that parents and carers can become trapped in part-time work upon the commencement of their caring responsibilities. In addition, while ‘softer’ systems of right to request, such as the UK, have revealed widespread success in changing the practices of employers, some countries provide more robust systems in which employers have a greater obligation to consider the request and there is a system of appeals for situations in which either party is not satisfied with the outcome. These can strengthen right to request provisions, although greater employer obligation and a system of appeals can only have an impact if individuals are making requests of their employers, so ensuring that employees are cognizant of their rights is central to a successful right to request policy. Finally, right to request policies are in some countries being extended from parents to other forms of care which is important in providing equal opportunities across different groups of carers to manage their caring and employment responsibilities.

Finally, evidence suggests that right to request legislation operates most effectively when coupled with other mechanisms. Indeed, some countries have combined these mechanisms in legislation. In The Netherlands legislation requiring that individuals have the right to request a reduction in work hours is combined with legislation for the equal treatment of full-time and part-time workers (see section on Protecting part-time work). The Netherlands also combines a strong flexible working time policy with a short period of parental leave (four months).

(b) Protecting part-time work

While the promotion of opportunities to combine part-time work and care is important, it can lead to inequitable outcomes for women both in their labour market attachment and in their retirement incomes. Women in part-time work can experience significant disadvantage in pay and opportunities for professional development and progression. In addition, women in part-time work can be excluded from adequate retirement incomes provisions creating inequalities in incomes in old age.

Research has shown that increased part-time work, unless properly protected and valued, may increase flexibility for parents while also resulting in ‘occupational downgrading’ where many women are forced to change employers and work in part-time work with poor conditions. Flexible workplace arrangements need to be accompanied by protection of part-time workers, because the increase in part-time work without associated improvements to the remuneration and benefits of part-time work may create worse conditions for women not better ones.

(i) Aims

In response, in many countries, additional measures for ensuring that conditions under which part-time work is engaged in are protected. Ensuring that women and men engaged in part-time work are provided with equal pay for equal work, equal opportunities for promotion and equal access to occupational pensions is likely to improve both women’s labour market attachment and progression, and their retirement incomes.

(ii) Characteristics

In many countries, additional measures for ensuring that part-time work is a real option have included legislation that treats part-time workers equally to ‘comparable full-time workers’ by providing pay parity and equal access to ‘occupational benefits, training and promotion opportunities, and bargaining rights’. To this end the EU has ‘created a regime of equal treatment of part-time workers vis-a-vis comparable full-time workers through the Directive on Part-time Work. This Directive prohibits less favourable treatment of part-time workers, when compared with appropriate full-time workers, solely on the grounds that they work part-time. All EU Member States have now implemented the Directive. In the UK, this was done via the Part-time Workers (Prevention of Less Favourable Treatment) Regulations 2000. In its Regulatory Impact Statement, the Government estimated that the introduction of the equal treatment regime would benefit 400,000 part-time workers by increasing their pay and conditions. Some countries have stronger protection of part-time work than others and the result is that these countries, such as The Netherlands, have considerably better outcomes for women than countries like the UK where people in part-time work – more likely to be women – experience significant penalties in pay, training opportunities, and opportunities for career progression.
The protection of the conditions of part-time work, while important, is not adequate for promoting gender equitable outcomes because, as the Dutch experience shows (and the Netherlands is a world leader in protection of part-time work conditions), the result can be heavily gendered, where women can become trapped in long-term part-time work. As a result, there need to be opportunities for women to transition to full-time work (like provisions in right to request legislation that allow employees to request a reversal of their flexible hours back to full-time hours, see Section on Characteristics of Right to Request legislation) and adequate child care provisions for them to be able to do so (see Section 4 early childhood education and care).

(c) Regulating working hours
Some countries have measures that regulate weekly employment hours which can include setting standards for normal weekly working hours (above which overtime must be paid) and setting limits on maximum allowable hours above which individuals cannot be made to work. In France, regulation of working hours means that average working hours are low\(^{593}\) which makes it easier for women and men to transition back into the workforce after periods of leave or to reduce working hours to care for children. Normal weekly hours have been set between 35 (i.e. France) and 39 hours in many European countries (i.e. Sweden, Denmark, Norway). Some countries have also capped maximum allowable hours at 48 hours per week.

8.4 Services
(a) Early childhood education and care
There are three different models of early childhood education and care provision and different countries frequently focus on different models: policies that promote publicly provided and funded child care; policies that promote home care by parents using leave measures and income protection; and policies that encourage the purchase of child care privately through financial support to families to help them purchase that care.\(^{610}\)

(i) Aims
Early childhood education and care that is of a high quality is central to more equitable workforce participation because parents are not able to enter the workforce unless they have alternative care arrangements for their children.\(^{611}\) Evidence clearly shows that lack of child care facilities has a negative impact on female labour market participation.\(^{612}\) Publicly subsidised child care makes it easier for parents to return to work by reducing out-of-pocket costs and ameliorates inequalities in accessing child care across families at different socio-economic levels.\(^{613}\)

(ii) Characteristics
There are three different models of child care provision and different countries frequently focus on different models: policies that promote publicly provided and funded child care; policies that promote home care by parents using leave measures and income protection; and policies that encourage the purchase of child care privately through financial support to families to help them purchase that care.\(^{614}\)

Denmark, Finland and Sweden have public child care systems under the authority of ‘national social-welfare or educational authorities’ that provide care for children from the end of parental care periods (this is disputed by Craig and Mullan\(^{615}\)) until the child enters primary school. The access is universal with a modest co-payment for parents. Parents have a right to a place in a public child care facility.\(^{616}\) Full private care is uncommon although has become more common since the introduction of home care allowance. In the Nordic countries, comprehensive child care policies are particularly important in facilitating women's labour market participation. Denmark, Iceland, Norway and Sweden have high levels of coverage of one and two year olds (between 70 and 90 per cent) and provide extremely high coverage (approximately 95 per cent) of day care for three to five year olds.\(^{617}\) All Nordic countries also have home care allowances – or cash for care – some of which have been introduced more recently.\(^{618}\) The details of the cash for care systems vary, with some being contingent on workforce participation and others not.\(^{619}\) In Norway, there is a dual system of child care that combines publicly funded day care with a home care allowance or cash benefit for parents who provide care at home. In Denmark, parents have access to publicly-funded and provided child care for children aged one year and older, although the parental leave scheme only provides 32 weeks leave (18 of which is paid)\(^{620}\) which leaves a 20 week period in which parents returning from parental leave do not have access to the public sector child care guarantee. While the Scandinavian countries have very generous child care schemes, they are often only when the parental leave period is over and since many have longer parental leave schemes, it can be difficult for women to find a space in a public child care centre for children under the age of one or two. In Sweden and Denmark, parents have access to full-time places and in Sweden, working parents have priority access to child care places.\(^{621}\) Evidence reveals that the effect of child bearing on ‘female labour supply is less negative in countries with more generous provision of public child care’.\(^{622}\)

In contrast, Belgium and France do not have well developed publicly provided or funded child care for young children with publicly supported care targeted to the needy and therefore accessible to only about 20–40 per cent of under threes. In other countries, such as The Netherlands and New Zealand, individuals are provided with a government subsidy towards child care costs.\(^{623}\) In New Zealand in 2007, child care subsidies were increased from 30 to 50 hours per week and free child care for 20 hours per week was introduced for 3-4 year olds in educational care.\(^{624}\)
While some European countries, such as France, do not have child care systems that are universal like the Scandinavian countries, they have extensive pre-school programs for when the child reaches two and a half or three. France, for example, has universal access to pre-school for children aged about 2 and a half or 3 but access to child care for younger children is difficult. According to Morgan, leave schemes are increasingly being extended to fill the gap before parents become entitled to child care. However, providing access to child care for children at a younger age would be more positive for women’s workforce participation than extending leave periods. In Australia’s child care system, the child care payments are available for children of all ages.

Some countries are placing greater responsibilities on employers in the funding or provision of child care for their employees. In The Netherlands since 2007, for example, employers have been compelled to contribute to the child care costs of their employees. Individuals pay the child care costs upfront and the government reimburses them with a third of the cost and their employer compelled to reimburse them another third. In France, the Government provides tax relief for employers who provide internal child care facilities for their staff. Enterprises have “participated in the extremely rapid development of facilities for the care of young children. Subsidies have been provided to enable a company to create its own nursery”.

In Germany, credits are provided for three years per child but mothers who return to work during this time do not accrue additional insurance balances so there is no recognition of this dual role or incentive to return to work. Child Care Credits are provided from the time the child turns three. It therefore interacts quite well with the time limits on pension credits.

### Summary of ideal models

Evidence reveals that the provision of formal child care increases the ‘the prevalence and stability of mothers’ employment’. The countries with the most affordable and accessible child care are the Nordic countries that favour direct provision of care funded by government but with a parental co-payment of approximately 20 per cent which can be reduced according to means. Parental fees in countries like Belgium and France are about the same set on a sliding scale for those on lower incomes but parents incur costs for younger children for whom there is no publicly subsidised care and for out of hours care. The Nordic countries, which favour the publicly provided care option, have been found to provide the greatest support for female labour market participation. However, the recent move towards the provision of funding to the consumer (ie parent) has changed the traditional model of child care provision in the Nordic countries. Cash for care results in the ‘re-familialisation of care’, predominantly by women and results in longer absences for women from the labour market which has an impact on their pension balances. In Norway, for example, ‘cash for care’ has been found to create gender inequity in the provision of child care, as women are more likely to reduce their working hours accordingly and fathers are likely to continue working as before the family claimed the payment. This has been found in many Nordic countries.

For Gornick and Meyers, the more effective arrangement is one in which the government subsidises 80 per cent of child care costs (which is the European average) and the parent pays the other 20 per cent, adjusted according to family income. This, they argue, should cover care for infants (although the demand is lower because many parents prefer to care for their child in its first year), toddler and day care for 2-3 year olds, pre-school for four years olds and before and after school care for 5 and 6 year olds. The provision of outside of school hours care and vacation care is important to enable parents to combine work and care responsibilities.

The interaction between child care and parental leave is very important in promoting opportunities to combine work and care. Parents must have access to publicly subsidised child care when they decide to return to work after child bearing and the gap in some countries between the time at which parents are ready to return to work and the age that their child needs to be before they are entitled to publicly subsidised care creates significant problems.

### Formal care

There are a range of formal services that support carers in their caring role, reduce the intensity of their caring responsibilities, and ameliorate some of the effects of their care provision on different areas of their lives such as their health and wellbeing. Services are often funded by the state and provided by a mix of government and non-government organisations. They can include a range of services provided to the carer and the care recipient such as respite care; support with caring tasks (ie home care or domestic assistance); and information and counselling services.

**Aims**

By providing accessible, affordable and high quality formal support services to carers and the people they provide care for, the state has the potential to shape the extent to which care is provided by carers. The provision of formal services can reduce both the character and the intensity of the caring tasks provided by carers. Through supporting carers in their caring role, formal services aim to reduce the impact of caring on carers including their health, wellbeing, social relationships and other domains of their lives. Formal services can also make it easier for carers to participate in education or employment. Many carers are forced to drop out of the labour market due to their caring responsibilities and the aim of formal services, while they will not alleviate the caring responsibilities completely, will enable carers to remain in the workforce.
Formal support services can include services that provide caring tasks in the home such as nursing care or domestic assistance, respite care, and other support such as information and counselling. Some services, such as counselling or information provision, indirectly support carers to participate in the workforce by improving their health and wellbeing or providing information about available services. Carers report that counselling is useful for helping them to manage the pressures associated with their caring responsibilities and information services in the form of a one-stop-shop, such as the one in France, have been identified as the most effective form of information provision for carers. Research has revealed that the most important services in alleviating the responsibilities of carers are home/domiciliary care, specialist nursing (often palliative care), mental health services, day centres and respite care. These are also the types of formal services that are likely to have the greatest impact on reducing the intensity of the carers’ responsibilities and providing greater opportunities for them to participate in paid work.

Respite care is formal care provided on a temporary basis to the person with a disability or long term illness. Respite is designed to provide the carer with a break from their caring responsibilities or to provide them with time to undertake different activities. It can take several forms: day care services whereby the person receiving care has a short stay in a respite facility; institutional respite whereby the person receiving care may stay in a facility for a longer period of time providing carers with ‘vacation breaks, and in-home respite which is respite provided in the home of the person receiving care. Respite can be provided on a planned basis or in emergencies. Most countries in the OECD have some form of respite arrangements for carers but a smaller number of countries provide respite to carers as a right. For example, Ireland provides a yearly respite grant that can be used throughout the year and Austria provides an allowance to pay for up to four weeks of respite care. Germany’s social insurance scheme includes provisions for funding up to four weeks of respite care and Finland provides people with ongoing caring responsibilities with at least three days of respite care per month. In contrast, in many other countries, respite care is seen as a service but there is no specific right to carers to receive such services, or no direct reference to the number of days carers are entitled to. Some countries that provide a ‘right’ to respite care, such as Finland, do not subsidise the respite care which makes it difficult for families to afford the full cost. In other countries, such as Denmark, respite care is fully funded by the state which provides a more genuine ‘right’ to respite care. In Canada, the state provides tax credits to families who pay for respite care.

Research reveals that respite care is most effective at meeting carers’ needs when it is flexible, available at short notice and in emergencies and offers a range of respite options (such as short and long breaks and in-home care and institutional care). This flexibility is particularly useful for carers who are balancing care and employment. Research also suggests that day care based respite can be the most effective option for carers in paid work, although research from the UK and The Netherlands found that many day care centres were open shorter hours than the full working day which was creating difficulties for working carers. Evidence pointing to flexible respite rather than fixed hours suggests that a more tailored approach to respite is of greater use to carers although this does not necessarily mean greater devolution of responsibility for providing respite, as evidence from countries in which respite is organised at the municipal level, such as the UK, Spain and the Northern European countries reveals disparities in access. Community transport has also been identified as an important service, and the way in which this interacts with respite services and other needs for transporting dependents also relieves the pressure on carers and is likely to make it easier for working carers.

The provision of care and assistance in the home also provide considerable support to carers that may reduce the intensity of their caring responsibilities and improve their opportunities to combine work and care. Scotland provides free personal care for older people. Women are more likely to be paid out of a personal budget.

Several countries have developed more comprehensive systems for assisting carers with their caring responsibilities and understanding their support needs. One effective mechanism has been through a carer assessment. The UK has introduced a right for all carers to undergo an assessment of their needs after which time they are referred to appropriate support services. The legislation states that during the assessment, the carer’s wishes and needs regarding education, training and employment must be taken into consideration in the assessing their support needs. However, research has found that many people are not receiving proper access to an assessment and that some were reported as not having their employment needs taken into account. Sweden also has a system of assessing carers’ needs and referring them to appropriate services in an integrated system of respite and counselling support. In Austria, there is a system of local support centres and carers who enrol have their needs assessed and are directed to appropriate services. The carer receives a ‘case (or care) manager’ who acts as a kind of broker, helping the carer to access the appropriate services and helping to bridge the gap between the health and social care services. The Netherlands also has a system of ‘care brokers’ targeted at working carers, in which carers are provided with a case manager to help them navigate the service infrastructure and co-ordinate the range of health and social care services. This saves working carers some of the time they would spend on ‘care management activities’. These care brokers may even, if requested, negotiate on behalf of the carer with their employer.
8. Technical Paper G: International models for recognising and valuing unpaid care

(iii) Summary of ideal models

Formal support services, in order to be effective, must be affordable, appropriate to a diverse range of needs and flexible to accommodate changing needs over time.\(^6\) Evidence shows that some carers are not familiar with what is available to them\(^7\) which suggests that effort needs to be invested in ensuring that carers are aware of the services that are available to support them in their caring needs. One method that has been successful in making services available to carers that are appropriate to their needs has been a process of carer assessments. Carer assessments are an important method of identifying carers needs and ensuring that they have access to services that meet their specific needs. They also have the potential, if they are structured to take account of the carer’s wishes and needs regarding education, training and employment, to provide support that best allows carers to combine care and workforce participation or training.

8.5 Other policies

(a) Anti-discrimination legislation

Research suggests that policies that promote the rights of parents and carers are likely to be most effective if underpinned by anti-discrimination legislation. Anti-discrimination legislation ensures that the provision of rights to parents and carers in the workplace (such as access to leave provisions and flexible working arrangements) is not accompanied by discrimination against individuals on the basis of their parental or carer status.\(^8\) The EU has provisions requiring that a parent will not be discriminated against because of their child care responsibilities and the EU Employment Equality Directive states that a woman must not be discriminated against for leaving the workforce to have a child. As a result a number of EU countries have legislation prohibiting discrimination based on family responsibilities understood to mean child bearing or rearing. However, the prohibition of discrimination on the basis of caring is not explicitly addressed in any country’s anti-discrimination legislation. Ireland is the only partial exception, prohibiting discrimination on the grounds of ‘family status’ which includes carers but only ‘primary carers’.\(^9\) Protection against ‘associative discrimination’ is potentially available for individuals in EU member states through disability discrimination provisions, in that a carer cannot be discriminated against because they care for an individual with disability, but this provision is underexplored and tested.\(^9\) In 2010, the UK introduced the Equality Act (2010) to protect working carers from discrimination in the workplace.\(^9\)

Legislation prohibiting discrimination on the basis of caring responsibilities is a method of protecting the rights of carers and normalising atypical working patterns associated with caring responsibilities.\(^9\) Busby suggests that legislation of this sort could be consistent with the existing frameworks of the EU and could resemble the UK’s Disability Discrimination Act (DDA). The DDA places an obligation on employers to take special measures to accommodate the needs of an employee with a disability where a ‘provision, criterion, or practice’ operates to place that person at a disadvantage to those without a disability.\(^9\) This legislation provides the flexibility to account for differences in the needs of people with disability and could do the same for people with caring responsibilities, prompting employers to remove barriers to participation faced by employees with caring responsibilities.\(^9\) Busby suggests that legislation could be based on the grounds of ‘reasonable accommodation on the grounds of recognised carer status’.\(^9\) She argues that the DDA has had several issues in its enforcement largely resulting from the interpretation of ‘disability’ and what it is ‘reasonable’ to expect of an employer but is nonetheless an extremely important instrument in reducing barriers to equal participation of people with disability.\(^9\)

(b) Gender pay equity

The principle of equal pay was set out in a European Directive on Equal Pay in 1975 (75/117/EEC), replaced by the European Directive on Equal Treatment in 2006 (76/207/EEC) focussing on gender in ‘matters of employment and occupation’.\(^6\) All EU countries have responded by developing equal pay legislation and some have equal pay provisions enshrined in their constitutions.\(^4\) There are a number of measures that EU member nations have introduced in an attempt to reduce the gender wage gap. Smith suggests that these fall into five categories:

- Creating a positive duty on organisations to achieve gender equality through information campaigns and monitoring and compliance to the use of public procurement policies to encourage employer behaviours.\(^5\) The UK, for example, introduced a ‘Gender Duty’ obligation on public authorities to demonstrate that they are treating men and women fairly, and they can be issued with compliance notices for a breach on the Gender Duty.\(^5\)

- The second is promoting transparency, as lack of transparency in wages contributes to ongoing wage inequality and in some countries employees may be contractually obliged not to discuss their pay with colleagues. Several countries have developed compulsory reporting of salaries paid to men and women to a central monitoring body and in some cases, workers representatives.\(^5\)
Addressing low pay is also an important method of ameliorating the gender pay gap. Many countries have introduced a national minimum wage.\textsuperscript{686} Another strategy can be to reduce gender segregation. Finland, for example, has an ‘equality pot’, an annual sum of money that is earmarked for pay rises for municipal low paid highly educated positions that are gender segregated.\textsuperscript{689} Raising awareness or ‘developing local champions’ have also been identified (such as the development of the ‘Day of Equal Pay’ in The Netherlands) and the setting of national targets such as in Finland, which has developed a target to reduce the gender wage-gap from 20 to 15 per cent by 2015.\textsuperscript{690}

Several countries, such as Denmark, France, Greece and Latvia, have developed national equality bodies or ombudsmen to promote and monitor the gender wage gap and targets to reduce it.\textsuperscript{691}

\section*{(c) Other income support policies}

\subsection*{(i) Tax credits}

Several countries provide tax credits to carers to compensate them for the costs associated with their caregiving. This form of support for carers has been described as a useful strategy because, as opposed to tax deductions for example, they provide ‘greater relative tax savings’ to individuals in lower income brackets and can be of particular benefit in low income families in which family members are attempting to combine work and care.\textsuperscript{692} Canada and the United States have a tax credit program as well as a variety of tax credit arrangements in the provinces (Canada) and states (the US).\textsuperscript{695} In Canada, some caregivers are eligible for one of several non-refundable tax credits (the Caregiver Tax Credit, the Eligible Dependent Tax Credit, the Infirm Dependent Tax Credit, the Spousal or Common-Law Partner Tax Credit, the transfer of the unused amount of the Disability Tax Credit, and the Medical Expenses Tax Credit).\textsuperscript{696} Several of the credits provide a flat rate reduction in the carers’ tax liability (one of which is dependent on co-residence with the person receiving care) and the Medical Expenses Tax Credit provides a considerably larger credit to compensate for up to USD 10,000 in medical expenses for the person receiving care.\textsuperscript{697} In the US, the Dependent Care Tax Credit provides a tax credit to low income working carers who co-reside with the person receiving care and provide at least 50 per cent of the care.\textsuperscript{698}

However, there have been several issues raised with tax credits of this nature. As tax credits are only for those who pay tax, they are not available to caregivers with caring responsibilities that are precluding their participation in the workforce.\textsuperscript{699} In addition, the above tax credits are non-refundable which means that carers with very low incomes and who consequently pay small amounts of tax are likely to receive a very small level of compensation for the costs of care.

\subsection*{(ii) Carer Payment}

Some countries provide direct payments to carers as a form of income support. The payments are designed to compensate to some extent for the reduced working hours associated with their caring roles and for the additional costs associated with caring.\textsuperscript{690} A number of countries provide direct payments to carers and across those countries, there are two approaches to providing carer payments: one in the Nordic countries, and one used predominantly in English-speaking countries or liberal welfare regimes. In the Nordic countries, such as Denmark, Finland, Norway, and Sweden, the payment is remuneration for the work that carers perform. Carers are effectively employed by the state to provide care and the value of the carer payment can be close to the hourly rate earned by paid care workers.\textsuperscript{699} However, the literature suggests that while this is an important method of ensuring that carers have an adequate income, this approach can be costly and a case may be made that paying formal carers may be more appropriate.\textsuperscript{700} In addition, the payments tend to be directed to those with intensive caring responsibilities and do not provide for other carers with less demanding caring responsibilities.\textsuperscript{701}

In English-speaking countries such as Australia, Ireland, New Zealand, and the United Kingdom, payments are provided on a means-tested basis to people with intensive caring responsibilities. Hinging eligibility on a strict means test and intensive eligibility requirements means that the payments presuppose that the carer is participating in care full-time and is not in or only very marginally attached to the workforce.\textsuperscript{702} For example, in the UK, in order to be eligible, individuals must be providing care to a person with a severe disability for at least 35 hours per week and weekly earnings from paid work must stay below a low ceiling. This effectively limits the payment to those with very low earnings or those who have left the workforce.\textsuperscript{703} The payment is at an extremely low rate. Recipients are much more likely to be women. As a result, these payments have been criticised for only covering a small proportion of carers and for creating a disincentive to participate in the workforce.\textsuperscript{704} Research also reveals that the strict limits on earnings can push carers into ‘downgrading’ from their professional employment into low paid or menial work.\textsuperscript{705} The inflexible earnings limits can create difficulties and can create difficulty for carers in juggling casual hours to ensure that they are below the limit and make them fearful of accepting offers of additional shifts, even if they would like and are able to do them.\textsuperscript{706}

In some countries, recipients of Carer Payment are entitled to carer credits. However, in recognition that Carer Payment is only available to those with very intensive care responsibilities and low incomes, the credits in the UK have been extended to carers who provide care for 20 hours per week or more for someone in receipt of a disability-based income support payment (see Section on Public pensions: carer credits).
8.6 Summary of how models interact in positive ways

The mechanisms in the paper contribute to one or more of the goals of this project: some mechanisms directly ameliorate inequalities in retirement incomes, such as carer credits in retirement income systems; other mechanisms, such as parental leave and right to request legislation, improve the opportunities for women (and men) with caring responsibilities to enter, re-enter, or remain attached to the workforce, promoting greater equality in workforce participation and improving opportunities to undertake both work and care; other legislation, such as ‘daddy quotas’ (or ‘partner quotas’) in parental leave schemes, contribute to the more equitable sharing of care responsibilities between women and men. Mechanisms in each of the countries interact in complex ways to meet the goals. Carer credits in pension schemes to some extent ameliorate gender inequalities in retirement incomes. However, research shows that carer credits need to be combined with other policies that support employees with caring commitments, such as parental leave, leave to care for dependents, and ‘long-term career breaks’, in order to be most effective. Moreover, measures that create greater equality in workforce participation and participation in care will also play a central role in creating greater equalities in retirement incomes. In particular, policies that promote labour market participation and create greater opportunities to combine work and care can improve incomes in the present and, as a consequence, incomes in old age.

In parental care, countries combine leave periods, publicly subsidised early childhood education and care, and flexible work options. In other forms of care, countries combine appropriate formal care services, flexible work arrangements, and access to care leave. The success of each of the mechanisms depends on the existence of a range of other mechanisms. For example, parental leave policies work most effectively in promoting workforce attachment if individuals have access to right to request legislation. Right to request legislation can improve workforce attachment of carers but it depends on access to part-time work with appropriate conditions and opportunities for career progression. Finally, participation of women in part-time work depends on access to appropriate, affordable and accessible early childhood education and care and other formal care options. As a result, governments need to focus on a combination of mechanisms in order to meet the goals of creating greater equity in work and care and valuing care in the retirement income system.


ABS, above.


For a discussion of the differing methods and estimates of caring see ABS A profile of carers in Australia (2008), Catalogue no.4448.0, Appendix.

ABS, Caring in the Community, Australia (2012), Catalogue no. 4436.0, p 3.

ABS, above.

ABS Caring in the Community, Australia (2012), Catalogue no. 4436.0, p 3.

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ABS, Disability, Ageing and Carers, Australia: Summary of Findings, (2010), Catalogue no. 4430.0, p 34.

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ABS, 'Caring for Children' Gender Indicators, Australia (Jan 2012), Catalogue, no. 4125.0. At http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by+Subject/4125.0~Jan-2012~Main+Features-Caring+for+children~4120 (viewed 1 August 2012).

ABS, Caring in the Community, Australia, 2012; Catalogue no. 4436.0, p. 5.


According to the Henry Review, the replacement of the contributions tax with a system of tax offsets would bring the taxation of superannuation more in line as proposed by ACOSS (2012), tax would be deducted from the employees' superannuation contribution, not from their wages.

Australian Council of Social Services, Carer Card.

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R Clare, above p 9.

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137 The schemes recommended by the Henry Review and ACOSs apply only to those in the workforce. In their suggested schemes, there are no provisions for those outside of work providing care.

138 Individuals outside of the workforce will be provided with information and support by government to set up an appropriate superannuation account. This could be linked to the roll out of the Government’s MySuper accounts (see Australian Government, ‘Stronger Super: Information Pack’ (2011).


140 A taper rate of 85 cents (or 90 cents) for each dollar that is contributed to super could be considered to create a greater work incentive. This would be a Fair Work Ombudsman.

141 People providing unpaid care to a friend or family member with a disability or long term illness, including parents caring for a child with a disability or long term illness, for 35 hours per week or more.

142 The duration of the credit for carers needs to be the subject of further consideration.

143 The hourly thresholds of care provision and the level of care need are provisional limits and would need to be properly conceptualized in the development of the Carer Assessment process. The 20 hours limit is drawn from practice in the UK in the entitlement for a Care Certificate.

144 The hourly thresholds of care provision and the level of care need are provisional limits and would need to be properly conceptualized in the development of the Carer Assessment process.


150 Fair Work Act 2009 (Cth), s 65.

151 N Charlesworth and A Heron, ‘New Australian Minimum time standards: Reproducing the same old gendered architectures?’ (2012), 54(2) Journal of Industrial Relations 164, p 172.

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153 Fair Work Act 2009 (Cth), s65.


158 N Skinner, C Hutchinson and B Pocock, above p 62.


160 N Skinner, C Hutchinson and B Pocock, above p 67.


As Chapman notes this includes the ‘Sex Discrimination Act 1975 (SA); Equal Opportunity Act 1977 (Vic); Anti-Discrimination Act 1977 (NSW)’ (‘ADA (NSW)').


Sex and Age Discrimination Legislation Amendment Act 2011 (Cth).


Equal Opportunity Act 2010 (Vic); Anti-Discrimination Act 1998 (Tas); Anti-Discrimination Act 1998 (NT); ACT Discrimination Act 1991 (ACT).


B Smith, above.


Recommendation 16: Extend family and carer responsibilities protection under the SDA (Stage One)

(1) Make direct and indirect family and carer responsibilities discrimination unlawful in all areas covered by Part II Div 1

(2) Modify the definition of family responsibilities to include family and carer responsibilities which is inclusive of same-sex families, and provide a definition of family members and dependents which ensures adequate cover for both children and adults to whom care is being provided

Recommendation 17: Positive duty to reasonably accommodate the needs of workers who are pregnant and/or have family or carer responsibilities (Stage One)

Introduce a positive obligation on employers and other appropriate persons to reasonably accommodate the needs of workers in relation to their pregnancy or other family and carer responsibilities. Failure to meet this obligation would be an actionable form of discrimination.


220 Workplace Gender Equality Act 2012 (Cth), s 2A.

221 Workplace Gender Equality Act 2012 (Cth), s 2A.


231 Department of Human Services, above.


240 Department of Human Services, above.


Productivity Commission, Report on Government Services 2012 (2008), Table 3A.42 Main reason any of additional child care or preschool required for children aged 0-6 was not accessed.


Australian Council of Social Services, above.


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Carer Recognition Act (Cth) s 5.

Carer Recognition Act (Cth) s 3.

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Carer Recognition Act (Cth) s 6. The Statement for Australia’s Carers is set out in Schedule 1.


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Carer Recognition Act (Cth) s 11.


House of Representatives Standing Committee on Family, Community, Housing and Youth, above.


Anti-Discrimination Act 1991 (Cth) s 3.


Equal Opportunity Act 1984 (SA) s 5.


Carers Australia, above.


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ABS, above.
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366 B Hass and M Hartel “Towards the Universal Care Course Model” (2010), 12(2) European Societies 139, p 140.

367 A Morgan, ‘Caring time policies in Western Europe: Trends and implications’ (2009), 7(1) Comparative European Politics 37, p 42.


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