The Cultural Dimension of Welfare States
Ideals of Care and Women’s Work

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Re-theorizing Welfare States: Restructuring States, Restructuring Analysis

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Introduction

European governments are bidding farewell to the once-popular ideal of the male breadwinner model. Except for Scandinavia, this model has sat firmly in the welfare state saddle since the Second World War. But in the new millennium, the governments of Europe no longer expect women to be full-time mothers. In Europe, the icon of the happy housewife is fading. The EU welfare states fully committed themselves to working women as part of the 2000 Lisbon strategy. If more women worked, this would contribute to the European aspirations of becoming ‘the most competitive and dynamic knowledge-based economy in the world’, while at the same time having ‘sustainable, active and dynamic welfare states’. This has been underlined recently by the Kok Report, which assessed Lisbon. The report states that if Europe wants to show its social face, the focus should be on economic growth and employment (European Communities 2004).

In ‘Why we need a new welfare state’, originally written for the Belgian Presidency for the European Union, Esping-Andersen et al. (2002) show how to raise women’s employment rates in Europe. A new welfare architecture should bid farewell to the male breadwinner model and support women to work. ‘In many countries women constitute a massive untapped labour reserve that can help narrow future age dependency rates and reduce associated financial pressures’ (ibid., pp. 94), and working mothers are ‘the single most effective bulwark against child poverty’ (ibid., pp. 9-10). At the same time, as birth rates are low, European women need to be encouraged to deliver more babies. Gender equality policies should therefore not simply be seen as concession to women’s claims, the authors argue, supporting working women is a social investment. A new welfare state should emphasise affordable childcare services and good maternity and parental leave schemes. When the welfare state supports mothers, they will go out and get a job.

Seeing social policy as the cause of women’s employment patterns has become the dominant paradigm among scholars and policymakers. Especially popular is what can be called the ‘comparative welfare regime approach’. Esping-Andersen (1990, 1998, 2002) is indeed a well-known representative of this stream, as are Lewis (1992a, 1993, 1997b, 1998), Sainsbury (1996, 1999), O’Connor et al. (1999), and Daly and Rake (2003). The basic idea is that welfare states are not the same, their design differs across Europe. This is due to variety in the strength of social movements (working class and women) as well as historical, institutional legacies. Such differences in social policies also lead to different outcomes. In short, the composition of welfare states determines women’s employment patterns.

It is also common to cluster welfare states in three ‘models’ or ‘welfare regimes’ along specific explanatory dimensions. Well-known are Esping-Andersen’s (1990, 1999, 2002) ‘three worlds of welfare’ and Lewis’ gender models (1992). Each regime or model has specific consequences for women, yet the explanatory logic is often as follows: the more available and affordable childcare services are, the more mothers work. The more work disincentives in taxation and social security, the
less mothers work. The underlying notion is that women really want to work, but they can only do so when the social policy barriers are removed.

This paper will question such logic. Does the variety in welfare states’ design really cause an European patchwork of gendered work-and care patterns. The main claim of this paper is that welfare states do matter but it is important not to look at welfare states primarily as structures of financial (dis) incentives, as it is often done, but at welfare states as ‘moral agents’ (Wolfe 1989). When it concerns women’s employment and care, people do not behave exclusively as homo economicus: culturally shaped moral ideals of care matter most. Such an approach takes the best of cultural approaches (Pfau-Effinger 1998, Hakim 2000) and social policy analysis. The empirical information from Belgium, the Netherlands, the UK and Denmark will help me to show this thesis. These countries are chosen to increase European generalisation as they are representatives of the welfare regime models of both Esping-Andersen and Lewis.

Changes and differences in welfare states and women’s work
The first problem is that diversity in welfare states cannot sufficiently explain changes and diversity in women’s work. This can be shown by confronting changes in mothers’employment patterns and welfare states design.

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<td>BE</td>
<td>61</td>
<td>68</td>
<td>63</td>
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<tr>
<td>DK</td>
<td>70*</td>
<td>71*</td>
<td>72</td>
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<tr>
<td>NL</td>
<td>42</td>
<td>63</td>
<td>70</td>
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<tr>
<td>UK</td>
<td>40</td>
<td>53</td>
<td>52</td>
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* Since Denmark was not included The OECD Labour Force Survey (2002a) is used for 2000.

The first country in which women moved en masse to the labour market is Denmark. Already in the 1960s, due to labour market shortages and an active women’s movement, the ideal of mothers was to remain part of the labour market. In the 1970s employment participation increased as many women could find a job in the newly established service state. Today, Danish mothers employment rates are among the highest in Europe and far the majority of mothers works full-time (Table 1 & 2).

Historically Belgian employment rates of mothers are higher than one expects of a conservative-corporatist country. Already after the second world war employment rates were relatively high. This is generally explained by the necessity of women to work to raise the family income. More recently mothers increasingly move to part-time employment. Until the 1990s, the Netherlands was a laggard in Europe. Together with Ireland and Spain it had the lowest employment rates of mothers in Europe. But after a sprint from the mid 1990s onwards, it has passed many other welfare states, including
Belgium. Nearly all mothers, however, work part-time. The UK, finally, now is at the lower end of the Lisbon-rank when it concerns mothers. In both the Netherlands and the UK lone mother’s participation rate is relatively low (Lewis 1998).

Table 2  Part-time employment of women and mothers with children under age 6 (as part of all women aged 25-55), year 2001, four countries

<table>
<thead>
<tr>
<th>Country</th>
<th>Women</th>
<th>Mothers</th>
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<tr>
<td>BE</td>
<td>33</td>
<td>45</td>
</tr>
<tr>
<td>DK</td>
<td>21</td>
<td>6</td>
</tr>
<tr>
<td>NL</td>
<td>58</td>
<td>69</td>
</tr>
<tr>
<td>UK</td>
<td>41</td>
<td>66</td>
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</table>

Source: OECD (2002b)

‘Women’s move into the economy … is the basic social revolution of our time’, writes the American sociologists Hochschild (1989: 249). This has not only changed the structure of labour markets but also the balance of power within the family. This revolution took place in all four countries but in different decades and taking different speeds and shapes. The question is: how can the variety of revolutions be explained by social policies? In this section – due to limits of space - I will describe two policy domains: taxation and childcare. Elsewhere I have also incorporated the study of social security and leave schemes but the line of argument remains the same (Kremer 2005). Let me first look at taxation and ‘fiscal care’.

Tax

Often women’s employment differences are ascribed to differences in financial structures embedded in welfare states. The male breadwinner bonus in taxation is an example of a disincentive to work. The higher such bonus, the less women would work. Tax studies, argues Sainsbury 1999b, estimate that a fiscal system tailored to dual-breadwinner couples can increase women’s labour market participation by as much as 20 percent (see also Gustafsson & Bruyn-Hundt 1991; Grift 1998). And Hakim writes that ‘fiscal policy is one of the most effective tools of social engineering’ (2000:227).

Table 3 shows the extent to which tax systems favour single-earner families. Relative to the Average Production Wage (APW), the Belgian tax system contains the highest bonus for single breadwinners, followed indeed by the Dutch system. In that sense, both countries do fit the Christian Democratic model as well as the male breadwinner model. The British system contains the lowest benefit for single earners. In fact, it is one of the few European countries that actually encourage women to work (Daly 2000b). While low tax rates show the British ‘Liberal’ face, we can now also see its ‘individual’ face. The biggest surprise however is the Danish tax system. Theoretically, it should be as individualised as the British turns out to be. Instead, the Danish tax system contains a substantial bonus for single breadwinners and discriminates against double earners.
Table 3  Single Breadwinner Bonus in Taxation for 100% PW per year, 1998, four countries

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<th>BE</th>
<th>DK</th>
<th>NL</th>
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<tr>
<td>Single breadwinner</td>
<td>2324</td>
<td>2537</td>
<td>1256</td>
<td>460</td>
</tr>
<tr>
<td>bonus in euros</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>As % of the APW</td>
<td>8.4</td>
<td>7.1</td>
<td>7.3</td>
<td>1.6</td>
</tr>
</tbody>
</table>

Calculations¹ on the basis of OECD (2000a).²

Many researchers have been surprised by the Danish system of fiscal care, particularly given the ‘high rate of female labour force participation and settled recognition of the two-earner family as the norm for social behaviour and public policy’ (Shaver & Bradshaw 1995: 22; see also Sainsbury 1999; Montanari 2000; Dingeldey 2001). The British fiscal system does not correspond with employment patterns either. The UK has a very low number of double-earner couples and many mothers stay at home, much more than in the other countries. In addition, following the logic of the tax structure, married Belgian women should historically work less than Dutch, but they do not. The tax systems of the four countries thus bear many surprises: they neither fit the models nor correlate with women’s employment patterns. Besides, due to the progressiveness of the systems high-income families benefit more from transferable allowances, but in fact in any country low-income families are more likely to be single-earner families (Rubery et al. 1999).

Although the Netherlands fits the assumed tax-employment logic well also in this countries questions are raised. The Dutch economists de Jonge and de Kam (2000) show that history, the marginal tax rates have fluctuated substantially, while labour market participation of women continuously increased. Besides, in the 1970s marginal tax rates were lower than in the 1990s, yet at that time fewer women worked. Even after the double-earners law was introduced in 1984 which penalised second earners, women’s employment rates rose rather than decreased. Therefore they conclude: ‘Now that paid work of married women is widely accepted, things other than tax measures, such as the expansion of childcare, could be more important to mobilise the supply of (married) women than a fiscal trapeze act of policymakers’(2000: 842). They implicitly argue that now that the cultural battle has been won, financial measures are less important than facilities to make sure women can work.

Childcare

Another area – which is seen as crucial for women’s employment is childcare services. Without childcare there are no working mothers; only when women have their hands free from care can they

¹ In local currency in 1998: 93749 BFR (Belgium), 18942 Kroner (Denmark), 2767 Guilders (The Netherlands) and 285 Pound (UK). Calculations were made in 2002.
² In cooperation with Hans Hansen, The Danish Institute for Social Research/SFI.
enter the labour market. The Scandinavian countries – Sweden and Denmark (not Norway) – offer proof of this. Both have exceptionally high female employment rates. What sets them apart from the rest of Europe is the early development and universal coverage of state-funded childcare. Informal care can also relieve women, but if women want to work \textit{en masse} for a substantial number of hours, publicly funded and organised childcare is a necessary condition (Borchorst 2002; Esping-Andersen 1990; Lewis 1992a; Sainsbury 1996). The question now is: how true is this logic?

Denmark holds the world record in state-subsidised childcare: most young Danish children spend part of their lives in day care. In Denmark the family goes public, as Wolfe (1989) argues. More than half of the children younger than three go to public facilities and nearly all (90 percent) go when they reach the age of three (Rostgaard & Fridberg 1998). Denmark easily surpasses the Lisbon targets.

<table>
<thead>
<tr>
<th>Table 4</th>
<th>State-subsidised childcare for children in percentages, age group 0-3, 1985-2000, four countries</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>around 1985-1990</td>
</tr>
<tr>
<td>BE</td>
<td>20</td>
</tr>
<tr>
<td>DK</td>
<td>48</td>
</tr>
<tr>
<td>NL</td>
<td>2</td>
</tr>
<tr>
<td>UK</td>
<td>2</td>
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* Flanders: age category 0-2.5. From 2.5 to 3 the percentage is 86 (Kind en Gezin 2001)
** This is an estimated guess. The number of children using facilities is 15 percent according to Bradshaw and Finch (2002) and 20 percent according to the OECD (2001), but these are not state services. By and large, the state only pays childcare for lone mothers (WFTC; Chapter Five), in urban deprived areas, and for those who have a social need.

Childcare in Denmark is not only widely available but also quite affordable; parents pay a small percentage of the actual payments, the state pays by far the most. As Table 5 reveals, the costs of childcare for parents is relatively low. This means that childcare is indeed a service for all, regardless of background. As a consequence, take-up rates of day care show few differences between higher educated and lower educated parents (DS 2002). In Denmark, the use of state-subsidised childcare is indeed a universal practice for children above age one.\footnote{Except for ethnic minorities. Danish ethnic minorities hardly use childcare facilities (Abrahamson & Wehner 2003).}

Perhaps a surprise to some, Flanders comes second in the childcare league. By 1988, 23 percent of children were cared for in state-subsidised day care, by 1993 this rose to 31 percent, and in 1999 more than 40 percent of Flemish children younger than three went to state-subsidised childcare, easily surpassing the Lisbon targets (Table 4). The percentage of children aged 2.5 is even higher because at that age children can go to school. The Flemish rates (as well as the Belgian in general) are not only higher than in the Netherlands and in the UK, but also much higher than in the country often compared to Belgium, namely France (23 percent in 1995 and 39 percent in 2000). In fact, the Belgian
level in general and the Flemish level in particular is just as high as Sweden (ECNC 1996). As in Denmark, full-time care is most common (Vanpée et al. 2000) and childcare is affordable (and even free when a child goes to school at age 2.5). Indeed, a Christian Democratic welfare regime can build just as comprehensive a childcare service as a Social Democratic welfare state.

Table 5  Net costs of full-time childcare. Most prevalent type in each country, after direct and indirect subsidies and after taxes and benefits, PPP pounds per month, with one child younger than 3, around 2000, four countries

<table>
<thead>
<tr>
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<th>Lone parent, half average earnings</th>
<th>Lone parent, average female earnings</th>
<th>Couple, average male, half-average female</th>
<th>Couple, average male, average female</th>
</tr>
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<tbody>
<tr>
<td><strong>BE</strong></td>
<td>68</td>
<td>83</td>
<td>128</td>
<td>147</td>
</tr>
<tr>
<td><strong>DK</strong></td>
<td>8</td>
<td>61</td>
<td>145</td>
<td>145</td>
</tr>
<tr>
<td><strong>NL</strong></td>
<td>8</td>
<td>8</td>
<td>375</td>
<td>375</td>
</tr>
<tr>
<td><strong>UK</strong></td>
<td>116</td>
<td>158</td>
<td>385</td>
<td>385</td>
</tr>
</tbody>
</table>

Source: Bradshaw & Finch (2002)

The Netherlands has always been a childcare laggard, together with the UK, Ireland and southern European countries like Spain. Until the late 1980s, as Table 4 shows; only 2 percent of young Dutch children (aged 0-3) used state-financed childcare. For a long time, childcare was considered as an antiphon to a modern welfare state: in a decent welfare state, families should be able to afford to have their children home. This changed only in the 1990s, when the increase in women’s labour market participation became a policy target. Then the percentage of children who went to state-funded services more than doubled, and in the late 1990s nearly one-fifth of young children (aged 0-3) used state-subsidised childcare. In contrast to Denmark, few Dutch children go to childcare every day. The norm is that five days a week is not good for children’s development; day care is commonly used two or three days a week (Portegijs et al. 2002). Although Dutch childcare is just a shadow of the Flemish and Danish arrangements, the rapid increase is extraordinary. While in the mid 1990s waiting lists were a huge problem, more recently childcare for children under four is less problematic, and shortages are concentrated for after-school care.

Childcare services, however, are generally expensive. Dutch childcare policy is built on the trust of collective corporate arrangements. The backside of such type of organisation of childcare is that not all employers pay for childcare, they do only when they fall under Collective Agreements (about 80 percent do), but these agreements also have to include childcare arrangements. And less than half of the collective agreements (45 percent) include any childcare arrangement (Portegijs et al. 2002). This means that many employees have to pay the full price of childcare services.

Of all four countries, the UK has the lowest level of state-subsidised childcare and is the least able to reach the Lisbon criteria. The Conservative government that was in place from 1979 to 1997 never expanded childcare services. Childcare policy was at the margins of public policy. As Table 4 shows, in the 1990s the level of state-subsidised childcare was 2 percent for the under-3s. Provided by
the local authorities, these places are directed towards children who have strictly defined special needs. The local authorities’ nurseries only provided for 24,000 places in 1994, a number which has been quite steady since the 1980s (Bull et al. 1994). This is only a fraction of the number of children cared for by the local authorities during the war (Moss 1991).

The Conservative laissez-faire strategy turned out to be unsuccessful: day care was expensive, the quality varies, and availability and quality depend on the region one lives in. Despite the Conservative Government’s faith in the creativity of the market, the demands of parents have not been met. As a result, childcare shortages were a constant (Day Care Trust 1997). Since Labour took over the government, childcare investment did increase and a remarkable shift in policy took place. For the first time since the Second World War, the state has taken responsibility for the development of childcare. In 1998, the government presented the first National Childcare Strategy in their paper ‘Meeting the Childcare Challenge’. New labour’s strategy includes four interventions: to subsidise start-up costs of nurseries in order to increase availability, to support children in deprived areas, to make childcare affordable through tax deductions and to invest in early education (Lister 2003; Lewis 2003a).

Table 6 Children’s day care facilities in thousands, 1997-2001, England

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<tbody>
<tr>
<td><strong>Day nurseries (0-4)</strong></td>
<td>194</td>
<td>248</td>
<td>285</td>
<td>+91</td>
</tr>
<tr>
<td><strong>Play groups (0-4)</strong></td>
<td>384</td>
<td>347</td>
<td>330</td>
<td>-54</td>
</tr>
<tr>
<td><strong>Childminders (0-7)</strong></td>
<td>365</td>
<td>337</td>
<td>304</td>
<td>-61</td>
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Table 6 shows that a huge increase has taken place in children at nurseries. At the same time, the number of children in playgroups dropped. Since playgroups are less helpful for working mothers – children can only go for a limited number of hours – this indicates that working women have now managed to have a place at a nursery. On the other hand, the number of children with childminders also decreased. The net investment is thus ‘only’ 30,000 places between 1997-2001. However, a further injection will take place and by 2005-2006 an additional 250,000 childcare places will be developed, promises the government (Lister 2003).

At first glance, the link between mothers’ employment patterns and childcare services is unmistakable. In low-service countries like the UK and the Netherlands, few mothers work and they hardly ever work full-time. In high-service countries like Belgium and Denmark more mothers work and they are also more likely to work full-time. State-subsidised childcare services seem a necessary or even a sufficient cause. On second thought, the cases of the UK and Belgium raise questions. Denmark and the Netherlands fit the model neatly.

In both the Netherlands and the UK, employment rates of mothers increased during the 1990s, although in the UK less than in the Netherlands. For the Netherlands, this is understandable as
childcare became more available. How come British employment rates also increased while childcare investments were only made in the late 1990s? One hypothesis is that up to a certain level of female employment rates, state-subsidised childcare is not a necessary condition: informal sources too can shoulder working women. But if employment wants to surpass a specific level and all women want to participate, state-subsidised childcare is conditional. A second hypothesis is that a high level of state-subsidised childcare is necessary for full-time employment, not for part-time work. Indeed, in the UK and the Netherlands – which have comparatively low levels of state investments in childcare – women often work part-time. Full-time employment is more common in Denmark and Belgium, where state investments are higher.

The Belgian case also raises doubts. Childcare in Belgium is relatively well developed – much more than one would expect from a regime typified as Christian Democratic. Therefore, it is no surprise that Belgian mothers’ employment rates are higher than the Dutch. But we can also look at it differently. If childcare facilities are so well developed – they reach Swedish levels – why don’t more mothers work? Why do they not work more hours? Why are lower educated women more likely to stay at home, while childcare is well-affordable? A steady increase of state-subsidised childcare took place in Flanders. While 17 percent of children used state-subsidised facilities in 1983, this rose to 41 percent in 2000. At the same time, mothers’ employment did not boom; women even went to work part-time. The relationship between the existence of childcare services and type of employment is thus not that self-evident. The question thus remains: why do Belgian women with good access to affordable childcare not work more?

**Assumptions about human behaviour**

One of the reasons why welfare state theories can not sufficiently explain mothers changing employment patterns is the fact that the micro-logic of behaviour is undertheorised. What are the mechanisms of social policy, and why do they affect peoples actions? How do welfare states effectively ‘work’? Most welfare regime theory is not explicit about the mechanisms driving human behaviour. Implicit however is a focus on the financial incentive structures. Therefore, Duncan and Edwards (1999: see also Duncan et al. 2004) argue that when (female) labour market patterns are explained, the image of the *homo economicus* is often there. Women’s actions seem motivated by economic gains and constraints. This is the more surprising as cultural notions are crucial in describing welfare state models as well as its origins (e.g. Esping Andersen 1990, 1999; Anttonen & Sipilä 1996; Sainsbury 1996, 1999; Gornick et al. 1997; O’Connor et al 1999).

Esping-Andersen is most explicit in using a Beckerian theory to understand gendered employment. Nobel prizewinner Becker (1981) argues that when decisions are made within the family, people behave altruistically and aim at the best financial profits for the family as a whole. This decision-making process within households is different from market processes. In families, people’s actions are not based on straightforward individual calculations as in the marketplace: household
behavioural rules are altruistic. Consequently, the gendered division of labour is based on the idea that households’ target is to maximise economic gains. The person with the highest productivity in the household will specialise in household tasks (women), the other person will enter the labour force (men). This explains why women and men sometimes act contrary to their individual economic self-interest, as they are thinking about the economic profits of the family as a whole.

In his ‘Social Foundations’, Esping-Andersen argues that in most European families it is less financially beneficial when men perform more unpaid work, as it is more profitable to bring a child to day care. Only when the gender pay gap is small, as in Sweden, are men more likely to take up unpaid work. ‘Lamentable as it may be, it is perfectly consistent with a standard neo-classical joint-decision model of household behaviour’, he claims (1999; 58). In ‘Why We Need a New Welfare State’ he writes that women’s labour is guided by two kinds of ‘opportunity costs’: ‘One following straight from Becker’s (1991) model, has to do with prospective earnings, relative to their husbands. A second has to do with the implicit tax on mothers’ earnings that childcare incurs’ (2002: 80).

Other welfare state studies do regard women not as family members but as individuals, and nevertheless base themselves on economic logic. Concepts like ‘opportunity costs’ and ‘financial incentives or disincentives’ or ‘traps’ are used to describe the mechanisms that determine women’s behaviour. Economic cost-benefit analyses are made to understand gendered patterns. Tax and benefit schemes have been sifted through to find financial (dis)incentives. Childcare costs are seen as a hindrance to women’s labour market participation. The recent OECD study ‘Babies and Bosses’ (2002) that compares several welfare states is a good example of such an approach. It tries to show that childcare costs and male breadwinner arrangements in tax and benefit structures result in low female employment rates. In welfare state analyses, as Pfau-Effinger (1998:147) argues, ‘women are treated as rational individuals who orient their behaviour according to financial incentives’.

Scholars who study gender in social policy often refer to cultural notions. In fact, gender itself is a cultural concept. It can be defined as the social, cultural and historical construction of ‘women’ and ‘men’ with an explicit focus on power relations. It follows that those who work with the concept of gender study the cultural dimension of welfare states. But few of them do so explicitly, based on a clear theory and methodology (e.g. Lewis 1992a, 1993, 2001; Leira 1993, 2002; Langan & Ostner 1991; Knijn 1994; O’Connor et al. 1999; Daly & Rake 2003; Knijn & Komter 2004). At the same time, financial cost-benefit analysis also prevails in gender studies. Examples can be found for instance in Sainsbury’s (1999) collection ‘Gender and welfare state regimes’. Bussemaker and van Kersbergen (1999) argue that means-tested pensions create a disincentive for employment. In the same collection, Meyers, Gornick and Ross (1999) link childcare to mothers’ employment by positing that

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4 Becker more recently argued that many economists, including himself, have relied excessively on altruism to tie the interests of family members together. He proposes including guilt, affection, obligation, anger and fear of physical abuse as factors that need to be taken into account (Nussbaum 2000).
the cost of childcare can be viewed as a ‘tax’ on mothers’ wages. Even when gender is used as a central concept, it seems difficult not to describe women as being locked up in financial traps.

The moral predicament of work and care
This is in stark contrast to micro-level sociological and anthropological studies of care and work behaviour. For mothers, being a full-time carer is no longer obvious. Care responsibilities are no longer self-evidently prioritised above paid employment. At the same time, for many women care responsibilities are always there: they cannot hide away from care. Their decisions about work are always made in the context of care. When women make decisions about work, the question is: how am I making sure that my children are cared for properly? And can I find a solution for care that fits my ideal of good caring? The importance of care comes to the fore in many empirical studies on women and work (Finch & Mason 1990, 1993; Morée 1992; Hays 1996; Brannen & Moss 1999; Duncan & Edwards 1999; Knijn & van Wel 1999, Hochschild 1989, 2003).

A second characteristic of decision-making is that it is not based on economic logic alone (Hays 1996). Who cares is shaped and framed – although never exclusively determined – by gendered normative guidelines (Finch & Mason 1993), gendered moral rationalities (Duncan & Edwards 1999), or feeling rules (Hochschild 2003). In other words: ‘to work or to care’ is not exclusively a question of economics but a moral predicament, and morality is often linked to gender identity. This is nicely put forward in Duncan and Edwards’ (1999) study on lone mothers. They were puzzled by the question of why British lone mothers make the choice to care full-time and postpone a working career that would lift them out of poverty. They concluded that lone mothers’ decisions are led by gendered moral rationalities that are constructed, negotiated and sustained socially in particular contexts. According to Duncan and Edwards, lone mothers try to behave in line with their identity, their socially constructed ‘self’. Only when the identities of worker and good mother are reconciled do lone mothers take up paid employment.

The importance of morality as well as gender identity is also visible in two-parent families. In Hochschild’s (1989, 1997) studies on couples’ juggling with work and care, economic rationality often conflicts with morality. In ‘The Second Shift’ (1989) she questions why men have not taken part in the cultural revolution and took over some of women’s responsibilities at home. With money in their pockets, women’s kitchen-table power should increase much more. But some working women, she found out, did not even ask their husbands to do a little more. And men did not do it themselves. Hochschild seeks the explanation not in economic theories but in the moral accounting systems within marriage and the importance of gender identity for both men and women.

Studies on working and caring also show that decisions about working and caring are rational and purposeful; we no longer live in an era in which habits are the compass in life, although no human being lives without the weight of the past and the values he is brought up with. Caring is no longer an unconscious habit, a routine passed from mother to daughter. Caring has been modernised, it has lost
its self-evidence; it is no longer a cultural given (Hays 1996). In that sense, Hakim (2000) is right in stressing that people must make decisions about their life, whether they want to or not. Normative guidelines are no longer clear-cut. For that reason, Finch and Mason (1993) called their book on caring for next of kin ‘Negotiating family responsibilities’. Family responsibilities are still in place but they are debatable. Finch and Mason also show that people use their brains when they negotiate who will care for their frail parents, people are involved in rational processes. This is also the case for mothers (Hays 1996) and lone mothers (Duncan & Edwards 1999). For them it is a rational decision not to follow their wallet but their values. People in couples can also behave very calculative. Hochschild (1989) shows they use gender strategies – a strategy of action – to push what they want.5

Action is not only rational but also relational and done in context. Or, as Finch and Mason argue (1990: 356), ‘There is a sense of interwovenness between decisions being made by different members of the family’. The concept of individual, autonomous choice, they argue, is not the right word for the process of decision-making about caring. Caring reveals various interdependencies. For this reason, the concept of individual preferences as put forward by Hakim (2000) is inadequate to understand women’s (and men’s) lives. Even in Hochshild’s studies, where households resemble battlefields, an ongoing (power) struggle coincides with the fact that partners make decisions in the continuous knowledge of dependence. This may be for love or because in modern times real efforts have to be made to keep marriages together. Hence rather than describing dependence within households as an altruistic haven, as Becker does, households are better presented as an ‘arena of cooperative conflict’, as Sen puts it (in Gardiner 1997).

Cultural institutionalism

With respect to the dilemma of caring and working, decision-making seems to be captured most adequately by what March and Olsen (1989) have labelled as the logic of appropriateness. They argue that behaviour (beliefs as well as actions) is intentional but not wilful. For them, action stems from a conception of necessity rather than preference. Within the logic of appropriateness a sane person is one who is ‘in touch with identity’ in the sense of maintaining consistency between behaviour and a conception of self in a social role. Ambiguity or conflict in rules are typically resolved not by shifting to rational calculation but by trying to clarify the rules, make distinctions, determine what the situation is and what definition ‘fits’.

March and Olsen’s theory fits in what Hall and Taylor (1996) have labelled as ‘cultural institutionalism’. They argue that institutions provide strategically useful information, but also affect the very identities, self-images and preferences of actors. In this approach institutions not only

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5 Women pressed their husbands to do a little more in the household in active, directive ways, using strategies of persuasion, reminding, argument, threatening to leave or losing sexual interest; or indirect, passive ways, such as playing dumb or getting ‘sick’. Men were more likely to pursue the strategy of needs reduction: ‘I don’t shop because I don’t need anything’ or ‘I can just as well eat cold cereal for dinner.’
includes formal rules, procedures or norms, but also the symbol systems, cognitive scripts and moral
templates that provide the frames of meaning guiding human action. Such a definition breaks through
the conceptual divide between ‘institution’ and ‘culture’. What is particularly valuable about March
and Olsen’s approach is that the logic of appropriateness is open to change: it can be a result of
historical experience (including socialisation and education) but also the destabilising of older sets of
rules and norms. As one logic of appropriateness is destabilised, for instance because of a war but also
due to inconsistencies with practice, space opens up for deliberation over specific norms and values.

The cultural dimension of welfare states
How to include such image of human behaviour in the study of women’s employment patterns in
Europe? In sociology a cultural turn is taken place. This ‘cultural approach’ stresses that the impact on
welfare states is heavily overestimated. In contrast to the ‘comparative welfare regime approach’, it is
said that women’s own wishes and values can best explain the diversity in Europe. A cultural
approach also claims it can understand change much better. Hakim (2000, 2003a) for instance argues
that women in Europe are now free to choose for the first time in history. Consequently, women’s
employment and care patterns are a direct result of their work-life preferences. Also Pfau-Effinger
(1998, 1999) stresses the importance of the interplay between gender arrangements – the work-and-
care practices of men and women – and gender culture, such as norms, values and attitudes towards
work and care.

The cultural approach states that changes in women’s employment cannot simply be enforced
by social policies or Lisbon strategies. Changes come, so to speak, ‘from below’: women themselves
sew the European work-and-care patchwork. In the cultural approach, women are not held back by
social policy bars. If mothers do not work it is because they do not want to: they want to care.
participation in work and care and welfare states, nor with women’s and men’s values and preferences.
But neither it is true that women (or men) behave according to their own, individual wishes and
preferences. Cross-national studies on attitudes and wishes towards employment show that in the four
countries concerned women work less than they want to (UK, the Netherlands) or work more than
they want (Denmark and Belgium). Also men say they want to work less in most countries (Fagan
2001; Bielinski & Wagner 2004) There is no straightforward, clear-cut relationship between women’s
and men’s. In other words, both approaches – the comparative welfare regime as well as the cultural –
cannot be empirically grounded. Diversity in Europe cannot be explained sufficiently by either theory.

This paper argues that what may help explain European diversity and change is when culture
is located within welfare states (Rothstein 1998; Chamberlayne 1999; Clarke 2004; van Oorschot
2003). While the cultural approach downplays social policy too much, social policy studies have little
tradition to include culture To connect both, I propose using the concept of ‘ideals of care’.
Ideals of care

In each country of this study, mothers entered the labour market in large numbers in different time lags, but in each country their interests were often placed against the interest of the child in the public debate. After the full-time motherhood ideal, new care ideals arose and old ones revived. These new ideals softened the moral clash between working mothers and children’s interests. In this study, four ‘new’ ideals are distinguished which came after the care ideal of the full-time mother: intergenerational care, surrogate mothers, parental sharing and professional care. This paper attempts to show that each welfare state promotes different ideals of care. In Dutch social policy, for instance, the ideal of parental sharing is dominant, in Denmark the ideal of professional care.

The concept of ideals of care may be fruitful on two levels. Firstly, ideals of care may help to understand the origins and development of caring policies: it reveals why some policies are in place in one welfare state while others are not. Why do Denmark and Flanders have such high rates of state-subsidised childcare services? Secondly, ideals of care may help understand different policy outcomes, i.e. European variety in gendered work-and-care patterns. The Danish welfare state promotes the ideal of professional care. This means that it is better for children when they are socialised together, supervised by highly educated professionals, than to stay at home ‘alone’ with their mother. Such a care ideal may be the best guilt-reduction strategy for working mothers. Studying ideals of care will help to examine welfare states as ‘moral agents’ or ‘cultural catalysts’. Ideals of care are in fact a logic of appropriateness: they can be seen as an ‘institution’ or a ‘culture’ that is open to change.

A care ideal ‘implies a definition of care, an idea about who gives it, and how much of what kind of care is “good enough”’ (Hochschild 1995:333). More specifically, it implies something about where it should be given: the child’s home, the carer’s home or a day care centre; by whom it should be given: who is trustable and well-equipped for the ‘job’; and in what way it contributes to the upbringing of children: are children supposed to be socialised with other children, educated individually, cherished, or simply ‘looked after’? In my definition, care ideals identify what is ‘appropriate care’. Care ideals are the answer to the moral predicament of working and caring many parents – often mothers – feel they are in.

Care ideals are existing practices, but they are more than that: they contain a specific normative legitimation, a logic of appropriateness (March & Olsen 1989). Care ideals are highly gendered, they are part of a gender culture: their legitimation is framed in terms of whether they are better, worse, or just different from mother care; motherhood is a vital frame of reference. Ideals of care are not rigid moral rules: they can be negotiated, are diffuse and imply some form of negotiation and change. Ideals of care are not hegemonic or mutually exclusive. The moral predicament of work versus care is likely

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6 Hochschild (1995, 2003) uses different ideals than the ones I propose. She distinguishes between traditional, postmodern, cold modern and warm modern ideals of care. These models are not only normative a priori, they cannot explain the differences between the four countries either. Hence I developed new ideals of care.
to be solved through a pick-n-mix strategy, allowing for a bricolage of ideals. At the same time, it is hard to make some ideals coincide with others. And while countries are not culturally coherent, some ideals are more dominant than others (see Pfau-Effinger 1998; Archer 1996).

When the four caring states are unravelled, five ideals of care arise: full-time mother care, parental sharing, intergenerational care, surrogate mother care and professional care. Of course, other ideals can be found too, but these five cover most images of good care. The five ideals are more precise about caring practices as well as policies than the gender models developed elsewhere (Lewis 1992a; Leira 1992, 2002; Pfau-Effinger 1998, 1999) or work-life models (Hakim 2000). They are also much more precise than the six items that measure attitudes towards work and care in the European Value Study (see also Halman 1999/2000; Kalmijn 2003). Care ideals not only deal with the (bold) question of whether women should work or stay at home, but focus on what is seen as the appropriate care solutions when mothers are at work. Care ideals are not used as Weberian ideal types: they are real types. They tell a story about welfare states and are not used as confrontational strategies.

Table 7 Gendered ideals of care

<table>
<thead>
<tr>
<th>Gendered by definition</th>
<th>Gender-contested</th>
<th>Gendered in practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Informal</td>
<td>full-time mother</td>
<td>parental sharing</td>
</tr>
<tr>
<td>Formal</td>
<td>surrogate mother</td>
<td>professional care</td>
</tr>
</tbody>
</table>

The first ideal is obviously that of full-time mother care. In this ideal, continuous mother care performed at home is seen as the best way of bringing up children. It is the ideal of Madonna and Child. In the wake of the Second World War this ideal became hegemonic in every welfare state, although it disappeared quickly in some Scandinavian countries after the 1950s. The ideal of full-time mother care was strongly reinforced by psychologists, paediatricians and other children’s professionals who stressed the importance of a strong mother-child bond as a necessary condition for the development of a child. The work of the psychologist Bowlby was important for this theory, which was made popular by Dr. Spock. Bowlby is the founding father of attachment theory. Using subhuman primates, he showed in numerous studies that the natural social formation is the mother and her children rather than the family, including the father. The father is of no direct importance to the young child, only as an indirect value as an economic support and in his emotional support of the mother. Bowlby and Spock enjoyed their prime in the 1950s and 1960s but their legacy has lived on (Singer 1989, Soomers & Peters 1991, Lewis 1992b).

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7 Examples are: a pre-school child is likely to suffer if his mother works. A working mother can establish just as warm and secure a relationship as a non-working mother. No questions are asked about the proper solution for childcare.
The second ideal is that of parental sharing. This model is based on the assumption that men are able to care for children just as well as women. Advocates for this model sometimes go as far as to argue that an increase in fathers’ care would be better for children (Lamb 2004, or. 1981), who would then have another role model on top of the more feminine one. Another line of reasoning is that it is more just for women, who now work outside the home too, if men also took up their responsibilities: it contributes to gender equality. Good examples of efforts to increase parental sharing is an intervention in 1998 by the Dutch government, trying to enforce parental sharing by running a campaign entitled: ‘Who is that man that comes to our home every Sunday to cut the meat?’ Similarly, the Norwegian and Swedes have ‘daddy leave’, a law on parental leave with special rules for fathers. In the ideal of parental sharing, caring is just as important as working. Therefore, men should exchange time at work for time at home, whereas mothers should do the opposite. Parental sharing is thus built on two legs: not only should fathers be involved, it also assumes that both partners in a couple are allowed to work on a part-time basis. The ideal of parental sharing is subversive because it degenders caregiving. In this model, good childcare is still presented as home-based.

The ideal of intergenerational care is also home-based. The basic idea is that the first generation (grandmothers) cares for the third generation (children). In return, the second generation (the daughters who are now mothers) will care for the grandparents when become frail (Millar & Warman 1996; Leira et al. 2005). This is not just a calculated system of family exchange. It also guarantees good childcare, because who could care better than the mother’s mother? She is not only experienced and can be trusted more than anyone else, she will also love the children the most. The ideal of intergenerational care is not gendered in theory, but it still is in practice. Grandmothers, daughters, daughters-in-law and granddaughters are the ones most likely to provide care. The system is generally matrilineal. The ties that bind are familial, and the extended family is regarded as a haven that protects its members from having to seek care in the outside world, from the market or the state. Care is best performed at home, either the grandmother’s or the daughter’s. Taking your parents into your home, rather than ‘putting them’ in an old-age home, is also an important expression of the ideal of intergenerational care. This is the way to pay back all the care work they did for you when you were young and when you needed help when raising your children.

The ideal of professional care strongly contests the ideal of full-time motherhood because it maintains that professionals provide a different kind of care than that performed by mothers, but offer something extra that should still be part of the upbringing of every child. Professional care often takes place in childcare centres or is part of the educational system, and its purpose is defined in various ways: improving children’s welfare, enhancing their development, socialising them, and preparing them for school or for the labour market. Crucial in the ideal of professional care is the fact that carers are educated and are accountable in a professional way. In fact, all welfare states implement the ideal of professional care for children aged 5, 6 and 7 – this varies per country - through schools.
The ideal of professional care for younger children (0-3) is mainly manifest in a country like Denmark, which has the best-trained childcare workers in Europe (Siim 2000; Borchorst 2002). As we already saw in the previous chapter, the Danes believe that childcare improves children’s welfare. Daycare can give children the ‘social pedagogical’ attention that is not available at home. In the UK, education rather than welfare seems to be the most important rationale for professional childcare at the moment. This is a fairly recent development. Professional care in the UK used to be only for problem families, just like in the United States. There are thus already three different meanings for the ideal of professional care for children: welfare (for the needy), social-pedagogical and education.

The last ideal is that of the surrogate mother. According to this model, good-enough caring is still done best by a mother, even if it is not the mother of the children (Gregson & Lowe 1994; Nievers 2003). Care is done by a childminder, babysitter or family provider, usually for little pay, and because it is offered at the provider’s home it most closely resembles home-based care. ‘It may not help, but it can’t do any harm either’ is the way this type of care is legitimised. The purpose of such care is to ‘look after’ or ‘keep an eye on’ the child when the mother is at work. Surrogate mothers are not supposed to change or influence children’s upbringing. They do not give something ‘extra’ to the child. In contrast, professionals have different qualities and qualifications than parents, but surrogate mothers are considered to have the same kind of qualities mothers have – motherly warmth, attention, patience – even though they remain surrogate. It is still better if motherly warmth and attention is given by the real mother.

A change of ideals should be seen as a battle in which the argument for one ideal is often developed against a counter-ideal. Our argumentation and actions are part of a wider social context of controversy, as Billig (1991) points out. What we think and how we act refer not just to our own position or practice but also to those other positions in a public argument we oppose. We not only express our own position, we seek to criticise and thereby negate the counter-position. The ideal of parental sharing, for instance, is often constructed and defended against the ideal of professional care, while the ideal of professional care is constructed and defended against the ideal of the surrogate mother. Hence the importance not only of the ideal of care that is promoted but also of the reason why others are rejected.

Economy vs morality?
Ideals of care offer us a more adequate understanding of work-and-care decision-making in families, much more than for instance the individualistic preference person or the homo economicus. Still, the caring rationality should not be placed completely outside economic logics (as Finch (1989), Duncan and Edwards (1999) and Hochshild (19889, 2003) do). Financial structures are not simply context though: they are more important than that. In some countries more than in others – the UK for instance - decisions around work and care can lead to poverty. In addition, culturally defined morality itself can be shaped by material circumstances: financial structures often indicate the proper moral hierarchy in
behaviour. Financial measures have a normative meaning too. In the 1990s the Dutch and British social assistance law exempted lone mothers from the obligation to work. These women were in fact paid to stay at home. Such financial arrangements shape what is considered to be proper. Not all financial measures and structures have similar important consequences. The male breadwinner bonus in the Danish tax system has not had the effect that women or men stayed at home to care for children.

The crucial condition for being effective is that financial incentives must fit the dominant normative guidelines, moral rationalities or feeling rules which I have labelled as ideals of care. Economic incentives can become extremely powerful when they fit these norms, but they have little power when morally isolated. Affordable, state-subsidised childcare services are therefore probably only effective when they fit smoothly into a broader moral context and fit the dominant ideal of care. In other words, financial incentives should be examined within the context of a larger moral framework. This reveals whether they are powerful or not.

Table 8 Ideals of care and citizenship

<table>
<thead>
<tr>
<th>Who cares?</th>
<th>Full-time motherhood</th>
<th>Parental sharing</th>
<th>Intergenerational care</th>
<th>Professional care</th>
<th>Surrogate mother</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who cares?</td>
<td>Mother (f)</td>
<td>Parents (m/f)</td>
<td>Grandmothers (f)</td>
<td>Professionals (m/f)</td>
<td>Quasi mother (f)</td>
</tr>
<tr>
<td>Where?</td>
<td>Home</td>
<td>Home</td>
<td>Home and quasi-home</td>
<td>Outside the home</td>
<td>home/quasi-home</td>
</tr>
<tr>
<td>Consequences for women’s employment</td>
<td>Low</td>
<td>High in numbers, low in volume, high in part-time</td>
<td>Low for grandmothers (45 plus), high for daughters</td>
<td>High full-time</td>
<td>Moderate</td>
</tr>
<tr>
<td>Consequences for women’s income</td>
<td>Low</td>
<td>Medium, interdependency</td>
<td>Low for older generations, high for younger generations</td>
<td>High</td>
<td>High for working mothers, low for surrogate mothers</td>
</tr>
<tr>
<td>Consequences for participation in caregiving</td>
<td>High for women, low for men</td>
<td>Medium for men and women</td>
<td>High for older generation, low for younger generation</td>
<td>Low for parents</td>
<td>High for surrogate mothers, low for working mothers, low for fathers</td>
</tr>
<tr>
<td>Potentially degendering caring?</td>
<td>No</td>
<td>Yes</td>
<td>No (yes)</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

How do ideals of care work?
The ‘light theory’ of care ideals helps understand the cross-national differences and changes in women’s and men’s gendered division of work, care and income in three ways. Firstly, without the state support of an alternative ideal for full-time motherhood, women’s employment would be
hampered. Up until a certain employment level, women – sometimes together with men – will be able to make their own arrangements. To put it differently, state investments in childcare are important but they are not a necessary condition towards increasing mothers’ employment. If employment rates ‘need’ to go beyond a specific level, such as the Lisbon targets of 60 percent of women in employment by 2010, state intervention becomes decisive. Such logic is not only visible in the four countries of this study but also in Spain, Norway and Italy, as Leira et al. (2005) show.

Welfare state support is not only a necessary condition in practical terms but also to fill a moral void. Only when a new care ideal has been put in place will full-time motherhood become outdated, and mothers will enter the labour market. After the full-time motherhood norm, an alternative ideal of care supported by welfare policies is an important condition for mothers’ employment on a large scale. A parallel can be drawn with Kuhn’s (2003, or 1962) description of paradigm shifts: a new paradigm helps dismantle the previous.

The British case illustrates what happens when a welfare state does not promote an alternative care ideal, a new ‘logic of appropriateness’. While British women – more than in Belgium and the Netherlands – have always been financially encouraged to work (see the work incentives in taxation), they have not entered the labour market en masse. The problem is that for a long time, during the 18 years of Conservative dominance, no appropriate alternative for care was presented. Support for care policy was off the agenda. If the Conservatives had any ideal of care it was that of surrogate motherhood in the form of childminders, but they promoted childminders as a solution for care while parents increasingly distrusted them and increasingly preferred nurseries (see Thomson 1995; La valle et al. 2000). The promoted ideal of care has to fit the image citizens, or more precisely parents have of ‘appropriate care’. Otherwise the ideal will be very short-lived, like the British childminders. It is thus an important insight about the cultural approach of welfare states that the norms of parents matter much, as policy has to fit parent’s preferences (Pfau-Effinger 1998, 1999; Hakim 2000, 2003).

The story of the UK is much different than those of the other three countries. In Denmark the ideal of professional care has been wanted and promoted for several decades. Social pedagoges together with the women’s movement argued that children needed professional care (Borchorst 2002). In Flanders the ideal of the surrogate mother and intergenerational care are the most dominant alternatives since the 1980s. Christian-Democratic governments mostly invested in state-subsidised ‘onthaalmoeders’. This kind of childcare has been promoted by the Catholic Agrarian Women’s organisation in the 1970s. It was argued that such kind of care would not erode solidarity and it was also a cheap solution (KVLV 1977). In the Netherlands, parental sharing became the governmental ideal since the 1990s, supported by many parents, the women’s organisation and women within the trade union. Unlike the British case, in the past decades an appropriate ideal of care was established in the Netherlands, one that fitted parents’ wishes.

Secondly, some ideals of care perpetuate gendered notions of care while other ideals are more subversive. In other words, the ideal of the surrogate mother and intergenerational care perpetuate the
gendering of care. The more gendered the caring, the more difficult it is for mothers to legitimate paid employment. Surrogate mothers, often but not always childminders, are considered to have the same kind of qualities mothers have – motherly warmth, attention, patience – but remain surrogate. This entails that it is still preferable for children when motherly warmth and attention are given by the real mother. The same story applies to intergenerational care. This is not just a neutral, calculated system of family exchange, it is also based on the normative assumption that childcare is best performed by the mother’s mother.

Care in both ideals is still assigned to mothers. If such images of appropriate care were supported in public policy, not all mothers would want to work, and certainly not for long hours. These gendered notions of care hamper mothers’ (full-time) employment. As soon as it is possible – financially or career-wise – mothers would want to spend more time with their children. Hence the lower employment rates of Belgian mothers compared to the Danish (and recently to the Dutch), as well as the Belgian tendency to move towards part-time jobs. The kind of care promoted in the Belgian welfare state – intergenerational as well as surrogate motherhood – attracts women to work less rather than more. This may help to explain the Belgian trajectory compared to the one of Denmark and the Netherlands.

Parental sharing and professional care, on the other hand, can theoretically degender caregiving. Parental sharing assumes fathers to be more involved in caring and mothers less so. It assumes a decrease of fathers’ working hours and an increase of mothers’ employment. Women and men become interdependent. The Dutch welfare state promotes such an ideal. The ‘Combination Scenario’ is based on the idea that when men work less, women work more. Indeed, the ideal of parental sharing has paved the way for mothers’ spectacular entrance into the Dutch labour market. Since the ideal of parental sharing disconnects women from being the only person responsible for caring, mothers have also started to work.

At the same time, the ideal of parental sharing has difficulty coming into practice fully (in any country). The actual consequence of parental sharing is that it reinforces the notion that full-time working is not appropriate, and women are especially sensitive to this moral message. Women, not men, are more likely to work on a part-time basis. In other words – ironically – women are more adaptive to the ideal of parental sharing than men. Depending on calculations just 2.3 percent (Eurostat 2002) – 6 percent (Portegijs et al. 2004) to 9 percent (Knijn & van Wel 2001a) – of parents with young parents actually ‘share’ (meaning both having a job of about 32 hours). Most of them are higher educated. On the other hand, Dutch couples are more likely to work part-time than in any other country (Eurostat 2002). And more than in other countries, men seem to be more involved in caregiving. Dutch fathers for instance are more likely to take parental leave than in other countries (Bruning & Plantenga 1999), and recent research shows that half of the working mothers have a partner who stays at home on a weekday (Portegijs et al. 2004). Thus, although fathers are more likely
to care, parental sharing is too optimistic a label for the Dutch practice. The caveat of the ideal of parental sharing is thus that it takes two to share.

Professional care, supported and practiced in Denmark, is the best ‘guilt-reduction strategy’ for working mothers and stimulates them to work full-time. Only the ideal of professional care goes hand in hand with high full-time rates for mothers. It assumes that children are best-off when they are cared for by professionals who are highly educated and contribute to the upbringing of children. Danish childcare workers are the highest educated of all four countries. These professionals can do things parents cannot: they bring them up as social citizens. This also means that it is not appropriate to take care of children at home. In Denmark, the ideal of professional care has released parents from heavy care responsibilities. It has made full-time employment for both fathers and mothers fully legitimate. In other words, Danish parents do not have to work to make ends meet. They work so many hours because childcare is not only available and affordable, it is also professional. It offers the child more than when mothers stay at home.

Finally, specific ideals affect different categories of women. Women are to often seen as one category. The ideal of intergenerational care limits the possibility of women of the older generation to be involved in paid employment, or even gives them a double burden. Especially in Belgium and the UK, older women are heavily involved in caring for their grandchildren, which confines their employment careers (Vanpée et al. 2000; Wheelock & Jones 2002). The ideal of the surrogate mother also supports (higher) middle-class women’ working but reduces the citizenship of childminders, who often lack social security rights and are paid less. It assumes that these women are dependent on their husbands. In some countries, notably the UK, the ideal of surrogate motherhood reveals class differences (Gregson & Lowe 1995; O’Connor et al. 1999). Interestingly, this is not the case in Flanders or the Netherlands, where surrogate mothers are more often middle-class (Nievers 2003).

Moreover, the ideal of parental sharing is not very apt for lone mothers as they have no one to share the care with. They may need a different ideal of care, for instance that of professional care. Hence the low employment rates of Dutch and British lone mothers. The ideal of professional care gives employment opportunities to all women. It does not exclude certain categories of women. Therefore the Danish employment rates of women have been the highest in Europe.

**Conclusion**

Looking from the perspective of care ideals thus helps us understand the many anomalies and puzzles of the welfare states presented in this paper. Welfare states do matter for the gendered division of labour, care and income, but we can only understand how they matter when we bring in a cultural dimension. As the comparative welfare regime approach rightly shows, the welfare state is an important catalyst for women’s participation in work – although less for men’s participation in care. It is especially a cultural catalyst. Much more than cultural theories stress, the role of the state is pivotal.
Such an approach also questions the effectiveness of employment policy that is dominant in Europe. In Lisbon, the European leaders came together to set targets for women’s and men’s employment rates. If Europe wants to hold the broad ambition of solidarity with the needy, now and in the future, it needs more growth and more people at work, argues the high-level group chaired by Kok (European Communities 2004: 12). This paper shows that it is no easy task to raise (all) women’s employment rates across Europe. Simply changing the financial incentive structures of social policy is certainly not sufficient. Employment practices only change when ideals of care change. In other words, new employment patterns only arise when an ‘appropriate’ solution is found for care in each country.

The caveat is that this should fit the country-specific ideals of care parents have. This may be a difficult conclusion, as at the same time this book shows that the ideal of professional care is more likely to result in the highest full-time employment rates for mothers compared to other ideals. It is most inclusive for all women and is the best guilt-reduction strategy for mothers to work, yet this ideal may not be suitable for all European welfare states.

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Global Cultural Dimensions. Professor Geert Hofstede conducted one of the most comprehensive studies of how culture influences values at the workplace. His definition of culture is collective programming of the mind to distinguish the members of one category or group of people from others. High Individualism: security through insurance, children take care of self as soon as possible, disability a handicap to overcome. Low Individualism: security through the social network, children maintain a lifelong contact with family, disability a shame. Understanding the individualism versus collectivism as a cultural dimension clearly shows the diversity in how societies relate to one another. Differences in women’s employment rates, particularly for women of childbearing age, appear to be associated with the complex of work-family supports available to families. In this chapter we explore differences in women’s employment in France and the Netherlands over recent decades, taking a comparative-historical approach to examine the factors that shape women’s employment. 2005. The Cultural Dimension of Welfare States: Ideals of Care and Women’s Work. Paper presented at the Research Committee on Poverty, Social Welfare and Social Policy RC19, Northwestern University, Chicago, IL. Google Scholar. Kremer, Monique.