Generations of care: demographic change and public policy in Australia
Deborah Brennan

Introduction

Demographic changes, particularly declining fertility and the ageing of the population, present significant social and political challenges for Australia even though, in comparison with many European countries, the changes forecast for Australia are not dramatic. There is widespread agreement among Australian policy makers that a higher proportion of the population will need to be engaged in paid work in order to sustain the growing proportion of elderly people that is forecast from mid-century. To date, most attention has focused on measures to retain the skills of older workers and to compel various categories of welfare recipients to engage in paid work. Far less attention has been given to increasing the labour force participation of women who are in neither of these categories, for example those who have only limited attachment to the workforce. This is curious, since Australian women, especially mothers, have relatively low levels of labour force participation compared with their counterparts in comparable countries, and a very high incidence of part-time work. The highly gendered distribution of unpaid work, especially caring responsibilities, is widely acknowledged to be a major reason for women’s low levels of labour force participation: women do a disproportionate share of the work of caring for children, the elderly and people with disabilities. This chapter examines the adequacy of some of the key public policies and workplace arrangements that support the balancing of paid work and caring responsibilities. It argues that Australia needs greater levels of government support and more commitment from employers in order to enhance the ability of those with caring responsibilities to engage in paid work and thus meet the challenge of structural ageing.

The first part of the chapter examines the background to the demographic debate in Australia and considers why the relationship between paid work and unpaid care is so important for Australia’s future. It introduces the notion of the ‘sandwich generation’ and shows why policies that support gender equity and work/family balance are important in meeting the demographic challenge. The second part looks at the distribution of paid and unpaid work in Australia and the ‘care penalty’ faced by many Australian women. The third section offers an analysis of three key work/family policy areas – maternity leave, child care and elder care. The final section summarises the arguments and offers some reflections and conclusions.

Demographic change, work and care

According to the Intergenerational Report – the Australian Treasury’s first detailed assessment of the consequences of population ageing – the proportion of the Australian population aged 65 or more will double to about 25 per cent by 2040 (Australian Treasury, 2002; Henry, 2003) with consequent effects on the aged ‘dependency ratio’ (the proportion of the population aged 65 and over to those aged 15–64). Of particular concern is the growth in the numbers of those deemed to be ‘very old’, that is aged 85 or more. By 2050, the number of Australians in this age group will increase from around 300,000 to 1.4 million or six per cent of the population (Productivity Commission, 2005: 8). Significant health care and pension costs

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1 While a great deal of attention has focused on the ‘costs’ of an ageing society, any balanced view must take into account the fact that older people contribute in numerous ways to their families and communities. On one estimate, men and women aged over 65 contributed more than $39 billion in unpaid work for their families and communities in 1997 (de Vaus et al, 2003).
will be associated with this increase in longevity and this has raised concerns about how to increase labour force participation. The Treasury, noting that Australia’s labour force participation rate is ranked twelfth amongst the countries of the OECD, has argued that there is ‘significant potential to improve participation both in the short and medium term’ (Australian Treasury, 2004: 1). One notable aspect of the debate about demography and public policy in Australia has been the reluctance of key policy makers to acknowledge the connection between the distribution of caring responsibilities (both within households and between families and the state) and participation in the labour market. Although the need to increase labour force participation is a constant theme in debates about Australia’s social and economic future, there has been limited focus on the measures necessary to make workforce participation sustainable for those with caring responsibilities. Likewise, there has been little recognition, at least in official discourse, of the heavily gendered nature of these effects.

Research conducted for the Business Council of Australia (BCA) has reinforced the Australian Treasury’s argument about labour force participation. In a report commissioned by the BCA, Australia’s Population Future, Glenn Withers has shown that the labour force currently grows by 180,000 per year; in the decade from 2020 it is projected to grow at a mere 14,000 per year (Withers, 2004: 4). Withers compares the labour force participation rates of men and women in Australia, Canada, USA and the UK, identifying ‘best practice’ (i.e. the highest level of workforce participation) for each age group. He then calculates the number of people who would be added to the Australian labour force if Australia were to achieve ‘best practice’. The results are shown in Table 6.1 (below) which identifies over 628,000 ‘missing workers’ (Withers’ term), more than three-quarters of whom are women. Remarkably, however, there is little discussion in Australia’s Population Future of the reasons for Australian women’s relatively low labour force participation or the measures that would need to be taken by governments and businesses in order to support higher levels of labour force participation by women.

### Table 6.1. Labour force participation change to best practice: Australia

<table>
<thead>
<tr>
<th></th>
<th>Australian LFPR</th>
<th>Best practice LFPR</th>
<th>Implied added workers</th>
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<tbody>
<tr>
<td></td>
<td>Men 25+ (%)</td>
<td>Women 25+ (%)</td>
<td>Men 25+ (%)</td>
</tr>
<tr>
<td>25-29</td>
<td>90.1 74.3</td>
<td>92.3 80.5</td>
<td>15,806 44,224</td>
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<td>30-34</td>
<td>92.1 67.4</td>
<td>93.8 79.3</td>
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<td>91.1 74.2</td>
<td>92.3 81.6</td>
<td>8574 54,724</td>
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<td>86.6 74.1</td>
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<td>77.2 61.7</td>
<td>33,522 60,834</td>
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<td>46.6 21.4</td>
<td>56.6 42.5</td>
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</table>


The absence of work/family reconciliation measures is not the only barrier to workforce participation. Other factors such as low levels of education, ill health, employer discrimination and lack of flexibility in employment all play a role. But the lack of support for workers with caring responsibilities is critical. Large numbers of Australians have some level of responsibility for another adult (usually a parent or spouse) or a child; increasing numbers have responsibility for both (Jackson, 2001: 33). The Human Rights and Equal Opportunity Commission (HREOC, 2005) notes that the phenomenon of being ‘sandwiched’ between the generations results from three changes that have occurred in recent decades: first, babies are being born later in
women’s lives – the median age of married mothers giving birth for the first time has been rising since 1972 and reached a record high of 30.4 in 2004 (ABS, 2004a). Second, people are living longer and remaining in their own homes as long as possible, rather than moving into residential care (see below); and third, young adult children are living at home for longer (de Vaus, 2004: 144-145; see also Miller, 1981; Nichols & Junk, 1997; Roots, 1998; Ingersoll-Dayton et al, 2001; Raphael & Schlesinger, 2004).

The impact of caring for elderly, ill, or disabled parents, spouses and children has been under-researched in comparison to the need for child care – although studies by Watson and Mears (1989, 1999) on ‘women in the middle’ provide notable exceptions. Recent important work has begun to redress this imbalance. The Survey of Disability, Ageing and Carers published by the Australian Bureau of Statistics (ABS, 2003), for example, showed that 2.6 million Australians provide some assistance to the elderly and people with disabilities. Women comprise just over half of all carers, but represent 71 per cent of primary carers (the ABS defines a primary carer is defined as the one who provides the most informal assistance, in terms of help or supervision, to a person with one or more disabilities which impair core activities of communication, mobility and self-care). Looking at the same phenomenon from a different perspective, the Australian Longitudinal Study on Women’s Health data show that 40 per cent of mid-age women provide care for someone who is elderly, frail or ill, and over 40 per cent also provide care, at least occasionally, for children (Warner-Smith et al, 2005).

Paid employment and caring responsibilities

Policies that shape decision-making about the balance between paid work and family care are the subject of intense debate and policy innovation in many countries. In the last three decades, new patterns of family formation and dissolution have arisen, demographic patterns have changed, and new trends in labour market participation have emerged. Across Europe, governments have responded to these challenges by expanding the options available to parents and other carers (Lister, 2002; Ellingsaeter & Leira, 2006; Daly, 2004). Expenditure on child care has grown, parental leave (including special provisions for fathers’ leave) has been extended and a variety of measures relating to working time (including the right to move from full-time to part-time work and the ability to choose flexible scheduling) have become part of the policy repertoire in OECD countries. There is also evidence of innovation and policy development in a number of Asian countries (Sung, 2002; Peng, 2002). How are work and care distributed in Australia and how have governments and employers responded to the growing number of carers at work? This section looks first at men’s and women’s patterns of paid work and unpaid care and then examines three key family benefits: maternity leave, child care and elder care.

Many carers in Australia have paid work in addition to unpaid caring responsibilities, but they are frequently limited to part-time or casual jobs. An Australian survey conducted in 1998 showed that one in four employed primary carers often needed time off work and a small but significant proportion – just under seven per cent – had been obliged to leave work completely within the last three months because of their care responsibilities (ABS, 1998). Another large group had withdrawn from the labour force completely because they were unable to manage both paid work and unpaid care responsibilities (ABS, 1998). The latter scenario is particularly likely to be true of female primary carers. Close to one quarter of all primary carers stated that they had left work prior to taking on a full-time caring role, while 30.7 per cent said they did not have paid work before taking on the caring role (ABS, 1998). Current arrangements did not necessarily reflect the ‘choices’ of these carers. Of those primary carers not currently employed, about 40 per cent expressed a desire to be employed but were faced with substantial barriers such as difficulty in arranging
care, lack of alternative care options and loss of skills from being outside the workforce (ABS, 1998; see also Cass, 2002, 2005).

The postwar years, especially the last three decades, have seen a revolution in women’s lives with more and more mothers contributing financially to their families through paid work (Bittman, 2004; Craig, 2005). But there has not been a corresponding revolution in men’s lives (Pocock, 2003). Very few men share household chores equitably with their partners, even when both work full-time. The attitudes and practices of most employers have failed to adapt to changes in women’s labour force participation and in the aspirations of many men and women about what constitutes a good parent in today’s society. The inflexibility of many workplaces results in women being relegated to part-time and casual employment that is well below their skills and capacities. The assumption that the ‘ideal worker’ puts in long hours and is available to work weekends and evenings, creates problems both for men and women. Research consistently shows that men would like more involvement with their children (Bowman & Russell, 2000), and women would like decent jobs and pay and do not wish to be relegated to poor quality casual employment (Pocock, 2003).

The proportion of Australian women who are employed increased from 40 per cent in 1979 to 53 per cent in 2004; in the same period, men’s employment declined from 74 per cent to 68 per cent. Women now represent 45 per cent of the labour force (ABS, 2006b). Looking simply at these aggregate data it appears that men’s and women’s rates of labour force participation are coming closer together. Once we dig below the surface, however, major differences appear. Participation in paid work falls significantly for women around childbearing age and rises later in life. Many mothers work part-time, especially when their children are young. In 2003, 36 per cent were employed part-time, 25 per cent were employed full-time and just under 40 per cent were outside the labour force (HREOC, 2005: 15; Austen & Giles, 2003). Lone mothers are a little less likely than married mothers to be employed when they have young children, however, changes to the welfare system from the middle of 2006 will compel many sole parents into part-time work. Most Australian fathers work full-time, often for very long hours. Around 33 per cent of fathers work 35-40 hours (‘standard’ hours), 22 per cent work 41-48 hours, 24 per cent work 49-59 hours and 22 per cent usually work 60 hours or more (Weston et al, 2004: 9). Family friendly benefits such as flexible start and finish times, work-based child care and maternity and parental leave are concentrated in the public sector and amongst better paid, ‘high value’ employees (Gray & Tudball, 2002).

The presence of children barely makes a dent in men’s labour force participation. Most fathers are employed full-time. For mothers, however, the situation is entirely different. More than 60 per cent of mothers of dependent children were employed in 2003, a significant rise from the 46 per cent employed in 1985 (Campbell & Charlesworth, 2004: 77). Compared with women in comparable countries, however, Australian women have a relatively low level of workforce participation. In 2000, only 43 per cent of Australian women with two or more children were in the workforce, compared with 82 per cent in Sweden, 65 per cent in the United States and 62 per cent in the United Kingdom (Campbell & Charlesworth, 2004: A2-12). The presence of children has a profound impact on women’s engagement with the labour market. Participation dips for women around the time of childbirth and childrearing and rises as children grow older. The employment rate for mothers is around 46 per cent when their youngest child is less than five years; it rises to 66 per cent when the youngest child is aged 5–9 years and to 70 per cent when the youngest is 10–14 years (FaCS & AIFS, 2005: 11).

Support for the caring roles of workers

Given the level of official concern about Australia’s low level of labour force participation, we might expect that public policies and workplace practices to support working carers would be
widespread. In fact, there are significant gaps and anomalies in Australia’s approach to the support of workers with caring responsibilities (Pocock, 2003). In this section of the paper, I review three areas of policy that are central to helping workforce participants manage the responsibilities of care – maternity leave, child care and services for the elderly.

**Maternity leave**

For any government wanting to increase the participation of women in the labour force, paid maternity leave is a logical place to start. There is a clear association between paid maternity leave and women’s long-term participation in the labour force (Kamerman, 2000). Unpaid leave does not have the same effect and indeed long periods of unpaid leave can work in the opposite direction – strengthening the idea of the male breadwinner and reinforcing women’s dependence. Australia and the USA are the only two OECD countries that do not provide paid maternity leave as a normal workforce provision (HREOC, 2002a: s. 4.1; Baird et al, 2003). Almost all of Australia’s major trading partners, including China, Korea, Malaysia, Indonesia, Hong Kong, India, Singapore and Thailand also provide such leave (HREOC, 2002a: ss. 4.3-4.4). In 2002, following a comprehensive public consultation, HREOC proposed a system of government-funded maternity leave that would have provided all new mothers (including the self-employed) with twelve weeks pay at minimum wages (HREOC, 2002b). The government rejected this proposal, opting instead for a ‘maternity payment’ which is unrelated to workforce participation and is worth less than twelve weeks minimum wages.

Despite the absence of a national scheme, approximately 40 per cent of Australian employees are entitled to a period of paid maternity leave through an award, agreement or other workplace provision (Pocock, cited in O’Neill, 2004). There are vast differences in access to this benefit across industries and occupations, as well as significant differences in duration and remuneration. Some 77 per cent of women in the finance and insurance industries have access to paid maternity leave, while only one per cent are covered in the retail sector, and two per cent in hotels and restaurants (O’Neill, 2004). Those most likely to receive the benefit are employed in large, unionised workplaces and/or are considered ‘high value’ individuals.

A survey on paid maternity leave conducted by the Equal Opportunity for Women in the Workplace Agency (EOWWA) casts further light on the nature and distribution of this benefit. The survey looked at the nature and extent of maternity leave in organisations that report to it under the *Equal Opportunity for Women in the Workplace Act 1999* (Cwlth). The legislation covers higher education institutions and private sector organisations that employ 100 or more employees. Over one million women workers – around a quarter of the female workforce – work for such organisations. Given the nature of the organisations surveyed, and the fact that, by definition, all are subject to equal opportunity legislation, it would be reasonable to expect a relatively high level of paid maternity leave on offer. In fact, the survey found that only 41 per cent of the organisations provided paid maternity leave. While this was an improvement on earlier years (23 per cent provided paid maternity leave in 2001 and 36 per cent in 2003) it is still unacceptably low. Not only that, but the modal duration of paid maternity leave amongst the organisations surveyed was just six weeks; only five per cent of the organisations providing paid leave offered the 14 weeks recommended by the International Labour Organisation and only 37 per cent made the leave available to all female employees, including casuals (EOWWA, 2005: 10). Overall, the absence of a national system of paid maternity leave fundamentally undercuts women’s attachment to the labour force. It drives home the notion that there is a penalty associated with combining paid work and care and sends a signal to women that their work is seen as less important than men’s work. This is completely at odds with the message delivered by the *Intergenerational Report.*
Child care

Child care is another element of social policy that is vital for the support of workers with family responsibilities, especially given the growth in labour force participation of mothers. Child care has become a major political issue since the 1970s and services have grown rapidly in recent years (Brennan, 1998). About half of all children aged under 12 in Australia use some form of child care (either formal or informal\(^2\)). Importantly for the intergenerational debate, grandparents are significant providers of child care. In 2005, 631,400 children were cared for by their grandparents – more than the combined total of children who attended long day care centres (323,800), family day care homes (106,100) and occasional care (49,500) services (ABS, 2005).\(^3\)

Reliance upon the older generation (many of whom are of workforce age, and indeed are workforce participants) to provide child care has significant implications for their willingness and ability to engage more intensively with the labour market.

The Howard government has followed the trail opened up by Labor, encouraging private providers to enter the market, offering cash subsidies to families on a means-tested basis and marginalising the type of community-based, non-profit care for which Australia was once known internationally. As a result of the promotion of market alternatives to community-based provision, Australian child care has become ‘big business’ and private, for-profit providers dominate the provision of care for children below school age (Brennan 2007). A number of childcare companies have now listed on the stock exchange. The largest of these is ABC Learning, owned by Eddy Groves who, in 2006, had a personal wealth estimated at $260 million and was named the richest person under 40 in Australia. Approximately 70 per cent of long day care services are now owned by private-for-profit businesses (AIHW, 2005). Other forms of care, which are not so profitable, remain in the hands of non-profit community organisations. Thus, around 96 per cent of outside school hours care, 97 per cent of family day care and 99 per cent of occasional care is provided under such auspices (AIHW, 2005).

The shift to the private sector has resulted in a rapid expansion of long day care places. However, there are indications of downward pressure on standards and quality. As community childcare has declined as a percentage of all Commonwealth services, pressures to reduce licensing standards and to abandon the existing system of accreditation in favour of industry self-regulation have intensified. When state regulations have been reviewed, interventions by private child-care lobby groups have, almost without exception, been directed towards driving standards down. In 2003, ABC Learning challenged the Queensland regulations concerning staffing during lunchtime and breaks (Horin, 2003). Corporate providers are, of course, legally obliged to maximise profits for their shareholders. If regulations governing staff qualifications, group sizes, adult/child ratios and basic health, nutrition and safety requirements are seen as barriers to profit, then at least from a business perspective it may be quite appropriate to try to reduce such ‘costs’ (Teghtsoonian, 1993).

Recent research conducted by the Australia Institute has raised concern about the quality of care being provided in childcare centres that are part of corporate chains. Independent private centres offer a level of care that is similar to community based, non-profit centres. On the critical issue of staff members’ own perceptions of their ability to form relationships with children, community-based and independent centres performed significantly better than the corporate chains, with about half the staff from the former two types of care agreeing that they

\(^2\) Formal care refers to services that are regulated (e.g. long day care, family day care, outside school hours care). Informal care is not regulated. It is arranged by a child’s parent(s) either in the child’s home or elsewhere and may be paid or unpaid.

\(^3\) Many children use more than one form of care.
always have time to develop individual relationships, compared
to only a quarter at corporate centres (Rush, 2006).

One of the major issues in the provision of early childhood
services is the lack of detailed, consultative planning. Macro level
data are available from the Australian Bureau of Statistics, but
local level planning is noticeably absent. Rudimentary data are
available in respect of outside school hours care, family day care
and in-home care, since existing services are asked to record the
number of places requested. The Department of Family and
Community Services and Indigenous Affairs does not, however,
measure unmet demand for long day. Thus, the one service type
in respect of which no planning occurs is long day care – the
service which accounts for the largest share of the child care
budget and the biggest number of childcare places. With respect
to long day care, the market literally rules. Private providers can
establish services wherever they wish and, so long as those
services become part of the Quality Improvement and
Accreditation System, users of these services will be eligible for
Child Care Benefit.

The cost of childcare to parents is a highly sensitive issue in
Australia. The Australian Government provides Child Care
Benefit (CCB) to reduce the costs that parents face in using
approved care. Up to fifty hours of CCB is payable if parent(s)
meet a work test, and 24 hours CCB is available to other families.
The amount of CCB depends upon various factors including
family income, the ages of children in care and the number of
hours of care required. At the extreme, a family with an income
below $34,300 (including those on income support) may be
eligible for up to $148 per week. The CCB tapers down to about
$25 per week for the 10 per cent or so of families with combined
incomes over $98,000. Thus, $148 is the maximum CCB
available to a low-income family and $25 is the maximum for a
high income family. However, these levels of subsidy are payable
only in respect of children below school age who attend the
service for 50 hours per week. In 2005, the median number of
hours spent in formal care was 10 (down from 11 in 2002) and
less than three per cent of children were in long day care for 50
or more hours per week. The proportion of children from low-
income families who attend childcare for 50 hours and thus
attract the maximum subsidy is likely to be miniscule –
particularly since families must pay the difference between CCB
and the actual fee charged by the service.

During the 2004 election campaign, the government announced
an additional measure, the Child Care Tax Rebate (CCTR) to
assist working parents with their childcare costs. CCTR was
presented as a 30 per cent rebate on out-of-pocket childcare
costs (that is, childcare costs minus Child Care Tax Benefit).
After the election, the Treasurer announced that a cap of $4000
would be applied and that the CCTR would not be claimable
until 2006. In other words, parents would have to wait for up to
two years to claim this benefit. The administrative and record-
keeping requirements of the CCTR are complex. The CCTR is based
on completely different principles to CCB: it is designed
to provide the highest benefits to those with high childcare costs –
and, since high childcare costs are strongly correlated with
high incomes, it is clear which families will benefit the most.
Further, the CCTR is only available to offset tax, so low-income
families will miss out if the amount for which they are eligible is
greater than their tax bill. Partnered women can transfer any
unused portion of the rebate to their partners; single mothers
have no such option. The CCTR has been criticised from many
quarters; it seems plain that it is not intended to address the
problem of childcare affordability for those most in need, rather
it is a response to intense lobbying from those who represent families in the highest income bracket.

Care of the elderly and people with disabilities

As discussed in Chapter 8, since the early 1980s, Australian policy and provision towards the elderly and disabled has shifted from an emphasis on group facilities such as nursing homes and hostels towards support and care services that enable people to remain within their communities, ideally within their own homes, for as long as possible. Policy towards the elderly emphasises healthy ageing, ‘ageing in place’ (that is, minimising the likelihood that individuals will have to move from one residence to another as they grow older) and supporting people to live in the community, rather than in government-funded aged care accommodation. These policies have been highly successful. Most older Australians are independent, active members of the community. They provide a great deal of care and support to others – especially spouses, children and grandchildren – and make significant contributions to the community through volunteer work (de Vaus et al, 2004). When they require support for themselves, it is most often provided by family members, especially spouses, daughters and daughters-in-law.

The establishment of the Home and Community Care program (HACC) in 1985 signified a decreased emphasis on residential care services and a new emphasis on community care. HACC provides services to older people as well as to people of all ages with disabilities, and their carers. The program is jointly funded by the Commonwealth and the State/Territory governments, and its purpose is to “avoid premature or inappropriate admission to long-term residential care” (AIHW, 2003: 300). In more recent years it has been supplemented by a range of other policies including Community Aged Care Packages (CACPs), Extended Aged Care at Home (EACH) Packages, Veterans’ Home Care, and assistance provided by Day Therapy Centres (DTCs). All these are aimed at supporting aged people to remain living in the community and, in this respect, have been highly successful. Since 1986, there has been a substantial decline in the proportion of elderly people living in institutional care. For some, including those in the oldest age groups, the declines have been very significant. For example, close to half (46 per cent) of women aged 85 or more were living in institutional care in 1986; this had fallen to around one-third (34 per cent) by 2001 (AIHW, 2003: 283). These trends are illustrated in Table 6.2.

Table 6.2. Percentage of people living in institutions, by age, 1986–2001

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<tr>
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<th>65–69</th>
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The reduced reliance of older citizens on residential care services has many benefits, however the anticipated growth in the numbers of such people in the community will place significant pressure on families and households to provide additional care and support. In 1998 the ABS estimated that 46 per cent of all older people needed some assistance with the tasks of daily living including transport, mobility, housework, property maintenance, and personal care. The projected increase in the proportion of those aged 85 will have particular ramifications. Across the board, people in this age group have
much higher needs for assistance than those aged between 65 and 74. Over 90 per cent of people aged 85 or more are likely to need some assistance, compared with 32 per cent of the 65–74s (ABS, 1998). Partners and children were the most likely to provide these forms of assistance, sometimes but not always as a supplement to formal care services. In 1998, 347,000 people over 65 were living at home and using only informal, unpaid services, while 507,000 were living at home and using formal, paid care. Almost three-quarters of the latter group were also assisted by unpaid carers (AIHW, 2006: 154). Five years later, in 2003, the number of older people at home with only unpaid assistance remained about the same (345,000) despite population growth, while the number using formal care had grown to over 607,000. This suggests that the informal care provided largely by family members is growing rapidly and, while this may have a number of benefits for both carers and those who are cared for, very little attention is paid to the labour force prospects of unpaid carers.

As discussed earlier, providing care to another person has a substantial impact upon the prospects of the carer finding and maintaining paid work. This has consequences not only for individuals but also for particular occupations and industries, depending upon their age and gender profile. The typical nurse, for example, is a woman in her mid-40s. Many such women are looking after elderly parents as well as young children. The NSW Nurses Association has already identified the absence of elder care facilities as a problem for recruitment and retention in their industry.

As noted above, the impact of child care responsibilities on labour force participation has attracted considerable attention in Australia, far more than the impact of caring for elderly, sick and disabled family members. Yet providing care for this latter group is likely to be a critical issue in years to come, leading to a greater demand for paid carers but also increasing the pressures on family members (mainly women) who assume responsibility for providing informal assistance. While the proportion of those caring for children may fall, there will be a substantial increase in the number of elderly people and also people with disabilities and consequently an increase in need for care for these groups. According to some observers, Australia is already facing a critical shortage of aged care facilities. Pru Warrilow, director of a work/life balance advisory service in Sydney argues that ‘the shortage of good aged care facilities is almost as bad as the shortage of care for 0–2 year old children’ (quoted in ABC Online, 2003).

Unlike child care, where there are recognisable milestones and a reasonable assumption that the period of greatest dependency will last 3-5 years, no such assumptions can be made about care for the elderly. In addition, the nature of the responsibilities can be unpredictable and the length of time for which care is required is almost always uncertain. Much of this care is, of course, provided very gladly and the argument here is not that family carers should abandon their posts and undertake paid work – or more paid work than they already do. Rather, the argument is that government policy needs to look carefully at the social impacts of the growing need for care in the community, and put more emphasis on enabling carers to combine paid work and care, should they choose to do so, in the least stressful ways possible.

Conclusion

Increasing labour force participation in Australia is widely seen as necessary to compensate for the reduction in the proportion of the population that will be of workforce age in the future, as well as to provide the tax base necessary to meet the income support, health and other needs of an ageing population. A high proportion of the adult population (particularly women) already bears significant responsibility for others, both younger and older, and this proportion is likely to rise with the increased longevity of the population and the increasing incidence of disability in the population. Measures to support the workforce engagement of those with caring responsibilities will be vital in coming decades. This chapter has reviewed three areas of public
provision for workers with family responsibilities – maternity leave, child care and support services for the elderly. In each of these there is considerable scope for more creative policy thinking as well as more substantial public investment in order to support both carers and those in receipt of care.

References


ABS – see Australian Bureau of Statistics.


AIHW – see Australian Institute of Health and Welfare


EOWA – see Equal Opportunity for Women in the Workplace Agency.


EOWWA – see Equal Opportunity for Women in the Workplace Agency


**Children – Annual Report 2004.** Melbourne: Commonwealth of Australia.


HREOC – see Human Rights and Equal Opportunity Commission.


Introduction

The birth rate in Korea in 2005 was 1.08 children per woman, the lowest in the world. This is a clear indication of the prevailing trend in Korea of ‘a family without a child’, and mirrors the burdens and difficulties of child care. It is particularly applicable to women in the paid workforce with children: since the gendered division of labour remains solid, these women face double responsibilities, at work and home.

In March 2005, 52.3 per cent of the working population of Korea were full time employees working under contract for a period of over one year; 33.3 per cent were temporary workers who were hired for periods between one month and one year; and 13.4 per cent were daily workers, reflecting overall low levels of job security (KNSO, 2005). Despite the low levels of job security, the increased burden of bringing up children is forcing a growing number of Korean households to become double income families.

This chapter reviews the status of child care arrangements in Korea and the difficulties faced by women in the paid workforce with children. It also puts forward suggestions as to how to address some of these difficulties. Government policies at the national level that support child care for double income families are comprehensive in nature and are also linked to tax exemption, education and other policies.

Although it is acknowledged that bringing up children requires broad social and national support, this chapter focuses specifically on maternity leave, parental leave, childcare services and family participation in child care. It is based on an analysis...