

Collegio Carlo Alberto



Does caring for the elderly affect mid-life women's
employment? Differences across regimes

Manuela Naldini

Emmanuele Pavolini

Cristina Solera

No. 368

October 2014

Carlo Alberto Notebooks

www.carloalberto.org/research/working-papers

Does caring for the elderly affect mid-life women's employment? Differences across regimes

Naldini Manuela (University of Turin)*, Pavolini Emmanuele (University of Macerata)**
and Solera Cristina (University of Turin)***

Abstract

Does caring for an elderly person affect mid-life women's employment? What is the role of the institutional and cultural context? This study draws on Eurobarometer micro data, which have been integrated with institutional country-level datasets, and by means of cluster analysis and multilevel analysis across 21 European countries it analyses the main micro and macro factors that influence decisions to give up or reduce (or not) paid work when having to care for a frail elderly parent. The results show that living in a 'care-work regime', different in terms of care policies, care and family cultures and overall women's activity rates, matters. In Scandinavian countries – the most de-familialised ones – women rarely change their labour market participation for elderly caregiving. Conversely, where service coverage is lower and intergenerational family care obligations higher, as in Southern and Eastern European countries, mid-life women's employment is discouraged.

Keywords

Women's employment; work-family reconciliation; elderly care; welfare state policies; care-work regimes.

* Naldini Manuela is Associate Professor in Sociology of the Family and Welfare Systems at the University of Turin (Italy), Department of Culture, Politica e Società and Affiliate at the Collegio Carlo Alberto.

** Pavolini Emmanuele is Associate Professor in Economic Sociology and Social Policy at the Macerata University.

***Cristina Solera is Assistant Professor of Sociology at the University of Turin (Italy), Department of Culture, Politica e Società.

Introduction

Combining paid work and family life can be considered a key issue in contemporary European societies in terms of productivity, reproduction and social gender equality. Traditionally, attention in reconciliation issues has been mostly given to child care. Much less attention in both policies and research has been paid to the second caring phase in the life course: the time when parents or relatives become frail and need somebody to care for them. This asymmetry in interest certainly mirrors the asymmetry in the incidence of those two experiences within the working-age population. Yet, given the triple phenomena of the increasing labour-force participation of women, increased life expectancy, and regulations raising pension ages, this proportion has however increased, together with acknowledgement that the issue of reconciliation is not confined to young adults in family formation alone.

Research on the relationship between midlife employment and caregiving has thus also gained importance, but it still has important gaps. It is rarely comparative across a large range of countries. If it is comparative, it uses widely different concepts of both care and work, as well as different methods, samples, and sets of variables (Hessel and Keck, 2009). In particular, it tends to use a cross-country comparative theoretical framework without empirically testing the effect of specific features of the macro context or without placing cross-national differences within the broader 'regimes' debate (Esping-Andersen, 1990, 1999; O'Reilly, 2006; Saraceno and Keck, 2010; Williams, 2012) that would make it possible to capture not only the role of welfare state policies (or of single policies) but also their interplay with the labour market, the family, and the cultural assumptions behind them.

This paper tries to fill the above-mentioned gaps by addressing the following questions: How, for whom, and in which countries does caring for an elderly person have an impact on paid work? In what ways do labour-market opportunities, welfare state policies, and cultural values concerning intergenerational responsibilities affect employment participation by mid-life women? The analysis is based on Eurobarometer data from 2007. This is a relatively old dataset, but it has the valuable advantage of containing information on all European countries, not only on labour-market positions and care responsibilities and activities (intensity of care and co-residence with the frail elder), but also on attitudes regarding the 'right' place and way to care for a frail elder, especially on intergenerational obligations. The Eurobarometer microlevel dataset is integrated with institutional country-level datasets and both descriptive and multivariate analyses are performed in order to determine the main micro and macro factors that influence decisions to give up or reduce (or not) paid work when having to care for a frail elderly parent.

The impact of elderly care on employment: previous research

Reconciling work and family has become a critical issue both in Europe and the US (Jacobs and Gerson, 2004; OECD, 2005a/b; Gornick and Meyer, 2009). However, most research has focused on working parents, and especially on the effect of motherhood on women's labour-market attachment, future careers (Jaumotte, 2003; Vlasbom and Shippers, 2006; Solera, 2009), and overall welfare and quality of life (Horemans, 2012). Comparative research has widely shown the importance of the welfare state, and especially of reconciliation policies (Gornick et al., 1997; Stier and Epstein, 2001; Misra et al., 2007; Gash, 2008), and of cultural differences (Hakim, 2000; Pfau Effinger, 2005), in explaining cross-national variations in this motherhood effect. By contrast, with some exceptions (Finley, 1989; Pavalko and Artis, 1997; Gauten and Hagen, 2010; Knijn et al., 2013), research on work-family reconciliation has rarely addressed the effect on employment of having to care for a dependent elderly parent. In tandem, also policies have been relatively silent on the matter.

However, given the growth of the aging population, the increasing labour-force participation of women and senior workers, regulations raising the retirement age, and the EU-sponsored goal to increase labour-market participation in the 55-64 age group, the number of mid-life working care-givers is expected to increase in the near future, so that the issue will become a crucial challenge for the future of the welfare state in Europe.

As in the case of childcare, the model of care provision for dependent elderly is mainly based on unpaid/family female work and on gender assumptions and practices (Gornick et al., 1997; Lewis, 2006). As in the case of distribution of childcare, gender indeed operates as a normative framework whereby it is more

likely that a daughter expects, or is expected, to provide care for her father/mother than is a son (and a sister more than a brother). In addition, social policies and family obligations are gendered (Millar and Warman, 1996; Daly and Lewis, 1998) so that women are more likely to build a 'moral career' as carers (Finch and Mason, 1993; Saraceno and Keck, 2010). However, when compared with childcare, combining work and care for an elderly dependent parent presents some specific characteristics which may affect the way in which it impacts on both work and care (Keck and Saraceno, 2010; Knijn et al., 2013). First of all, care is less predictable over time and it has a path which usually leads to regression and/or the increasing dependence of the person in need of care. Moreover, there is no clear hierarchical relationship between the care-giver(s) and the cared for, and the decision concerning the care-arrangements may be taken by a larger number of providers and family members (i.e. the main care-giver, siblings, other relatives, and so on). In terms of work career, given that caring for a dependent elderly person usually occurs later in the life course, working care-givers are senior workers (some close to retirement age) and therefore tend to have longer and consolidated job positions, the care-giver work-career is not at stake (Da Roit and Naldini, 2010). Finally, in policy terms, care policies for the elderly are less institutionalised, more fragmented, and generally less formalized; and they constitute a sector of intervention younger than childcare (Anttonen et al., 2003; OECD, 2005b). Therefore, care-arrangements for the elderly are less standardized than childcare, and the mix of formal, semi-formal and informal care is not only more comprehensive, in that there are many different providers and locations, but also varies over the different stages of dependency (Naldini et al., 2013).

As said earlier, research on combining work and childcare has widely shown the extent to which juggling care and work may have a strong impact on women's labour-market participation and future careers. The literature on combining work and care for a dependent elderly parent seems only to a limited extent to confirm the negative impact of care on the level and type of labour-market participation. Indeed, most studies find that caregiving does not have a major effect on employment (Wolf and Soldo, 1994; Da Roit and Naldini, 2010), and, if it does so, the effect consists more of reduced working hours (Johnson and Lo Sasso, 2000; Pavalko and Artis, 1997; Spiess and Schneider, 2003) than complete withdrawal from work (Moen et al., 1994). Moreover, combining care for an elderly parent and work is especially difficult for those who lack adequate financial resources (Sarasa and Billingsley, 2008), and for those for whom welfare supports are not available or accessible (Lechner and Neal, 1999; Sarasa, 2008; Saraceno, 2010). Finally, some studies show that caregiving has a negative effect on employment, but mainly if the care is provided to a co-resident dependent relative (Corti et al., 1994; Heitmueller and Michaud, 2006) and is particularly intensive in terms of hours of care (Carmichael and Charles, 1998; Ettner, 1996; Lechner and Neal, 1999; Crespo, 2007).

However, the empirical evidence on the relationship between mid-life employment and caregiving is still inconsistent, incomplete, and heterogeneous (Hessel and Keck, 2009). In particular, the above-mentioned studies use widely different concepts of both care (and especially the intensity of care) and work (paid work), and they employ very different methods, samples, and sets of variables. Moreover, few studies explore cross-country differences, especially in Europe (Hessel and Keck, 2009). Among these few, three are of particular importance because they compare a large number of countries.

The first study is that by Spiess and Schneider (2003), who use ECHP data for 12 EU-countries and consider the reciprocal link between changes in caregiving hours and in working hours for a sample of women aged 43-57. They find that employment status or other work-related factors hardly explain why mid-life women become caregivers, whereas they matter in explaining why women who are already caregivers increase their hours of care. The main difference among countries concerns women that combine employment with high-intensity caregiving, who are rarest in Denmark and most widespread in Portugal. The relation also emerges in the reverse direction, i.e. the impact of care on employment: a negative impact is evident only when women start caring, not when they increase caregiving; and, controlling for individual and family characteristics, there are no differences across countries. Drawing from the same dataset (ECHP) and focusing on women aged 20-59, Viitanen (2005) finds that informal elderly care decreases women's labour force participation in most of the 13 EU countries, and especially in the cases of older women closer to retirement and never-married women. However, on allowing for unobserved heterogeneity, this negative association exists only in Germany. Finally, by using SHARE data and focusing on the role of caregiving frequency, Crespo (2007) finds that 'intensive' informal care of an elderly parent decreases the probability of participation in the labour market in both Northern and Southern countries. Yet, whilst in Northern countries a small percentage of women report that they provide intensive informal care to an elderly parent, in South

Europe many women do so, with the consequence of an overall lower level of female labour-market involvement.

The role of the institutional and cultural context: the debate

As it does in childcare, the institutional context plays a crucial role in shaping the extent and the way in which women combine work with care for a frail elderly parent, thus accounting for cross-country differences. In line with Esping-Andersen (1990), the institutional context can be defined as the interplay among the labour market, the welfare state, and the family (and non-profit sector). As conceptualised by Saraceno and colleagues (Saraceno, 2010; Saraceno and Keck, 2010) in regard to care and reconciliation responsibilities, the division of responsibilities among the various institutions concerned, but especially between the state and the family, can give rise to different degrees of defamilisation or familialism affecting the employment chances and options of women. When the state, through social policies, provides a substitution for familial (female) informal care, typically through affordable and high-quality out-of-home care services, women's employment is encouraged. Differently, states which introduce and support 'cash for care' policies (Ungerson and Yeandle, 2007; Pfau-Effinger, 2005), without introducing a tight regulation of the use of the benefit, tend to assign the main care responsibilities to the family, thus inhibiting women's labour-market participation (Da Roit and Le Bihan, 2010). A role is also assigned to the family as the main 'agency' by family leave policies, which can allow a close relative in work to take 'time off to care', paid as in Italy (3 days per month), or unpaid as in Portugal (Knijn et al., 2013).

Institutions do not only define the set of opportunities and constraints in which women and couple act. By assuming or explicitly promoting particular models of behaviour, they also define and give legitimacy to certain cultural norms. Considering both policies and culture concerning intergenerational obligations is thus crucial for shedding light on cross-country differences in the combination of care with paid work by mid-life women (see also Haberkern and Szydlik, 2010). To this end, European countries can be clustered into care-work regimes referring to two main theoretical frameworks.

The first one stems from the well-consolidated literature on the *Three Worlds of Welfare Capitalism* (Esping-Andersen, 1990; 1999), which posits the notion of regime as including relational dimensions among the various spheres providing welfare. Following the 'regime' approach, Antonnen and colleagues (Antonnen and Sipila, 1996; Antonnen et al., 2003) have developed the concept of '*social care*' regimes, considering different ways of providing and packaging care services for the elderly and the young at the intersection of family, state, non profit, market spheres.

The second theoretical framework used stems from the idea that it is crucial in this area to consider the different ways in which care responsibilities are assigned to the family and how societal institutions support family caregiving or otherwise, and/or support women's employment or otherwise, not only in the field of social care services but also in regard to leave arrangements and financial provisions (Bettio and Plantenga, 2004). In this theoretical framework, a central role has to be assigned to the state's approach to gender and care, and to policies for combining family and work, but also to 'family culture'. Blending the 'caring regime' approach with the feminist debates on 'familialism' and of de-familization (McLaughlin and Glendinning, 1994), one may speak of 'varieties of familism' (Leitner, 2003, Saraceno, 2010, Saraceno and Keck, 2010). Paying attention to both (implicit and explicit) gender and intergenerational expectations within policies, Saraceno (2010; Saraceno and Keck, 2010) identifies three main patterns along the familialism/defamilization continuum: 1) *Familialism by default*, or *unsupported familialism*, when the responsibility for providing the care is assigned mainly to the family (women), because there are neither publicly provided alternatives to the family nor explicit financial provisions for family care; 2) *Supported familialism*, when the family is supported with parental leave, payment for care, or tax relief; 3) *De-familisation*, when there is a high level of services for the frail elderly (publicly-financed services and/or market provisions) and the individualisation of social rights reduces family responsibility (along its gender and generational lines). These patterns may be found in all countries, but in different combination.

An important factor, only implicitly included in this second theoretical framework but which can help explain cross-national differences in the combination by women of caregiving and employment, is culture (Pfau-Effinger, 2005; 2010): social norms on who should care for a family member, women's employment, and intergenerational obligations. We can roughly denote this with the expression *family and care culture*. The cultural system, in particular the family and care culture, is strongly interrelated with the social structure

and with the institutional system, with care services and labour-market institutions and opportunities (Jo, 2011). This interplay means that policy or culture alone cannot explain or determine behaviours or practices. However, culture forms an important link between the micro and the macro. A family-oriented care culture, at both the societal and individual level, for instance, might reflect the inadequate public support which makes it not only ‘behaviourally’ more difficult to offer out-of-family forms of care to the frail elderly, but also ‘culturally’ less legitimated (see Szinovacz and Davey, 2008).

By blending the different types of ‘welfare, work and care’ regime, and their emphasis on the relations among different spheres providing welfare, with the concept of familism vs de-familisation, and by more explicitly adding the analysis of family and care culture, we can explore cross-national variations in the combination of work and care for a frail elderly person in Europe. In the following section, we shall propose a measure of the institutional and cultural dimensions pointed out as crucial in the two theoretical frameworks discussed; and by means of cluster analysis, we shall see which clusters of countries emerge.

Clustering countries into ‘care-work regimes’

In line with the some of the concepts of the theoretical framework outlined above, we propose three ‘macro’ variables which can help to capture the differences and similarities across countries. A first variable measures the ‘*level of women’s labour-market participation*’. It focuses in particular on women aged between 40 and 60, because it is these who may need to reconcile care for elderly relatives with work without being already in retirement. The variable was calculated as an average of yearly EU-LFS data from 1997 to 2007, the same time span to which, as we will see, our dependent variable refer. As an indicator of labour-market opportunities, we opted for the activity rate, which captures both supply and demand-side factors, but also the ‘norm’ with which women compare themselves – that is, the extent to which women in the same cohort and life-course phase participate in the labour market. Moreover the overall level of female labour-market involvement is strongly nested into the regime literature, in that it has been used by many scholars as a crucial dimension to consider for gendering typologies (see Sainsbury, 1994).

A second variable captures the level of public investment in long-term care for the elderly and the extent to which households can rely on the State for help. The variable ‘*level of services coverage*’ was calculated by adding the percentage of over-65s receiving home care to the percentage of those in residential homes. The data referred to the middle of the last decade and they were taken from the Multilinks database created at the WZB. In addition to, or as substitutes for services, social policies for elderly care can also include cash allowances or care leaves. Yet we do not include a measure of cash and leaves because, unlike out-of-home care services whose defamilisation role is clearly demonstrated, they have an ambivalent effect on women’s labour-market attachment, wages, and career prospects (Musumeci and Solera, 2013).

A third variable measures the degree of ‘*familistic care culture*’. This variable was obtained by means of a Principal Components Analysis based on the following four items available in a Eurobarometer survey (2007) at the country level: the extent to which the interviewee agreed with the idea that ‘Frail elderly should live with their children or be regularly visited by them as the best option for an elderly parent living alone and in need of regular help’; ‘Children should pay for the care of their parents if their parents’ income is not sufficient’; ‘Care should be provided by close relatives of the dependent person, even if this means that they have to sacrifice their careers to some extent’; ‘The expected and preferred way to obtain assistance if one becomes dependent and needs regular help and long-term care is to be cared for by a relative at home’. The first component extracted explained more than 80% of the total variance. Negative values meant a low level of ‘familistic care culture’, whereas positive values meant the opposite.¹

A cluster analysis was performed on these three macro variables in order to see how countries grouped. The derived clusters were then used as dummies in the multilevel regression models, before being disjointed into the three measured dimensions behind them in order to capture their separate effects on mid-life women’s reduction of labour-market involvement (see next section).

¹ We used the average value on each item obtained in each country, considering the answers of the whole sampled population, in order to grasp the prevailing cultural model in relation to intergenerational obligations.

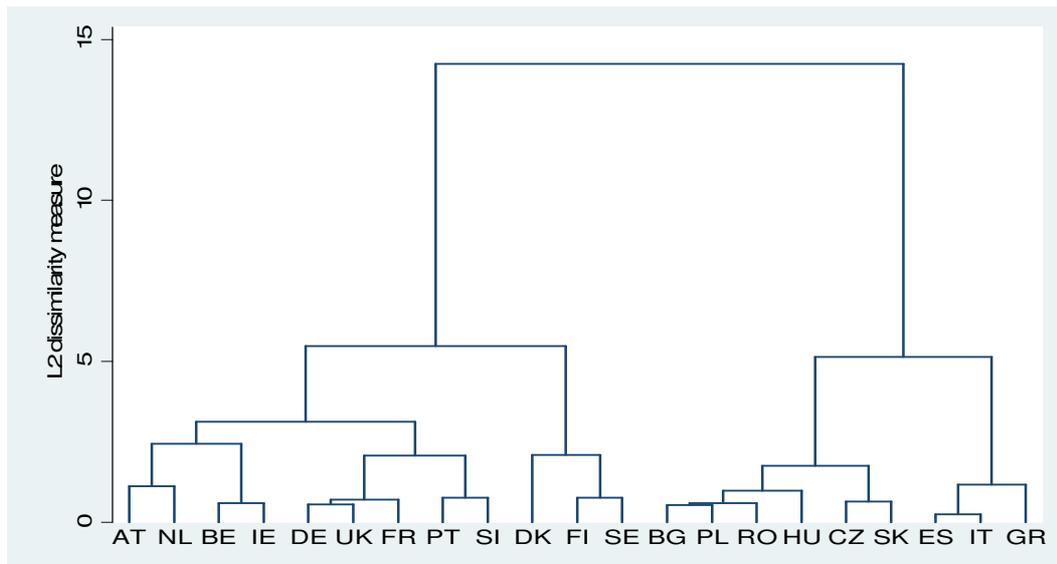


Figure 1. Cluster analysis and care regimes: the results (Dendrogram)

Sources: EU-LFS (average 1997-2007); Multilink database (2012 version); Eurobarometer (2007)

The most important distinction in Europe emerges between two groups: the Continental-Northern countries and the Southern- Central-Eastern ones. However, more detailed examination of this broad macro-grouping makes it possible to differentiate them further, obtaining four groups, as the dendrogram clearly shows. Table 1 reports the values of our three macro variables according to the four clusters identified.²

The first cluster consists of *Scandinavian countries*, the most de-familialised countries where family obligations are reduced and public responsibilities for care are most legitimized, have very high female activity rates (84%) as well as service coverage rates (19.1%), matched by a very low familialistic care culture (only 14.6% of the population agrees that close relatives should be ready to give up their careers in order to care for a dependent person).

The second group of countries consists of *English-speaking and Continental countries* where the state's approach to policy seems to operate mainly according to a sort of 'supported familism' which allocates the family an important role, or, as in the case of the English-speaking countries, where 'de-familisation' is achieved mainly through the market. This group exhibits a relatively large female activity rate (which ranges from 56% to 75% with a cluster average of 67.5%), a relatively high service coverage (13.1%) and medium agreement in terms of familialistic care culture (30.8%). To be noted is that the cluster analysis includes in this group two other countries which usually in welfare state comparative analysis do not belong to it: Portugal and Slovenia. Here attitudes are similar to their Southern and Eastern European 'sisters', but levels of female participation and service coverage are much higher. A similar pattern emerges for the Netherlands, which belongs to this English-speaking and Continental cluster because care attitudes and service coverage are close to the Scandinavian averages, but 40-60 female activity rates are much lower.

Mediterranean (without Portugal) and *Central-Eastern European* (without Slovenia) countries more closely resemble each other in at least two respects: in both areas, public care provision is very low (these countries seem to adopt a 'familism by default' combined with a sort of 're-familisation' as approaches to social policy) and where the general familialistic care culture is very strong (particularly in the latter). The main difference is represented by female activity rates, which in Central-Eastern Europe are rather higher than in Southern Europe.

² In regard to the third variable dealing with care culture, the table, instead of reporting factor loadings which are not of straightforward reading, reports only the share of people, in each country, who agreed with the statement that 'care should be provided by close relatives even if it means they have to sacrifice their careers'.

Table 1. Differences among institutional and cultural contexts by regime and country

Care-work regime	Female Activity rate (40-60 year-old women) ^a	Service Coverage (% of over-65s covered) ^b	% declaring care should be provided by close relatives even if it means they have to sacrifice careers ^c
<i>Scandinavian countries</i>	83.7	19.1	14.6
DK	81.7	27.3	18.1
SE	85.5	16.4	7.2
FI	84.0	13.5	18.5
<i>English-speaking and Continental countries</i>	66.9	13.1	30.8
NL	65.2	19.8	12.2
UK	73.8	15.2	34.3
IE	54.6	9.6	34.2
AT	66.0	20.3	30.7
DE	74.4	11.4	33.6
BE	58.3	12.7	24.9
FR	73.1	12.6	17.8
PT	68.5	11.0	45.3
SI	67.8	5.7	44.6
<i>Mediterranean countries</i>	50.4	4.6	46.7
ES	51.2	6.3	43.7
GR	51.1	1.3	44.4
IT	48.8	6.1	52.1
<i>Central-Eastern European countries</i>	69.7	2.6	56.1
BG	71.5	0.8	60.8
CZ	77.5	6.2	61.5
HU	63.6	3.0	47.4
PL	65.6	3.3	67.5
RO	66.4	0.1	48.0
SK	73.4	2.0	51.4

Sources: ^a EU-LFS (average 1997-2007); ^b Multilink database (2012 version); ^c Eurobarometer (2007)

Reducing labour-market participation when caring for a parent: the micro and macro determinants

Data and variables

Among the numerous surveys conducted by Eurobarometer, in 2007 the Institute produced a questionnaire investigating the issue of health and long-term care. An advantage of this questionnaire is that it included information also on the labour-market attachment of women who become carers of an elderly parent, on the intensity of the care provided, on co-residence or otherwise with the elderly cared for, and, as already shown in the previous section, on care attitudes.

Given the aim of our research, instead of using the entire Eurobarometer database, we considered only a subsample: women, aged 40-60 years old, working or who had worked in the past, having or having had frail elderly parents in the last 10 years. Overall, the sample consisted of 5680 women. As mentioned, the questionnaire also collected information on labour-market behaviour around caregiving. More precisely it asked whether the interviewee had '*given up paid work in order to take care of her/his elderly parents*' and the possible answers were: a) no; b) yes, she/he had to switch from full-time to part-time work; c) yes, she/he had to quit work completely. This variable was used as the main dependent variable and, due to the subsample size, it was transformed into a dummy: a) not given up work; b) given (partially or totally) up work³.

³ To improve causal inference, information on the timing of the two events (starting caregiving and reducing employment) would be necessary. Unfortunately, the only information included in Eurobarometer concerns the occurrence of the events in the last ten years, not their timing and duration.

Table 2 presents the distribution of our dependent variable. In all four regimes, a relatively small number of working women had given up their jobs for care reasons: around 11% of women with caring responsibilities had made this choice; and in around half of the cases this had meant not leaving the labour market but, instead, shifting to part-time work. This finding is in line with those of the previous studies mentioned in section two, which find that mid-life caregiving does not have a major effect on employment.

However, this result differs among care-work regimes. In Scandinavian and English-speaking-Continental countries it is rarer for women to give up work for elderly care reasons (respectively in 5% and 9.5% of the cases) and, when it happens, it more often means a shift to part-time work rather than total withdrawal, especially in Sweden, Finland, Austria and Portugal. In Mediterranean and Eastern countries, the share of women giving up work is somewhat higher (around 13-14%), except in Greece and Poland where the share is only around 6%.

Table 2. Middle-aged working women and the decision to reduce labour-market participation for elderly care by regime and country

<i>Care-work regime</i>	Share among carers who reduce	Share among reducers who move to part-time	Total N° of women	<i>Care-work regime</i>	Share among carers who reduce	Share among reducers who move to part-time	Total N° of women
<i>Scandinavian countries</i>	5.0	70.2	935	<i>Mediterranean countries</i>	12.4	47.6	844
DK	2.8	44.4	316	ES	17.3	41.6	277
SE	6.4	85.0	312	GR	7.3	45.8	329
FI	5.8	66.6	307	IT	13.8	75.5	238
<i>English-speaking and Continental countries</i>	9.5	55.9	2398	<i>Central-Eastern European countries</i>	16.0	54.7	1503
NL	3.8	63.6	284	BG	12.6	55.1	230
UK	11.2	33.3	319	CZ	15.1	53.5	284
IE	18.5	55.5	194	HU	17.9	58.2	240
AT	16.8	79.4	202	PL	5.1	50.0	273
DE	9.2	43.7	349	RO	17.1	54.8	181
BE	4.7	57.1	294	SK	27.4	54.3	295
FR	6.7	45.0	297				
PT	14.9	64.2	187				
SI	6.6	72.2	272				

Notes: * Women aged 40 to 60, having had a frail elderly parent in last 10 years, who are working or have worked
Source: own elaboration on Eurobarometer microdata (2007)

In order to explore factors influencing women's labour market behaviour in regard to caring responsibilities for a frail elderly parent, three types of independent variables were considered: 'macro' variables (already described in previous section); socio-occupational and family-related individual variables, used as controls; and variables related to the care relationship and the individual care culture.

More precisely, the first set of individual independent variables included: *age*; *education*; *occupational class*; the presence of a *partner* (both *de facto* or legally married) and of at least one *child under 16*. Then, more specific micro-level variables were added to capture the type of care provided: a dummy variable asking if the *carer lived together with the parent cared for*⁴ and, then, another variable measuring the *intensity of informal care provided by the interviewed carer*⁵. A last individual variable was cultural, and it was intended to capture individual attitudes to intergenerational care obligations. The variable was called '*individual familialistic care culture*', and it was obtained through a Principal Components

⁴ We considered as co-resident those carers who lived in the same flat or, as stated in the Eurobarometer questionnaire, 'in a house next door'.

⁵ The variable assumed values from 0 to 11, counting the number of care activities (e.g. from doing the shopping to cooking, etc.) declared by the informal carer, as contained in the Eurobarometer questionnaire. The more activities in which the carer was involved, the more intense the care provided.

Analysis based on the same four items as used for ‘*general familialistic care culture*’, the cultural variable at country level described earlier.

Inspection of Table 3 shows marked differences among the care-work regimes on all the main indicators used to operationalize the care relationship and the individual care culture. The Scandinavian countries (and the Netherlands) are the countries with the lowest levels of intensity of care, co-residence and individual familialistic care culture. At the opposite extreme we find Mediterranean and Central-Eastern European countries, where intensity of care activities (especially in Eastern Europe) and co-residence are at the highest levels and the individual care culture is strongly familialistic (again especially in Eastern Europe). English-speaking and Continental countries record intermediate levels.

Table 3. The individual independent variables related to the care relationship and the care culture by regime and country

Care-work regime	Intensity of care (average N° care activities from 0 to 11)	Co-residence (% of carers living with their frail parent)	Individual Familialistic Care Culture (% of carers)*
<i>Scandinavian countries</i>	3.5	25.7	14.8
DK	3.4	20.2	18.9
SE	3.2	21.6	6.7
FI	3.9	35.2	19.1
<i>English-speaking and Continental countries</i>	4.5	48.5	29.8
NL	3.8	26.5	14.5
UK	4.7	37.2	33.5
IE	4.1	44.9	28.3
AT	4.3	51.2	33.2
DE	5.4	63.1	36.5
BE	4.2	43.2	22.6
FR	4.0	40.1	17.4
PT	4.4	70.9	43.2
SI	5.2	66.7	44.2
<i>Mediterranean countries</i>	4.6	65.8	40.6
ES	5.2	62.8	42.5
GR	4.6	64.4	35.3
IT	4.1	71.3	46.1
<i>Central-Eastern European countries</i>	5.1	63.2	55.5
BG	5.3	65.5	56.3
CZ	4.6	61.1	63.2
HU	5.3	64.1	49.3
PL	5.2	60.9	65.1
RO	5.2	65.1	43.2
SK	5.1	63.8	52.3

Notes: * Women 40-60 declaring that care should be provided by close relatives even if it means they have to sacrifice careers to some extent

Source: own elaboration on Eurobarometer microdata (2007)

Table 4. Correlations among the main individual and macro variables

	Individual care culture (pca)	Co-residence	Level of service coverage	Female activity rate (40-60)	Country's familialistic care culture (pca)
Intensity of care	0.11	0.30	-0.15	-0.07	0.17
Individual care culture (pca)		0.22	-0.43	-0.21	0.49
Co-residence			-0.25	-0.17	0.29
Level of services' coverage				0.47	-0.89
Female activity rate					-0.49

Source: own elaboration on Eurobarometer microdata (2007)

Table 4 shows that the correlations among the 6 main independent variables are not particularly strong, with two important exceptions mainly concerning the three macro variables: the country's familialistic care culture is strongly and negatively correlated with the level of service provision (-0.89) and quite strongly correlated with the level of female labour-market participation (-0.49). This is not unexpected. As pointed out by the studies belonging to the second theoretical stream on which we draw, culture and institutions are

strongly interdependent. Behind the presence or absence of certain policies, there are normative models of family forms, gender and intergenerational obligations which guide the design of such policies while at the same time reinforcing or weakening them.

Regressions' results

What individual and family conditions seem to prevent or encourage middle-aged women to reduce labour-market participation when they have to assume care responsibilities for a frail elderly parent? What is the role of the context in which women and families make their choices? In order to capture these micro and macro determinants, we estimate a series of two-level logistic regressions. More precisely, our analysis included 4631 women (level 1) grouped into 21 countries (level 2), and it modelled the probability that a woman aged 40-60 with working experience and a frail parent reduces or not her labour-market participation (switching to part-time or completely withdrawing). The log odds of binary choices were posited as a function of the 8 outlined individual and family characteristics (level 1) and the 3 characteristics at the country level (level 2). Random intercept models were used in order to show that, after controlling for relevant micro level variables, the macro context continues to influence women's labour-market behaviours.

Following Van der Lippe et al. (2011), different sets of models were estimated. First, we estimated a 'basic' multilevel model including only individual-level characteristics to explain variation (model 1). Second, a model is tested with only the regime variable (model 2) and with regime dummies and individual variables together (model 3). Finally, three models were tested with, instead of the regime variable, the three macro level indicators discussed earlier. Because of their strong correlations, as evident in Table 4, each macro indicators was introduced separately: the activity rate of women aged 40-60 (model 4), general familialistic care culture (model 5), level of service coverage (model 6).

The type of care-work regime in which women live and work appears to influence their labour-market decisions around elderly care responsibilities. Before controlling for individual characteristics (model 2), a ranking of four groups emerges: as already evident in the descriptives, the countries with the lowest likelihood of reducing labour-market participation are the Scandinavian ones, followed by the Continental and English-speaking ones. Mediterranean and East European countries have the highest likelihood, especially the Eastern ones. After controlling for the composition effects of relevant micro variables (model 3), the Continental and English-speaking regime seems not to differ from the Scandinavian one. Likewise for the Mediterranean and East European regimes, which no longer differ. However, if running models without, among the individual variables, co-residence and intensity of care, the distinction between all four regimes re-emerges. This suggests that co-residence and intensity are endogenous: they are micro strategies strongly linked to the institutional and cultural setting of the country in which women and their families make their choices. At the individual level, few factors differentiate middle-aged women's labour-market behaviours. As found in previous studies, class, attitude to intergenerational obligations, having a partner, and intensity of care matter. Instead, age, education, presence of children and co-residence with the frail elder seem not to matter.

When unfolding the macro context into labour market, policies, and cultural influences, only two indicators have a significant influence. More precisely, and as expected, the more the country shows a familialistic culture, with a high share of people in the population agreeing with statements such as that 'care should be provided by close relatives of the dependent person, even if that means that they have to sacrifice their career to some extent', the more mid-life women tend to reduce labour-market participation around caregiving. Moreover, the more the state provides support for elderly care, through home care or residential homes, the less women disinvest from the labour market. The overall level of female labour-market participation seems instead not to be influential⁶. If co-residence and intensity of care are cut from models, the effects of these macro variables are confirmed and become even clearer since efficiency increases.

⁶ Instead of female overall activity rates, if one introduces female unemployment rates the results do not change: the effect is not significant.

Table 5. Estimated coefficients of two-level Logistic Regression for (partially) giving up work for caring responsibilities for a frail parent (Random intercept models)

	M1 Only individual variables	M2 Only dummy regimes	M3 Individual variables + dummy regimes	M4 Individual variables + Female activity rate	M5 Individual variables + Country care culture	M6 Individual variables + Service coverage
<i>Level 1 (Women)</i>						
Age over 50 (ref. 40-49 y.o.)	-0.004		-0.004	-0.004	-0.004	-0.004
Education (ref. up to lower)						
Upper-secondary	0.01		0.01	0.01	0.01	0.01
Tertiary	-0.09		-0.09	-0.09	-0.09	-0.09
Class (ref. bourgeoisie)						
Middle class	0.22*		0.22*	0.22*	0.22*	0.22*
Petty Bourgeoisie	0.28*		0.28*	0.28*	0.28*	0.28*
Working Class	0.11		0.11	0.11	0.11	0.11
Partner	-0.14*		-0.14*	-0.14*	-0.14*	-0.14*
Children under 16 y.o.	-0.04		-0.04	-0.04	-0.04	-0.04
Individ. Care Culture (pca)	0.16***		0.16***	0.16***	0.16***	0.16***
Co-residence with frail eld.	0.13		0.13	0.13	0.13	0.13
Intensity of care (1-11)	0.19***		0.19***	0.19***	0.19***	0.19***
<i>Level 2 (Country)</i>						
Care-work regimes (ref. Scan.)						
English-speaking + Continental		0.76**	0.41			
Mediterranean		1.16***	0.72*			
Central-Eastern Europe		1.31***	0.70*			
Macro indicators						
Female activity rate (40-60)				-0.01		
Care culture (pca)					0.19*	
LTC services' coverage						-0.03*
Constant	-3.01***	-3.01***	-3.49***	-2.15**	-2.99***	-2.73***
Random-effects parameters						
Variance between countries	0.28	0.22	0.23	0.27	0.25	0.25
(se)	(0.10)	(0.09)	(0.09)	(0.10)	(0.09)	(0.09)
Log-likelihood	-1479.8	-1573.9	-1478.0	-1479.2	-1478.5	-1478.6
N. of women	4631	4631	4631	4631	4631	4631
N. of countries	21	21	21	21	21	21

Notes: only women aged between 40 and 60 with working experiences and a frail parent

*** p<0.01; ** p<0.05; * p<0.10

Source: own elaboration on Eurobarometer microdata (2007)

Conclusion

Contrary to research on combining family and work for childcare, which has largely shown the strong impact of care responsibilities on women's labour-market participation and work careers, by drawing on Eurobarometer data this article confirms the results of previous research: only around 11% of women caring for a frail parent change their labour-market participation, and in most cases they do so by shifting to part-time work more than completely withdrawing – as instead frequently happens for mothers. Yet, profiting from the availability in the Eurobarometer 2007 data of information not only on behaviours but also on attitudes and for a large number of countries, we have also been able to identify differences across countries and the role of state policies and of cultural norms on elderly care in accounting for such differences.

Our analysis shows that living in a 'care-work regime', different in terms of care policies (elderly care services coverage), care and family cultures (attitudes to intergenerational obligations) and the level of women's involvement in the labour market (female activity rates), affects mid-life women's employment participation. The Scandinavian countries, the most de-familialised ones (with a higher elderly care service coverage, a lower familialistic care culture, and better labour-market opportunities) are the countries least affected by the phenomenon of (partially) giving up work for caring; and in most cases when working arrangements change, it is because there is a shift to part-time work. Conversely, in a 'work-care regime'

where the state's dominant policy approach combines 'familialism by default' with a 'supported familialism', and where intergenerational family care obligations are higher, as in Southern and Eastern European countries, mid-life women with family responsibilities encounter more difficulties in remaining fully in the labour market. When unfolding the macro context into labour market, policies, and cultural influences, the level of female activity does not seem to play a role, whereas the level of service coverage and the general care cultures do so.

As well argued by the feminist literature, the extent to which policies enable women with family responsibilities to remain in the labour market – that is, the way in which they allow women to be both 'commodified' and 'de-familialised' – makes a difference not only in the first phase of women's life courses, when they have children, but also at a later stage of life. A 'work-care regime' analysis also shows that the type of de-familization pursued by the state is strongly intertwined with family and care culture, as also evidenced by the simple correlations of their measures at the empirical level. Yet, feminist and 'regime' literature also underlines that the institutional dimension consists of more than the state's social policies and more than service coverage: it includes a complex mix of areas (such as labour-market policies and regulations) and types of policy (such cash and leaves), whose single effects on individuals' and families' choices over the life course depend on the effect of, and interaction with, the others. In other words, it is a matter of 'packages' more than single measures. Hence, more complete cross-country data collection and better measures of the overall institutional package and of its interplay with the cultural should be developed before reaching conclusions on the role of the context. Future research should focus on this matter.

References

- Anttonen A and Sipilä J (1996) European social care services: Is it possible to identify models. *Journal of European Social Policy* 6 (2): 87-100.
- Anttonen A, Baldock J and Sipilä J (2003) *The Young, the Old and the State. Social Care Systems in Five Industrial Nations*. Cheltenham: Edward Elgar.
- Bettio F and Plantenga J (2004) Comparing care regimes in Europe. *Feminist Economics* 10 (1): 85-113.
- Carmichael F and Charles S (1998) The labour market costs of community care. *Journal of Health Economics* 17 (6): 747-765.
- Corti L, Laurie H and Dex S. (1994) *Caring and Employment*. Colchester: University of Essex.
- Crespo L (2007) *Caring for Parents and Employment Status of European Mid-Life Women*. Spain: Centro de Estudios Monetarios y Financieros (CEMFI).
- Daly M and Lewis J. (1998) Introduction: Conceptualising social care in the context of Welfare State restructuring. In: Lewis J (ed) *Gender, Social Care and Welfare State Restructuring in Europe*. Aldershot: Ashgate, 86-103.
- Da Roit B and Bihan B (2010) Similar and yet so different: cash-for care in six european countries' long-term care policies. *Milbank Quarterly* 88 (3): 286-309.
- Da Roit B and Naldini M (2010) Should I stay or should I go? Combining work and care for an older parent in Italy. *South European Society & Politics* 15 (4): 531-551.
- Esping- Andersen G (1990) *The Three Worlds of Welfare Capitalism*. New York: Polity Press.
- Esping-Andersen G (1999) *Social Foundations of Postindustrial Economies*, Oxford: Oxford University Press.
- Ettner S L (1996) The opportunity costs of elder care. *Journal of Human Resources* 31 (1): 189-205.
- Finch J and Mason J (1993) *Negotiating Family Responsibilities*. London: Routledge.
- Finley N J (1989) Theories of family labor as applied to gender differences in caregiving for elderly parents. *Journal of Marriage and the Family* 51 (1): 79-86.
- Gauten H and Hagen K (2010) How do middle-aged employees combine work with caring for elderly parents. *Community, Work and Family* 13 (4): 393-409
- Gash V (2008) Preference or constraint? Part-time workers' transitions in Denmark, France and the United Kingdom. *Work, Employment and Society* 22(4): 655-674
- Gornick J and Meyer M K (2009) Institutions that support gender equality in parenthood and employment. In: Gornick J and Meyer M K (eds) *Gender Equality. Transforming Family Divisions of Labor. The Real Utopias Project*. London/New York: Verso, 3-64.
- Gornick J, Meyers M K and Ross E K (1997) Supporting the employment of mothers: Policy variation across fourteen Welfare States. *Journal of European Social Policy* 7 (1): 45-70.
- Haber Kern K and Szydlik M (2010) State care provision, social opinion and children's care of older parents in 11 European countries. *Ageing and Society* 30 (2): 299-323.
- Hakim C (2000) *Work-Lifestyle Choices in the 21st Century: Preference Theory*. Oxford: Oxford University Press.
- Heitmueller A and Michaud P C (2006) *Informal Care and Employment in England: Evidence from the British Household Panel Survey* IZA Discussion Paper 2010. Bonn: IZA.
- Hessel P and Keck W (2009) *How Caring for an Adult Person Affects Employment?*. Equalsoc State of the Art Report.
- Horemans J (2012) Balancing work and welfare: between resources and demands. *Work, Employment and Society* 26(5): 869-874.
- Jacobs J A and Gerson K (2004) *The Time Divide. Work, Family, and Gender Inequality*. Cambridge, Massachusetts: Harvard University Press.
- Jaumotte F (2003) *Female Labour Force Participation: Past Trends and Main Determinants in OECD countries*. OECD Economics Department Working Papers 376.
- Jo N K (2011) Between the cultural foundations of welfare and welfare attitudes: The possibility of an in-between level conception of culture for the cultural analysis of welfare. *Journal of European Social Policy* 21 (1): 5-19.
- Johnson R W and Lo Sasso A T (2000) *The Trade-off between Hours of Paid Employment and Time Assistance to Elderly Parents at Midlife*. Washington: Urban Institute.
- Keck W and Saraceno C (2010) Caring for a parent while working for pay in German regime. *International Journal of Ageing and Later Life* 5 (1): 107-118.
- Knijn T, Martin C and Le Bihan B (2013), Worker under pressure and social care arrangements: A research framework. In: Le Bihan B, Martin C and Knijn T (eds) *Work and Care under Pressure. Care Arrangements across Europe*. Amsterdam: Amsterdam University Press, 7-31.
- Lechner V M and Neal M B (eds) (1999) *Working and Caring for the Elderly. International Perspective*. Philadelphia, PA: Taylor and Francis
- Leitner S (2003) Varieties of familialism. The caring function of the family in comparative perspective. *European Societies* 6 (5): 353-75.
- Leitner S and Lessenich S (2007) (In)dependence as dependent variable: Conceptualizing and measuring 'defamilization'. In: Clasen j and Siegel N S (eds) *Investigating Welfare State Change*. Cheltenham: Edward Elgar, 244-60.
- Lewis J (2006) Employment and care. The policy problem, gender equality and the issue of choice. *Journal of Comparative Policy Analysis* 8 (2): 103-114.
- McLaughlin E and Glendinning C (1994) Paying for care in Europe: Is there a feminist approach?. In: Hantrais L and Mangen S (eds) *Concepts and Contexts in International Comparisons: Family Policy and the Welfare State of Women*. Crossnational Research Papers 3 (3), Loughborough: Centre for European Studies, University of Loughborough.
- Millar J and Warman A (1996) *Family Obligations in Europe*. London: Family Policy Studies Centre.
- Misra J, Budig M J and Moller S (2007) Reconciliation policies and the effects of motherhood on employment, earnings and poverty. *Journal of Comparative Policy Analysis: Research and Practice* 9 (2): 135-155.

- Moen P, Robison J and Fields V. (1994) Women's work and caregiving roles: A life-course approach. *Journal of Gerontology: Social Sciences* 49 (4):176–186.
- Musumeci R and Solera C (2013) Women's and men's career interruptions in Europe: the role of social policies. *Observatoire de la société britannique* 14: 37-72.
- Naldini M, Wall K and Le Bihan B (2013) The changing mix of care in six European countries. In: Le Bihan B, Martin C and Knijn T (eds) *Work and Care under Pressure. Care Arrangements across Europe*. Amsterdam: Amsterdam University Press, 171-193.
- O'Reilly J (2006) Framing comparisons: gendering perspectives on cross-national comparative research on work and welfare. *Work, Employment and Society* 20(4): 731–750
- OECD (2005a) *Babies and Bosses, Reconciling Work and Family Life*. Paris: OECD.
- OECD (2005b) *Long-Term Care for Older People*. Paris: OECD.
- Pavalko E K and Artis J E (1997) Women's caregiving and paid work: causal relationships in late midlife. *Journal of Gerontology: Social Sciences* 52 (4): 170–179.
- Pfau-Effinger B (2005) Welfare state policies and the development of care arrangements. *European Societies* 7 (3): 321-341.
- Pfau-Effinger B (2010) Cultural and Institutional Contexts. In: Treas J and Drobnic S (eds) *Dividing the Domestic. Men, Women, & Household Work in Cross-National Perspective*. Stanford: Stanford University Press, 125-146.
- Sainsbury D (ed) (1994) *Gendering Welfare States*. London: Sage Publications.
- Saraceno C. (2010) Social inequalities in facing old-age dependency: a bi-generational perspective. *Journal of European Social Policy* 20 (1): 32-44.
- Saraceno C and Keck W (2010) Can we identify intergenerational policy regimes. *European Societies* 12 (5): 675-696.
- Sarasa S (2008) Do welfare benefits affect women's choices of adult caregiving. *European Sociological Review* 24 (1): 37-51.
- Sarasa S and Billingsley S (2008) Personal and household caregiving from adult children to parents and social stratification. In: Saraceno C (ed) *Families, Ageing and Social Policy. Intergenerational Solidarity in European Welfare States*. Cheltenham: Edward Elgar, 123-146.
- Spieß C K and Schneider U (2003) Interactions between care-giving and paid work hours among European midlife women, 1994 to 1996. *Ageing and Society* 23 (1): 41–68.
- Solera C (2009) *Women In and Out of Paid Work: Changes Across Generations in Italy and Britain*. Bristol: The Policy Press.
- Stier H and Lewin-Epstein N (2001) Welfare regimes, family-supportive policies, and women's employment along the life-course. *American Journal of Sociology* 106(6):1731-60.
- Szinovacz M and Davey A. (eds) (2008) *Caregiving Contexts, Cultural, Familial and Societal Implications*. New York: Springer.
- Ungerson C and Yeandle S (2007) Conclusion: dilemmas, contradiction and changes. In: Ungerson C and Yeandle S (eds) *Cash for Care in Developed Welfare State*. Palgrave Macmillan: 187-206.
- Väitänen T K (2005) *Informal Elderly Care and Female Labour Force Participation across Europe*. European Network of Economic Policy Research Institutes (ENEPRI), Research Report n. 13.
- Van der Lippe T, de Ruijter J, de Ruijter E and Raub W (2011) Persistent inequalities in time use between men and women: A detailed look at the influence of economic circumstances, policies, and culture. *European Sociological Review* 27 (2): 164-179.
- Vlasbom J and Shippers J (2006) Changing dynamics in female employment around childbirth: evidence from Germany, the Netherlands and the UK. *Work, Employment and Society* 20(2): 329–347.
- Williams F (2012) Converging variations in migrant care work in Europe. *Journal of European Social Policy* 22(4): 363-373.
- Wolf D A and Soldo B J (1994) Married women's allocation of time to employment and care of elderly parents. *Journal of Human Resources* 29 (4): 1259–1276.